

For the Patient: HNNLAPRT

Other Names: Summary for Treatment of Locally Advanced Nasopharyngeal Cancer with Concurrent Cisplatin and Radiation

HN = Head and Neck (Tumour Group)

N = Nasopharyngeal

LA = Locally Advanced

P = Platinum (CisPlatin)

RT = Radiation Therapy

ABOUT THIS MEDICATION

What are these drugs used for?

- Cisplatin is an intravenous chemotherapy medication used for many types of cancer. In this protocol, radiation is the standard treatment and cisplatin is used as a radio-sensitizing agent which means it works along with radiation.

How does this drug work?

Cisplatin works by interfering with the genetic material of cancer cells and prevents their growth. The radiation kills cancer cells and stops them from growing.

INTENDED BENEFITS

- This therapy is being given to destroy and/or prevent the growth of cancer cells in your body.
- This treatment may improve your current symptoms, and delay or prevent the onset of new symptoms.
- This treatment is meant to control the disease and improve your overall survival.

HNNLAPRT TREATMENT SUMMARY

How is this drug given?

- Cisplatin is given intravenously (via the vein) once every week for a total of 7 weeks.
- Radiation is given daily Monday to Friday, with weekends and holidays off, for the duration of the treatment.

What will happen when I get my drugs?

- A blood test is done within one month prior to starting treatment.
- A blood test is done prior to each treatment of cisplatin. You will be given lab requisitions for these tests.
- You will be given hydration fluid intravenously consisting of potassium chloride and magnesium in Normal Saline prior to receiving your cisplatin.
- You will have been given a prescription for anti-nausea medication (filled at your regular pharmacy) that you bring in each time for your treatment. Your nurse will tell you when to take the anti-nausea medication. It is easier to prevent nausea than to treat it once it has occurred, so follow directions closely.

- To prevent nausea, be well-hydrated and eat small meals frequently. Refer to the pamphlet on “Food Choices to Help Control Nausea”.

TREATMENT PROTOCOL

DATE (dd/mm/yr)	CYCLE		TREATMENT
	Week 1	D 1	Cisplatin infusion + Radiation therapy
		D 2-5	Radiation therapy
	Week 2	D 1	Cisplatin infusion + Radiation therapy
		D 2-5	Radiation therapy
	Week 3	D 1	Cisplatin infusion + Radiation therapy
		D 2-5	Radiation therapy
	Week 4	D 1	Cisplatin infusion + Radiation therapy
		D 2-5	Radiation therapy
	Week 5	D 1	Cisplatin infusion + Radiation therapy
		D 2-5	Radiation therapy
	Week 6	D 1	Cisplatin infusion + Radiation therapy
		D 2-5	Radiation therapy
	Week 7	D 1	Cisplatin infusion + Radiation therapy
		D 2-5	Radiation therapy

What other drugs can interact with CISPLATIN?

- Drugs that can cause a decrease in kidney function or are eliminated by the kidneys (eg. Gentamicin, tobramycin, vancomycin, amphotericin B, furosemide (LASIX®))
- Phenytoin (DILANTIN®); cisplatin can cause a decrease in phenytoin blood levels
- Pyridoxine (vitamin B6) may cause a decrease in cisplatin’s effectiveness

CHEMOTHERAPY SIDE EFFECTS AND MANAGEMENT

Are there any risks?

- Unexpected and unlikely side effects can occur with any drug treatment. The ones listed in the following tables are particularly important for you to be aware of.

SERIOUS SIDE EFFECTS	HOW COMMON IS IT?	MANAGEMENT
When your white blood cells are low, you are at greater risk of having an infection . White blood cells protect your body by fighting bacteria (germs) that cause infection.	Rare	To help prevent infection: <ul style="list-style-type: none"> • Wash your hands often and always after using the bathroom. • Take care of your skin and mouth. • Avoid crowds and people who are sick • Call your doctor immediately at the first sign of infection such as fever (over 38°C or 100°F by an oral thermometer), chills, cough or burning when you pass urine.
When your platelets are low, you are at greater risk of bruising or bleeding more easily than usual .	Rare	To help prevent bleeding problems: <ul style="list-style-type: none"> • Try not to bruise, cut or burn yourself. • Clean your nose by blowing gently. Do not pick your nose. • Avoid constipation. • Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene. Some medications such as ASA (e.g. Aspirin®) or ibuprofen (e.g. Advil®) may increase your risk of bleeding. <ul style="list-style-type: none"> • Do not stop taking any medication prescribed by your doctor. • For minor pain, try acetaminophen (Tylenol®) first, but occasional use of ibuprofen is acceptable.
Chest pain or signs of a stroke may rarely occur	Rare	Go to your nearest emergency department if you should experience any chest pain or signs of a stroke.
Changes in hearing may occur	Uncommon	Contact your doctor if you have any concerns in your hearing.

OTHER SIDE EFFECTS	HOW COMMON IS IT?	MANAGEMENT
<p>Nausea and vomiting may occur after your treatment and may last for up to 24 hours. Nausea may last longer for some patients (ie. Delayed nausea and vomiting)</p>	<p>Very common</p>	<p>You will be given a prescription for anti-nausea drug(s) to take before your chemotherapy treatment and/or at home. It is easier to prevent nausea than treat it once it has occurred, so follow directions closely.</p> <ul style="list-style-type: none"> • Drink plenty of fluids • Eat and drink often in small amounts • Try the ideas in Food Choices to Help Control Nausea <p>Your doctor may manage delayed nausea and vomiting differently. Be sure to let your doctor know if you experience this.</p>
<p>Diarrhea may occur after your treatment. Diarrhea can lead to dehydration.</p>	<p>Uncommon</p>	<p>To help manage diarrhea:</p> <ul style="list-style-type: none"> • Drink plenty of fluids • Eat and drink often in small amounts • Avoid high fibre foods as outlined in Food Ideas to Help with Diarrhea
<p>Sore mouth may occur a few days after treatment. Mouth sores can occur on the tongue, the sides of the mouth or in the throat. Mouth sores or bleeding gums can lead to an infection.</p>	<p>Less common</p>	<ul style="list-style-type: none"> • Brush your teeth gently after eating and at bedtime with a very soft toothbrush. If your gums bleed, use gauze instead of a brush. Use baking soda instead of toothpaste. • Make a mouthwash with ½ teaspoonful baking soda or salt in 1 cup warm water and rinse several times a day. • Try soft bland foods like puddings, milkshakes and cream soups. • Avoid spicy, crunchy or acidic food and very hot or cold foods. <p>Try the ideas in Food Ideas to Help with Sore Mouth</p>

OTHER SIDE EFFECTS	HOW COMMON IS IT?	MANAGEMENT
<p>Hair loss is rare with cisplatin. If there is hair loss your hair will grow back once you stop treatment with cisplatin. Colour and texture may change.</p>	<p>Rare</p>	<ul style="list-style-type: none"> • Use a gentle shampoo and soft brush. • Care should be taken with use of hair spray, bleaches, dyes and perms.

RADIATION SIDE EFFECTS AND MANAGEMENT:

Are there any risks?

- Radiation can only cause side effects in the part of the body where it is delivered.
- Smoking is not advisable because it can [make your side effects worse and can make the treatment less effective. Ask your doctor, radiation therapist, or nurse for more information; or visit \[www.quitnow.ca\]\(http://www.quitnow.ca\)](#)
- Unexpected and unlikely side effects can occur with any radiation treatment. The ones listed in the following table are particularly important for you to be aware of.

RADIATION SIDE EFFECTS	MANAGEMENT
<p>Skin irritation may occur while receiving radiation therapy, since all radiation must pass through your skin. The side effects will vary depending on amount of radiation given, the area of the body treated, the size of the treatment area, and whether chemotherapy has been previously administered. Skin may feel warm and sensitive and colour may change.</p>	<ul style="list-style-type: none"> • Bathe using lukewarm water and mild, unscented soap. Pat skin dry with a soft towel. • Wear loose, comfortable clothing. • Protect skin from direct sunlight and wind. Avoid extremes of hot or cold (heating pads, icepacks, hot tubs, saunas, etc.). • You may swim if skin is intact. • Avoid perfume, alcohol, astringents and adhesives to the treated areas during treatment. • Be careful not to remove the skin markings placed by the Radiation Therapists. • The Radiation Therapists will give you information about skin care. • If your skin begins to peel or blister, call the nursing line.
<p>Dry Mouth (xerostomia) If your salivary glands were in the treated area, you may develop a dry mouth. This dryness may be permanent. A dry mouth can lead to oral problems, so consult your dental team to help you manage these problems.</p>	<ul style="list-style-type: none"> • You may need to moisten your mouth often, especially when eating and talking. • Avoid alcohol and caffeinated beverages which may cause dryness. Avoid carbonated beverages with sugar. Avoid diet drinks with phosphoric and citric acids.

RADIATION SIDE EFFECTS	MANAGEMENT
<p>Mouth Sores Commonly known as canker sores, these can become painful and may make it difficult to eat enough food.</p>	<ul style="list-style-type: none"> • Early detection and treatment of oral infections will diminish the severity of mouth sores and pain associated with it. Avoid commercial mouthwashes because they have a high alcohol content and can dry and irritate the oral tissues. • If you develop mouth or throat pain, please tell your oncologist. <p>Refer to Coping with Dry Mouth.</p>
<p>Loss of Taste</p>	<ul style="list-style-type: none"> • Tumours involving the 5th, 7th, 9th and 10th cranial nerves, radiation to the head and neck areas, and chemotherapy can all contribute to loss of taste sensation. Refer to Food Ideas to Cope with Taste and Smell Changes.
<p>Swallowing Problems If you develop scar tissue in the throat, this may cause difficulty with swallowing.</p>	<ul style="list-style-type: none"> • Stretching exercises may help with this problem. • Consult a speech pathologist for assessment and advice.
<p>Fatigue This is a common side effect for many people. This can begin within two weeks into treatment and last for several weeks afterwards.</p>	<ul style="list-style-type: none"> • There is no medication to treat the fatigue. • Balancing rest, good nutrition and fluid intake can help you manage this best.

THE FOLLOWING INFORMATION IS VERY IMPORTANT

SEE YOUR DOCTOR OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an **infection** such as fever (over 38°C or 100°F by oral thermometer), shaking chills, severe sore throat, productive cough (coughing up thick or green sputum), pain or burning when you pass urine.
- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heartbeat, face swelling or breathing problems.
- Signs of a **blood clot** such as tenderness or hardness over a vein, calf swelling and tenderness, sudden onset of cough, chest pain or shortness of breath.
- Signs of **bleeding problems** such as black, tarry stools, blood in urine, pinpoint red spots on skin, extensive bruising.

- Signs of a **stroke** such as sudden onset of severe headache, eyesight changes, slurred speech, loss of coordination, weakness or numbness in arm or leg.
- **Seizures or loss of consciousness**

SEE YOUR DOCTOR AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Muscle weakness
- Signs of kidney problems such as lower back pain or side pain, swelling of feet or lower legs
- Uncontrolled nausea, vomiting or diarrhea

CHECK WITH YOUR DOCTOR IF ANY OF THE FOLLOWING CONTINUE OR BOTHER YOU:

- Easy bruising or bleeding
- Redness, swelling, pain or sores where the needle was placed
- Redness, swelling, pain or sores on your lips, tongue, mouth or throat
- Ringing in your ears or hearing problems
- Signs of anemia such as unusual tiredness or weakness
- Skin rash or itching
- Numbness or tingling in feet or hands or painful leg cramps

If you experience symptoms or changes in your body that have not been described above but worry you, or in any symptoms are severe, contact:

_____ at telephone
number: _____