

For the Patient: BRAVPTRVIN

Other Names: Palliative Therapy for Metastatic Breast Cancer using Pertuzumab, Trastuzumab, and Vinorelbine as First-Line Treatment for Advanced Breast Cancer

BR = **BR**east
AV = **AdV**anced
P = **P**ertuzumab
TR = **TR**astuzumab
VIN = **VIN**orelbine

ABOUT THIS MEDICATION

What are these drugs used for?

- Pertuzumab, trastuzumab, and vinorelbine are drugs given in the hope of destroying or stopping the growth of breast cancer cells that have spread in your body. This treatment may improve your overall survival and help reduce your cancer symptoms.

How do these drugs work?

- Pertuzumab (per tooz' ue mab) and trastuzumab (tras too' zoo mab) are monoclonal antibodies, a type of protein designed to target and interfere with the growth of cancer cells.
- Vinorelbine (vi-NOR-el-been) works by interfering with dividing cells and preventing an increase in the number of cells.

INTENDED BENEFITS

- This therapy is given to destroy and/or limit the growth of cancer cells in your body. This treatment may improve your current symptoms, and delay the onset of new symptoms.

TREATMENT SUMMARY

How are these drugs given?

- Each medication will be given directly into the vein, intravenously (IV).
- The treatment will be given in 'cycles'. Each cycle length is 3 or 4 weeks in length.
- There will be two parts to this treatment.
 - In the first part, you will receive up to 8 cycles of pertuzumab, trastuzumab, and vinorelbine. Treatment will be given on days 1 and 8, every 3 weeks.
 - In the second part of your treatment, you will receive pertuzumab and trastuzumab together on day 1. This treatment will be repeated every 3 or 4 weeks for as long as it is helping, as determined by your oncologist.

The calendar below outlines your treatment plan.

Cycle 1:

C Y C L E	DATE	TREATMENT PLAN
		▶ Week 1 → Day 1: Pertuzumab and vinorelbine Day 2: Trastuzumab
		Week 2 → Day 8: Vinorelbine
	1	Week 3 → No treatment

Cycles 2 to 8:

C Y C L E	DATE	TREATMENT PLAN
		▶ Week 1 → Day 1: Pertuzumab, trastuzumab, and vinorelbine
		Week 2 → Day 8: Vinorelbine
	2	Week 3 → No treatment

Cycles 9 and onward:

C Y C L E	DATE	TREATMENT PLAN
		▶ Week 1 → Day 1: Pertuzumab and Trastuzumab
		Week 2 → no treatment
	9	Week 3 → no treatment

This treatment will repeat either every 3 weeks, or every 4 weeks, as determined by your oncologist. It will continue as long as it is helping, as determined by your oncologist.

What will happen when I get my drugs?

- You will see your clinician and will need to have a blood test before each treatment.
- The dose and timing of your treatment may be changed based on your blood counts and/or other side effects.
- Your very first treatment will take longer than other treatments because a nurse will be reviewing the possible side effects of your treatment plan and will discuss with you how to manage them. *It is a good idea to bring someone with you to your first chemotherapy appointment.*
- You may be given a prescription for anti-nausea medications (to be filled at your regular pharmacy). Please bring your anti-nausea medications with you for each treatment. Your nurse will tell you when to take the anti-nausea medication.
- You may also need to take your anti-nausea drugs at home after therapy. It is easier to prevent nausea than to treat it once it has occurred, so follow directions closely.

INSTRUCTIONS FOR THE PATIENT:

- Tell your doctor if you have ever had an unusual or **allergic reaction** to the following drugs before starting this treatment: pertuzumab, trastuzumab, or vinorelbine.
- The **drinking of alcohol** (in small amounts) does not appear to affect the safety or usefulness of treatment.
- Pertuzumab, trastuzumab, and vinorelbine may damage sperm and may harm the baby if used during pregnancy. It is best to use birth control while being treated with pertuzumab, trastuzumab, and vinorelbine, and for at least seven months following end of treatment. Tell your doctor right away if you or your partner becomes pregnant. Do not breastfeed during treatment.
- Tell doctors, dentists and other health professionals that you are being treated with pertuzumab, trastuzumab, and vinorelbine before you receive any treatment from them.

Medication Interactions:

- Other drugs may **interact** with this treatment. Tell your doctor if you are taking other drugs as you may need extra blood tests or your dose may need to be changed.
- Check with your doctor or pharmacist before you start or stop taking any drugs including all prescription and non-prescription medicines, vitamins, and herbal supplements.

SIDE EFFECTS AND WHAT TO DO ABOUT THEM

Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly important for you to be aware of as they are directly related to the common actions of the drug in your treatment plan.

SIDE EFFECTS DURING TREATMENT	MANAGEMENT
<p>Allergic reactions to pertuzumab or trastuzumab may rarely occur. Signs of an allergic reaction may include flushing, rash, itching, dizziness, swelling, chills, fever, shivering, nausea, vomiting, headache, weakness during the infusion, or breathing problems.</p> <p>This can occur immediately or several hours after receiving pertuzumab and usually only with the first or second dose.</p> <p>Reactions to trastuzumab are less common with later treatments even if you have a reaction with the first treatment.</p>	<p>Tell your nurse if this happens while you are receiving treatment or contact your oncologist immediately if this happens after you leave the clinic.</p> <ul style="list-style-type: none"> Your trastuzumab may be temporarily stopped and then given more slowly when restarted. You may be given other drugs to treat the reaction.
<p>Vinorelbine burns if it leaks under the skin.</p>	<p>Tell your nurse or doctor immediately if you feel burning, stinging, or any other change while the drug is being given.</p>
<p>Pain or tenderness may occur where the needle was placed.</p>	<ul style="list-style-type: none"> Apply warm compresses or soak in warm water for 15-20 minutes, several times a day.
<p>Fever, chills, and flu-like illness may rarely occur shortly after treatment with trastuzumab and pertuzumab. Fever may also occur shortly after treatment with vinorelbine. Fever should last no longer than 24 hours.</p>	<ul style="list-style-type: none"> Take acetaminophen (e.g., TYLENOL®) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day. Fever (over 38°C or 100°F by an oral thermometer) which occurs more than a few days after treatment may be a sign of an infection. Report this to your healthcare team immediately.
<p>Your white blood cells will decrease after your treatment. They usually return to normal after your last treatment. White blood cells protect your body by fighting bacteria (germs) that cause infection. When they are low, you are at greater risk of having an infection.</p>	<p>To help prevent infection:</p> <ul style="list-style-type: none"> Wash your hands often and always after using the bathroom. Avoid crowds and people who are sick. Call your healthcare team immediately at the first sign of an infection such as fever (over 38°C or 100°F by an oral thermometer), chills, cough, or burning when you pass urine.

SIDE EFFECTS DURING TREATMENT	MANAGEMENT
<p>Nausea and vomiting may occur after your treatment. If you are vomiting and it is not controlled, you can quickly become dehydrated.</p>	<p>You may be given a prescription for anti-nausea drug(s) to take before your 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 liquids. • Eat and drink often in small amounts. • Try the ideas in <i>Practical Tips to Help Manage Nausea*</i> <p>Tell your healthcare team if nausea or vomiting continues or is not controlled with your anti-nausea drug(s).</p>
<p>Diarrhea may sometimes occur. If you have diarrhea and it is not controlled, you can quickly become dehydrated.</p>	<p>If diarrhea is a problem:</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 <i>Food Ideas to Help Manage Diarrhea.*</i> <p>Tell your healthcare team if you have diarrhea for more than 24 hours.</p>
<p>Constipation may sometimes occur.</p>	<ul style="list-style-type: none"> • Exercise if you can. • Drink plenty of fluids. • Try the ideas in <i>Food Choices to Manage Constipation.*</i>
<p>Sore mouth may sometimes 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>	<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 ¼ teaspoon baking soda AND ¼ teaspoon salt in 1 cup warm water and rinse several times a day. • Try the ideas in <i>Food Ideas to Try with a Sore Mouth.*</i>
<p>Tiredness and lack of energy may occur.</p>	<ul style="list-style-type: none"> • Do not drive a car or operate machinery if you are feeling tired. • Try the ideas in <i>Fatigue/Tiredness-patient handout*</i>

SIDE EFFECTS DURING TREATMENT	MANAGEMENT
<p>Hair loss sometimes occurs with vinorelbine, is rare with pertuzumab, and does not occur with trastuzumab. Hair will grow back once you stop treatment. Colour and texture may change.</p>	<p>If hair loss is a problem, refer to Resources for Hair Loss and Appearance Changes – Patient Handout.*</p>
<p>Skin rash and itching may sometimes occur</p>	<p>If itching is very irritating, call your doctor. Otherwise, be sure to mention it at your next visit.</p>
<p>Numbness or tingling of the fingers or toes may commonly occur. This will slowly return to normal once your treatments are over. This may take several months.</p>	<ul style="list-style-type: none"> • Be careful when handling items that are sharp, hot, or cold. • Be careful when walking on uneven surfaces or doing activities that need you to balance or be steady. • Tell your healthcare team at your next visit if you have trouble with buttons, writing, picking up small objects, walking, or have fallen.
<p>Swelling of hands, feet, or lower legs may sometimes occur if your body retains extra fluid.</p>	<p>If swelling is a problem:</p> <ul style="list-style-type: none"> • Elevate your feet when sitting. • Avoid tight clothing.
<p>You may have trouble sleeping.</p>	<ul style="list-style-type: none"> • Tell your healthcare team if you continue to have trouble sleeping. • This will return to normal when you stop treatment
<p>Headache may sometimes occur.</p>	<p>Take acetaminophen (e.g., TYLENOL®) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day.</p>

***Please ask a member of your healthcare team for a copy.**

THE FOLLOWING INFORMATION IS VERY IMPORTANT

CHECK WITH YOUR HEALTHCARE TEAM OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heartbeat, face swelling or breathing problems.
- Signs of an **infection** such as fever (over 38°C or 100°F by an oral thermometer), shaking chills; severe sore throat, productive cough (coughing up thick or green sputum); cloudy or foul smelling urine; painful, tender, or swollen red skin wounds or sores.
- 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.
- Signs of **bleeding problems** such as black, tarry stools, blood in urine, pinpoint red spots on skin, extensive bruising.
- 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 **heart or lung problems** such as fast or uneven heartbeat, chest pain, chest pressure, shortness of breath, or difficulty in breathing, swelling of ankles, or fainting.
- Signs of **heart problems** such as fast or uneven heartbeat.

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

_____ at telephone number: _____