



Provincial Health Services Authority

For the Patient: GOSCPERT

Other Names: Treatment of Small Cell Gynecologic Cancer with Cisplatin and Etoposide with Radiation Therapy

GO = Gynecologic Oncology

SC = Small Cell

PE = CisPlatin or CarboPlatin, Etoposide

RT = Radiation Therapy

ABOUT THIS TREATMENT

What is this treatment used for?

- GOSCPERT is an intravenous (through the vein) drug treatment given with radiation therapy (RT) for small cell gynecological cancers. The goal of this treatment is to help control or shrink the cancer and some of the symptoms caused by it.
- Cisplatin or carboplatin, and etoposide are offered to people who have good kidney function and a good performance status. Performance status is a measure of how well a person is able to perform their usual activities.

How do these drugs work?

- Cisplatin, carboplatin, and etoposide are anticancer drugs that work by interfering with the genetic material of replicating cells and preventing an increase in the number of cancer cells.
- Cisplatin and carboplatin are also radio-sensitizers. This means that when these are given with radiation, the treatment is more effective.

INTENDED BENEFITS

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

TREATMENT SUMMARY

How are these drugs given?

- Your treatment plan consists of 4 to 6 chemotherapy “cycles”. Each cycle lasts 3 weeks (21 days).
- For each cycle, you will have two medications given to you intravenously (through the vein) on days 1, 2, and 3. If you are receiving carboplatin, this is only given on day 1.
 - Cisplatin or carboplatin is given first, and is given intravenously over approximately 30 minutes.
 - Etoposide is given second, and is given intravenously over approximately 45 minutes.

- For cycles given concurrently (together) with radiation therapy:
 - Radiation usually starts with the second cycle of chemotherapy, but your oncologist will decide what the best timing for you will be.
 - Radiation is usually given over a period of approximately five to seven weeks (including brachytherapy); once per day, during the week (Mon-Fri), with weekends off.
 - For the first three days of your scheduled radiation, you will receive both cisplatin and etoposide chemotherapy and your radiation will be given after your daily chemotherapy treatments are complete.

GOSPERT Treatment Protocol

Start Date: _____

Cycle 1:

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Blood Test Cisplatin/ Carboplatin & Etoposide	Cisplatin & Etoposide	Cisplatin & Etoposide	No chemo	No chemo	No chemo	No chemo
Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
No chemo	No Chemo	No chemo	No chemo	No chemo	No chemo	No chemo
Day 15	Day 16	Day 17	Day 18	Day 19	Day 20	Day 21
No chemo	No Chemo	No chemo	No chemo	No chemo	No chemo	No chemo

This 21-day cycle will repeat 3 to 5 more times.

*****Radiation will be given from Monday to Friday over approximately 5-7 weeks during one cycle, usually with cycle #2. You will still receive 3 days of chemotherapy during this cycle. At the end of this cycle, you may be given one extra week off (28-day cycle) – this will be up to your oncologist*****

What will happen when I get my drugs?

- A blood test is done within one month of starting treatment.
- A blood test is also done each cycle, on or before the first day of each cycle. The dose and timing of your chemotherapy 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 chemotherapy 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 will 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 will 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.

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 drugs in your treatment plan.

Your doctor will review the risks of treatment and possible side effects with you before starting treatment. The chemotherapy nurse will review possible side effects of the drugs and how to manage those side effects with you on the day you receive your first treatment.

SERIOUS SIDE EFFECTS DURING TREATMENT	MANAGEMENT
<p>Your white blood cells will decrease 7 – 10 days after your treatment. They usually return to normal 2 weeks 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. • Take care of your skin and mouth. • Call your doctor immediately at the first sign of an infection such as fever (over 100°F or 38°C by an oral thermometer), chills, cough, or burning when you pass urine.
<p>Your platelets may decrease during or after your treatment. They will return to normal after your last treatment. This is common. Platelets help to make your blood clot when you hurt yourself. You may bruise or bleed more easily than usual.</p>	<p>To help prevent bleeding problems:</p> <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. <p>Some medications such as ASA (e.g. ASPIRIN®) or ibuprofen (e.g. ADVIL®) may increase your risk of bleeding.</p> <ul style="list-style-type: none"> • Do not stop taking any medication that has been prescribed by your doctor (e.g. ASA for your heart). • For minor pain, try acetaminophen (e.g. TYLENOL®) first, but occasional use of ibuprofen may be acceptable.
<p>Allergic reactions may very rarely occur. Signs of an allergic reaction are dizziness, feeling faint, confusion, shortness of breath, and wheezing. This may occur immediately or several hours after receiving the drugs. It can occur after the first dose, or after many doses.</p>	<p>Tell your nurse if this happens while you are receiving the drugs or contact your doctor immediately if this happens after you leave the clinic.</p>
<p>Cisplatin and etoposide burn if they leak under the skin.</p>	<p>Tell your nurse immediately if you feel pain, burning, stinging, or any other change while the drug is being given.</p>

SERIOUS SIDE EFFECTS DURING TREATMENT	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.</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 to treat it once it has happened, 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>Food Choices to Control Nausea*</i>. <p>Your doctor may manage delayed nausea and vomiting differently. Be sure to let your doctor know if you experience this.</p>

OTHER SIDE EFFECTS DURING TREATMENT	MANAGEMENT
<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 mins. several times a day.
<p>Constipation or diarrhea may occur.</p>	<p>To help constipation:</p> <ul style="list-style-type: none"> • Exercise if you can. • Drink plenty of liquids (8 cups a day). • Try ideas in <i>Suggestions for Dealing with Constipation*</i>. <p>To help diarrhea:</p> <ul style="list-style-type: none"> • Drink plenty of liquids. • Eat and drink often in small amounts. • Avoid high fibre foods <p>as outlined in <i>Food Ideas to Help with Diarrhea*</i>.</p>
<p>Sore mouth may occur during treatment. This is common. 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 ½ teaspoon 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. • Try ideas in <i>Easy to Chew, Easy to Swallow Food Ideas*</i>.
<p>Loss of appetite is uncommon but may occur and may persist long after discontinuation of fluorouracil.</p>	<p>Try the ideas in <i>Food Ideas to Help with Decreased Appetite*</i>.</p>

OTHER SIDE EFFECTS DURING TREATMENT	MANAGEMENT
Tiredness and lack of energy may occur.	<ul style="list-style-type: none"> Do not drive a car or operate machinery if you are feeling tired. Try the ideas in <i>Your Bank of Energy Savings: How People with Cancer can Handle Fatigue*</i>
Hair loss sometimes occurs and may begin within a few days or weeks of treatment. Your hair may thin or you may become totally bald. Your scalp may feel tender. You may lose hair on your face and body. Your hair will grow back once your treatments are over and sometimes between treatments. Colour and texture may change.	<ul style="list-style-type: none"> Use a gentle shampoo and soft brush. Care should be taken with use of hair spray, bleaches, dyes, perms. Protect your scalp with a hat, scarf or wig in cold weather. Cover your head or apply sunblock on sunny days. Apply mineral oil to your scalp to reduce itching.

RADIATION SIDE EFFECTS DURING TREATMENT	MANAGEMENT
Tiredness or lack of energy may occur.	<ul style="list-style-type: none"> Do not drive a car or operate machinery if you are feeling tired. Try the ideas in <i>Your Bank of Energy Savings: How People with Cancer can Handle Fatigue*</i>.
Since radiation must pass through your skin, skin irritation may occur while receiving radiotherapy. Skin may feel warm and sensitive and color may change.	<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 deodorants, perfume, alcohol, astringents and adhesives.
Cough or shortness of breath may occur, as radiation lowers the level of the lung's <i>surfactant</i> , a substance that helps the lungs expand.	<ul style="list-style-type: none"> Drink plenty of fluids throughout the day If you are experiencing cough and are also feverish or unwell, it's important to call your doctor.
You may experience a sore throat or difficulty swallowing .	<ul style="list-style-type: none"> Try eating smaller amounts of food at more frequent intervals. Avoid highly seasoned foods, acidic foods, or foods that are very hot or very cold. Drink plenty of fluids throughout the day. Try ideas <i>Easy to Chew Recipes</i> and <i>Soft, Moist Food Ideas*</i>
Hair loss will occur on the area of skin being treated.	<ul style="list-style-type: none"> Hair usually grows back within a few months. Sometimes, as it grows back, it can become patchy.

***Please ask your chemotherapy nurse, dietitian, or pharmacist for a copy.**

INSTRUCTIONS FOR THE PATIENT

Medication Interactions:

- Other drugs such as some antibiotics given by vein (eg: tobramycin, vancomycin), furosemide (Lasix®), phenytoin (Dilantin®), pyridoxine (Vitamin B6), atovaquone (MEPRON®), warfarin (Coumadin®), glucosamine and St John's Wort may interact with GOSCPERT. Tell your doctor if you are taking these or other drugs as you may need extra blood tests, your dose may need to be changed or your treatment may need to be held for a few days.
- Check with your doctor or pharmacist before you start taking any new prescription or non-prescription drugs.
- If you are admitted to hospital for intravenous antibiotics, be sure that the doctor treating you knows you are on cisplatin.

Other important things to know:

- Cisplatin can cause changes in **kidney function**, but this is not frequent with the doses used in this type of treatment. It is important that you are well-hydrated before and after treatment.
- Sometimes, the nerve which allows you to hear can be affected by cisplatin. This could result in you experiencing "**tinnitus**" (ringing in the ears) or a change in your hearing. Report any of these problems to your doctor and/or nurse.
- The **drinking of alcohol** (in small amounts) does not appear to affect the safety or usefulness of this treatment.
- This treatment may cause **sterility** in men and **menopause** in women. If you plan to have children, discuss this with your doctor before starting treatment.
- This treatment may damage sperm and may cause harm to the baby if used during pregnancy. It is best to use birth control while you are undergoing treatment. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.
- Tell doctors, dentists, or other health professionals that you are being treated with cisplatin or carboplatin, etoposide, and radiation therapy before you receive any treatment from them.

THE FOLLOWING INFORMATION IS VERY IMPORTANT

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

- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling or breathing problems.
- Signs of an **infection** such as fever (over 100°F or 38°C by an oral thermometer); chills, cough, pain or burning when you pass urine.
- 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 an arm or leg.
- 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 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.
- **Seizures** or **loss of consciousness** with or without **confusion, headache, or changes in eyesight.**

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

- **Muscle weakness.**
- Signs of **kidney problems** such as lower back or side pain, swelling of feet or lower legs.
- Uncontrolled **nausea, vomiting** or **diarrhea**.
- Signs of **anemia** such as unusual tiredness or weakness.
- **Numbness** or tingling in feet or hands.

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

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

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: _____