



Provincial Health Services Authority

For the Patient: GOTDLRM

Other Name: Therapy for Low Risk Gestational Trophoblastic Cancer using Methotrexate

GO = Gynecologic Oncology

TD = Trophoblastic Disease

LR = Low Risk

M = Methotrexate

ABOUT THIS MEDICATION

What is this drug used for?

- Methotrexate (meth oh trex' ate) is a drug treatment used to treat some types of cancers and gestational trophoblastic disease.

How does this drug work?

- Methotrexate works by interfering with the genetic material of replicating cells and preventing an increase in the number of cancer cells.

INTENDED BENEFITS

- This therapy is being given to destroy the cancer cells in your body, with curative intent. Research has shown that patients with your diagnosis are likely to have improved overall survival and chance of cure with this treatment.

TREATMENT SUMMARY

How is this drug given?

- Your treatment plan consists of chemotherapy “cycles”. Each cycle lasts 2 weeks (14 days). This 14-day cycle will repeat until 6 weeks after your beta HCG reaches a normal level.
- For each cycle, you will have one medication given to you intramuscularly (injected into the muscle) on days 1, 3, 5, and 7. Also, you will be given an oral medicine called leucovorin (also called folinic acid) to be taken 30 hours after each dose of methotrexate.
- In some cases, methotrexate may be given on a different day, or may be given to you intravenously (injected into the vein) instead of intramuscularly. Your doctor would discuss this with you.

Start Date: _____

The calendar outlines your overall treatment plan.

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Methotrexate	Leucovorin	Methotrexate	Leucovorin	Methotrexate	Leucovorin	Methotrexate
Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
Leucovorin	No chemo	No chemo	No chemo	No chemo	No chemo	No chemo

This 14-day cycle will repeat until 6 weeks after the β HCG value has normalized.

What will happen when I get my drugs?

- A blood test is done each cycle, on each treatment day or the day before. The dose and timing of your treatment may be changed based on your blood counts and/or other side effects. • Your 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 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.

MEDICATION INTERACTIONS

Other drugs may interact with your treatment. Tell your doctor if you are taking other medications, as you may need extra blood tests or your dose may need to be changed. Check with your doctor or pharmacist before you start taking any new prescription or nonprescription medications.

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.

SIDE EFFECTS	MANAGEMENT
<p>Normal 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. • Avoid crowds and people who are sick. • 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>Normal platelets help your blood to clot normally after an injury (e.g., cut). When the platelet count is low you may be more likely to bruise or bleed.</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). <p>For minor pain, try acetaminophen (e.g., TYLENOL®) first, but occasional use of ibuprofen may be acceptable.</p>
<p>Pain or tenderness may occur where the needle was placed.</p>	<ul style="list-style-type: none"> • Apply cool compresses or soak in cool water for 15-20 minutes several times a day.

SIDE EFFECTS	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 Manage Nausea</i>.* • Tell your healthcare team if nausea or vomiting continues or is not controlled with your anti-nausea drug(s).
<p>Skin rashes may occur</p>	<p>To help itching:</p> <ul style="list-style-type: none"> • You can use calamine lotion. • If very irritating, call your doctor during office hours. • Otherwise make sure to mention it at your next visit.
<p>Fever and chills may occur shortly after treatment with methotrexate. Fever should last no longer than 24 hours.</p>	<ul style="list-style-type: none"> • Take acetaminophen (e.g., TYLENOL®) every 4-6 hours, 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 the sign of an infection. Report this to your healthcare team immediately.
<p>Diarrhea may occur. If you have diarrhea and it is not controlled, you can quickly become dehydrated.</p>	<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 as outlined in <i>Food Choices to Help Manage Diarrhea</i>.* <p>Tell your healthcare team if you have diarrhea for more than 24 hours.</p>

SIDE EFFECTS	MANAGEMENT
<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>	<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>Muscle or joint pain may commonly occur a few days after your treatment.</p>	<p>You may take acetaminophen (e.g., TYLENOL®). Tell your healthcare team if the pain interferes with your activity.</p>
<p>Loss of appetite and weight loss are common and may persist long after discontinuation of methotrexate.</p>	<p>Try the ideas in <i>Food Ideas to Help with Decreased Appetite</i>.*</p>
<p>Tiredness and lack of energy may occur.</p>	<p>Do not drive a car or operate machinery if you are feeling tired.</p> <ul style="list-style-type: none"> • Try the ideas in <i>Fatigue/Tiredness – Patient Handout</i>.*
<p>Hair loss is rare with methotrexate. Your hair will grow back once you stop treatment with methotrexate. Colour and texture may change.</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. • If hair loss is a problem, refer to <i>Resources for Hair Loss and Appearance Changes – Patient Handout</i>.*
<p>Your skin may darken in some areas.</p>	<ul style="list-style-type: none"> • This will slowly return to normal once you stop treatment with methotrexate.
<p>Your skin may sunburn easily.</p>	<ul style="list-style-type: none"> • Tell your healthcare team if you have a severe sunburn or skin reaction such as itching, rash, or swelling after sun exposure. • Refer to <i>Your Medication Sun Sensitivity and Sunscreens</i>* or the <i>BC Health Guide</i> for more information.

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

Other important things to know:

- Alcohol may increase the risk of liver problems with methotrexate and should be avoided.

- This treatment may cause menopause in women.
- Do not breast feed during treatment.
- Tell all doctors or dentists you see that you are being treated with chemotherapy before you receive treatment of any kind.

INSTRUCTIONS FOR THE PATIENT:

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

- 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 an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling, or breathing problems.
- Signs of **lung problems** such as shortness of breath or difficulty in breathing.
- **Seizures** or **loss of consciousness**.
- Sudden **abdominal pain** or tenderness.

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

- Signs of **anemia** such as unusual tiredness or weakness.
- Signs of **liver problems** such as yellow eyes or skin, white or clay-coloured stools.
- Signs of **kidney problems** such as lower back or side pain, swelling of feet or lower legs, numbness or tingling in feet or hands.
- **Changes in eyesight.**
- Signs of **gout** such as joint pain
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CHECK WITH YOUR DOCTOR IF ANY OF THE FOLLOWING CONTINUE OR BOTHER YOU:

- Uncontrolled nausea, vomiting, or diarrhea.
- For diabetics: uncontrolled blood sugars.
- Headache not controlled with acetaminophen.
- Easy bruising or minor bleeding.
- Redness, swelling, pain, or sores where the needle was placed.
- Redness, swelling, pain, or sores on your lips, tongue, mouth, or throat.
- Skin rash or itching.

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 _____