

Kidney Cancer: Chemotherapy



What is chemotherapy?

Chemotherapy (chemo) uses medicines to kill cancer cells. The medicines attack and kill cells that grow quickly, such as cancer cells. But some normal cells also grow quickly. Because of this, chemo can harm those cells. This causes side effects.

When might chemotherapy be used for kidney cancer?

Chemo doesn't work well for most kinds of kidney cancer, specifically the clear cell type of renal cell carcinoma. Targeted therapy, immunotherapy, or both are most often used. These are other types of systemic treatment using medicines.

Chemo may be used in rare cases or in clinical trials where other therapies haven't worked.

Some types of kidney cancers, such as urothelial carcinoma, collecting duct carcinoma, renal medullary cancer, and Wilms tumors, may be treated with chemotherapy.

How is chemotherapy given for kidney cancer?

Your cancer specialist (oncologist) will talk with you about how often and how long you'll get chemo, as well as which medicine will be used. Many times, more than one medicine is used. Chemo may be given in a hospital outpatient facility, a healthcare provider's office or clinic, or a hospital. It can be given in any of these ways:

- **IV (intravenous) drip.** A bag filled with the medicine drips through a tube into a small catheter that's put into a vein.
- **Oral.** You swallow these medicines as pills.
- **Injection.** You get these medicines as a shot. This is done through a needle into a vein, muscle, or under your skin into tissue.

What types of chemotherapy medicines are used to treat kidney cancer?

The chemotherapy used depends on the type of kidney cancer. Some of the chemotherapy medicines that might be used include:

- Gemcitabine
- 5-fluorouracil (5-FU)
- Capecitabine
- Doxorubicin
- Cisplatin
- Carboplatin
- Paclitaxel
- Dactinomycin
- Vincristine

- Cyclophosphamide
- Etoposide

You may take more than one medicine. This is called combination therapy. Which chemo medicines you get and how often you get them depend on many factors. Sometimes chemo is given along with immunotherapy, targeted therapy, or both.

Chemotherapy in cycles

You get chemo in cycles over a period of time. That means you get the chemo medicine for a set amount of time and then you have a rest period. Each period of treatment and rest is 1 cycle. You may have several cycles. Getting treatment in cycles helps by:

- **Killing more cancer cells.** Chemo tends to kill cells at certain points of their growth. In cycles, it can kill more cancer cells over time. This is because cells aren't all growing and dividing at the same points at the same time. Cycles allow the medicine to kill more cells.
- **Giving your body a rest.** Treatment is hard on other cells of the body that grow and divide quickly. This includes cells in the lining of your mouth and stomach. This causes side effects, such as mouth sores and upset stomach (nausea). Between cycles, your body can get a rest from the chemo and healthy cells can recover.
- **Giving your mind a rest.** Getting chemo can be stressful. Taking breaks between cycles helps you get an emotional break between treatments.

What are common side effects of chemotherapy?

Side effects are common with chemo. But it's important to know they can often be prevented or controlled. Side effects depend on the type and amount of chemo you're getting. They vary from person to person.

Some common short-term (temporary) side effects include:

- Nausea
- Vomiting
- Mouth sores
- Constipation
- Diarrhea
- Hair loss
- Increased risk for infections
- Easy bruising or bleeding
- Tiredness
- Loss of appetite
- Dizziness
- Dry or darkening skin
- Tingling, numbness, or swelling in hands or feet

Most side effects get better between treatments and go away over time after treatment ends. There are often ways to prevent or reduce them. You may also be able to help control some of these side effects. Tell your healthcare providers about any side effects you have. They can help you manage them. Also ask your

healthcare provider if you should expect any long-term side effects. They can tell you how to manage or prevent them.

Working with your healthcare provider

You'll have blood tests done regularly while you're getting chemo. This is to make sure you aren't having harmful reactions. Make sure you ask which problems, if any, need you to call your healthcare provider or nurse right away. For instance, chemo can make you more likely to get infections. You may be told to call if you have any of these symptoms:

- Fever
- Sore throat
- Shaking chills
- Redness, swelling, and warmth at the site of an injury or IV catheter
- New cough or shortness of breath
- Nasal congestion
- Burning during urination

Make sure you know what number to call with questions, including after hours when your healthcare provider's office is closed, and on weekends and holidays.

It may be helpful to keep a diary of your side effects. Write down physical, thinking, and emotional changes. A written list will make it easier for you to remember your questions when you go to your appointments. It will also make it easier for you to work with your healthcare team to make a plan to manage your side effects.

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