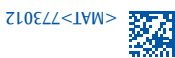


Les informations suivantes sont destinées exclusivement aux professionnels de santé.



AXOTERE® 80 mg/4 ml solution à diluer pour perfusion docetaxel



GUIDE DE PREPARATION DE TAXOTERE 80 mg/4 ml, SOLUTION A DILUER POUR PERFUSSION

Il est important que vous lisiez la totalité de ce guide avant la préparation de la solution pour perfusion de Taxotere.

Recommandations pour une manipulation sûre : Docetaxel est un agent anticancéreux et, comme pour tous les autres composés potentiellement toxiques, des précautions doivent être prises pendant la manipulation et la préparation des solutions de docetaxel. L'usage de gants est recommandé.

En cas de contact cutané avec la solution à diluer ou la solution pour perfusion de Taxotere, rincer immédiatement et soigneusement la peau au savon et à l'eau. En cas de contact d'une muqueuse, rincer immédiatement et soigneusement la muqueuse contaminée à l'eau.

Préparation pour l'administration intraveineuse :

Préparation de la solution pour perfusion :

NE PAS utiliser d'autres médicaments contenant du docetaxel se présentant sous 2 flacons (solution à diluer et solvant) avec ce médicament (Taxotere 80 mg/4 ml solution à diluer pour perfusion, qui contient seulement 1 flacon).

Taxotere 80 mg/4 ml solution à diluer pour perfusion ne requiert PAS de dilution préalable avec un solvant et est prêt à être ajouté à la solution pour perfusion.

- Chaque flacon est à usage unique et doit être utilisé immédiatement après ouverture. En cas d'utilisation non immédiate, les durées et conditions de conservation sont de la responsabilité de l'utilisateur. Plus d'un flacon de solution à diluer pour perfusion peuvent être nécessaire pour obtenir la dose prescrite à un patient. Par exemple, une dose de 140 mg de docetaxel nécessiterait 7 ml de solution à diluer de docetaxel.

- Extraire de façon aseptique la quantité requise de solution à diluer à l'aide d'une seringue graduée adaptée avec une aiguille de 21G pour l'injection dans la poche de perfusion.

Dans un flacon de Taxotere 80 mg/4 ml, la concentration de docetaxel est de 20 mg/ml.

- Puis, injecter en une injection unique (en une seule fois) dans une poche ou un flacon de perfusion de 250 ml contenant soit une solution de glucose à 5% soit une solution de chlorure de sodium à 9 mg/ml (0.9%) pour perfusion. Si une dose supérieure à 190 mg de docetaxel est requise, utiliser un volume plus important de vecteur de perfusion de sorte que la concentration en docetaxel de 0,74 mg/ml ne soit pas dépassée.

- Mélanger manuellement la poche ou le flacon de perfusion par rotation manuelle.
- D'un point de vue microbiologique, la reconstitution/dilution doit être réalisée dans des conditions contrôlées et aseptiques et la solution de perfusion doit être utilisée immédiatement. En cas d'utilisation non immédiate, les durées et conditions de conservation sont de la responsabilité de l'utilisateur.

Après addition dans la poche de perfusion, comme recommandé, la solution de docetaxel pour perfusion est stable pendant 6 heures conservée à une température inférieure à 25°C. Cette solution doit être utilisée dans les 6 heures (incluant l'heure d'administration de la perfusion intraveineuse).

De plus, la stabilité physico-chimique en condition d'utilisation, de la solution pour perfusion, préparée selon les recommandations, a été démontrée dans des poches exemptes de PVC, jusqu'à 48 heures conservées entre 2°C et 8°C.

La solution pour perfusion de docetaxel est hyper-saturée, et peut, par conséquent cristalliser dans le temps. En cas d'apparition de cristaux, la solution ne devra plus être utilisée et devra être jetée.

- Comme pour tous les médicaments administrés par voie parentérale, la solution pour perfusion doit être contrôlée visuellement avant toute utilisation ; les solutions contenant un précipité doivent être éliminées.

Élimination

Tout le matériel utilisé pour la dilution et l'administration doit être détruit conformément aux procédures hospitalières de traitement des déchets cytotoxiques. Ne jetez aucun médicament au tout-à-l'égout. Demandez à votre pharmacien/ne d'éliminer les médicaments que vous n'utilisez plus. Ces mesures contribueront à protéger l'environnement.



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Fréquence non déterminée (ne peut pas être estimée à partir des données existantes) :

- maladie pulmonaire interstitielle (inflammation des poumons entraînant une toux et être contrôlée visuellement. L'influence des poumons peut aussi survenir quand le traitement par docetaxel est utilisé avec une radiothérapie)
- pneumonie (infection des poumons)
- fibrose pulmonaire (cicatrices et épaississement au niveau des poumons avec essoufflement)
- vision trouble due à un gonflement de la rétine de l'œil (edème maculaire cystoïde)
- diminution du sodium, du potassium, du magnésium et/ou du calcium dans votre sang (troubles de l'équilibre électrolytique).
- arythmie ventriculaire ou tachycardie ventriculaire (se traduisant par un rythme cardiaque irrégulier et/ou rapide, un essoufflement, des vertiges et/ou des évanouissements). Certains de ces symptômes peuvent être graves. Si vous souffrez de l'un d'entre eux, prévenez immédiatement votre médecin.
- Réaction cutanée au niveau des précédents sites d'injection.
- Le lymphome non hodgkinien (cancer affectant le système immunitaire) et d'autres cancers pourraient survenir chez les patients traités par docetaxel avec certains autres traitements anticancéreux.
- Syndrome de Stevens-Johnson (SJ) et nécrolyse épidermique toxique (NET) (cloques, décollement, ou saignement sur l'importe quelle partie de votre peau - incluant les lèvres, les yeux, la bouche, le nez, les organes génitaux, les mains ou les pieds - avec ou sans éruption. En même temps, vous pouvez également avoir des symptômes pseudo-grippaux tels que fièvre, frissons, ou douleur dans les muscles).
- Postulose exanthématique aiguë généralisée (PEAG) (éruption étendue, rouge, squameuse, avec des bosses sous une peau gonflée -incluant les plis, le tronc et les mains et les bras- et des cloques accompagnées de fièvre).

Fréquence non déterminée (ne peut pas être estimée à partir des données existantes) :

Vous recevez habituellement votre perfusion toutes les 3 semaines. Votre médecin pourra changer la posologie et la fréquence d'administration en fonction des résultats des analyses sanguines, de votre état général et de votre réponse au Taxotere. Veuillez informer votre médecin notamment en cas de diarrhées, de plaies dans la bouche, de saignement d'engorgissements, de picotements ou de fourmillements, de fièvre et rappelez-vous les résultats d'analyse sanguine. Ces informations lui permettront de déterminer si une réduction de posologie doit être envisagée. Si vous avez d'autres questions sur l'utilisation de ce médicament, demandez plus d'informations à votre médecin ou à votre pharmacien/ ne hospitalier.

Fréquence d'administration

Vous recevez habituellement votre perfusion toutes les 3 semaines. Votre médecin pourra changer la posologie et la fréquence d'administration en fonction des résultats des analyses sanguines, de votre état général et de votre réponse au Taxotere.

Veuillez informer votre médecin notamment en cas de diarrhées, de plaies dans la bouche, de saignement d'engorgissements, de picotements ou de fourmillements, de fièvre et rappelez-vous les résultats d'analyse sanguine. Ces informations lui permettront de déterminer si une réduction de posologie doit être envisagée. Si vous avez d'autres questions sur l'utilisation de ce médicament, demandez plus d'informations à votre médecin ou à votre pharmacien/ ne hospitalier.

4. QUELS SONT LES EFFETS INDESIRABLES EVENTUELS

Comme tous les médicaments, ce médicament peut provoquer des effets indésirables bien que tous n'y soient pas sujets. Votre médecin vous en parlera et vous expliquera les risques et bénéfices potentiels de votre traitement.

Les effets indésirables les plus fréquemment observés lors de l'administration du Taxotere utilisé seul, sont : la diminution du nombre des globules rouges ou des globules blancs, la perte de cheveux, les nausées, les vomissements, des plaies dans la bouche, des diarrhées et de la fatigue.

La sévérité des effets indésirables du Taxotere peut être majorée en cas d'association avec d'autres médicaments anticancéreux.

A l'hôpital, pendant la perfusion de Taxotere, les réactions allergiques susceptibles peuvent survenir (pouvant affecter plus d'une personne sur 10) :

- bouffées de chaleur, réactions cutanées, démangeaisons,
- oppression thoracique, difficulté respiratoire,
- fièvre ou frissons,
- douleurs dorsales,
- hypotension.

Des réactions plus sévères peuvent survenir. Si vous avez déjà développé une réaction allergique au paclitaxel, vous êtes susceptible de développer une réaction allergique au docetaxel, qui peut s'avérer plus sévère.

Vous serez l'objet d'une surveillance attentive par l'équipe médicale lors de la perfusion. Signalez immédiatement si vous constatez l'un de ces effets indésirables.

Entre les perfusions de Taxotere, les effets suivants peuvent survenir avec une fréquence variable en fonction des autres médicaments anticancéreux associés :

Très fréquents (peuvent affecter plus d'une personne sur 10) :

- infections, diminution du nombre de globules rouges (anémie) ou de globules blancs (qui jouent un rôle important contre les infections) et des plaquettes
- fièvre : en cas de fièvre, vous devez appeler votre médecin immédiatement
- réactions allergiques graves ci-dessus
- perte de l'appétit (anorexie)
- insomnie
- sensation d'engourdissement ou de picotements ou douleurs des articulations ou des muscles
- maux de tête
- altération du goût
- inflammation des yeux ou augmentation de la production de larmes (larmoiement)
- gonflement par dysfonctionnement du drainage lymphatique
- respiration courte
- écoulement nasal ; inflammation de la gorge et du nez ; toux
- saignement du nez
- plaies de la bouche
- troubles de la digestion, incluant nausées, vomissements et diarrhée,
- constipation
- douleur abdominale
- indigestion
- perte des cheveux : dans la plupart des cas, les cheveux repoussent normalement à l'arrêt du traitement. Dans certains cas (fréquence indéterminée) la perte permanente des cheveux a été observée.
- rougeur et gonflement des paumes de vos mains ou des plantes de vos pieds (mais également des bras, du visage ou du corps), qui peuvent faire peler votre peau
- changement de la couleur de vos ongles qui ensuite peuvent se décolorer
- douleurs musculaires, dorsales et osseuses
- modification ou absence des règles
- gonflement des mains, pieds et jambes
- fatigue ou syndrome pseudo-grippal
- prise ou perte de poids.

Frequents (peuvent affecter au plus 1 personne sur 10) :

- infection buccale à champignons (muguet)
- déshydratation
- vertiges
- troubles de l'audition
- diminution de la pression artérielle, battements du cœur rapides ou irréguliers
- insuffisance cardiaque
- œsophagie
- écchymose de la bouche
- difficultés à avaler ou douleur à l'ingestion
- hémorragie
- augmentation des enzymes du foie (nécessitant la réalisation de tests sanguins réguliers).

Peu fréquents (peuvent affecter au plus 1 personne sur 100) :

- œdème
- réactions cutanées au site d'injection, phlébite (inflammation de la veine) ou gonflement
- caillots sanguins.
- La leucémie myéloïde aiguë et le syndrome myéloïdplasique (types de cancers du sang) pourraient survenir chez les patients traités par docetaxel avec certains autres traitements anticancéreux.

Rares (peuvent affecter au plus 1 personne sur 1000) :

- inflammation du colon, de l'intestin grêle, pouvant être fatale (fréquence non déterminée), perforation intestinale.

The following information is intended for healthcare professionals only:

AXOTERE® 80 mg/4 ml concentrate for solution for infusion docetaxel



PREPARATION GUIDE FOR USE WITH TAXOTERE 80 mg/4 ml CONCENTRATE FOR SOLUTION FOR INFUSION

It is important that you read the entire contents of this guide prior to the preparation of the Taxotere infusion solution.

Recommendations for the safe handling

Docetaxel is an antineoplastic agent and, as with other potentially toxic compounds, caution should be exercised when handling it and preparing its solutions. The use of gloves is recommended.

If Taxotere concentrate or infusion solution should come into contact with skin, wash immediately and thoroughly with soap and water. If it should come into contact with mucous membranes, wash immediately and thoroughly with water.

Preparation of the intravenous administration

Preparation of the infusion solution

DO NOT use other docetaxel medicinal products consisting of 2 vials (concentrate and solvent) with this medicinal product (Taxotere 80 mg/4 ml concentrate for solution for infusion, which contains only 1 vial).

Taxotere 80 mg/4 ml concentrate for solution for infusion requires NO prior dilution with a solvent and is ready to add to the infusion solution.

- Each vial is for single use and should be used immediately after opening. If not used immediately, in-use storage times and conditions are the responsibility of the user. More than one vial of concentrate for solution for infusion may be necessary to obtain the required dose for the patient. For example, a dose of 140 mg docetaxel would require 7 ml docetaxel concentrate for solution.
- Aseptically withdraw the required amount of concentrate for solution for infusion with a calibrated syringe fitted with a 21G needle.

PACKAGE LEAFLET: INFORMATION FOR THE PATIENT

AXOTERE® 80 mg/4 ml concentrate for solution for infusion docetaxel



Read all of this leaflet carefully before you start using this medicine because it contains important information for you.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor, hospital pharmacist or nurse.
- If you get any side effects talk to your doctor, hospital pharmacist or nurse. This includes any possible side effects not listed in this leaflet. See section 4.

What is in this leaflet:

- What Taxotere is and what it is used for
- What you need to know before you use Taxotere
- How to use Taxotere
- Possible side effects
- How to store Taxotere
- Contents of the pack and other information

1. WHAT TAXOTERE IS AND WHAT IT IS USED FOR

The name of this medicine is Taxotere. Its common name is docetaxel. Docetaxel is a substance derived from the needles of yew trees. Docetaxel belongs to the group of anti-cancer medicines called taxoids.

Taxotere has been prescribed by your doctor for the treatment of breast cancer, special forms of lung cancer (non-small cell lung cancer), prostate cancer, gastric cancer or head and neck cancer.

- For the treatment of advanced breast cancer, Taxotere could be administered either alone or in combination with doxorubicin, or trastuzumab, or capecitabine.

- For the treatment of early breast cancer with or without lymph node involvement, Taxotere could be administered in combination with doxorubicin and cyclophosphamide.

- For the treatment of lung cancer, Taxotere could be administered either alone or in combination with cisplatin.
- For the treatment of prostate cancer, Taxotere is administered in combination with prednisone or prednisolone.

- For the treatment of metastatic gastric cancer, Taxotere is administered in combination with cisplatin and 5-Fluorouracil.
- For the treatment of head and neck cancer, Taxotere is administered in combination with cisplatin and 5-Fluorouracil.

2. WHAT YOU NEED TO KNOW BEFORE YOU USE TAXOTERE

Contraindications:

You must not be given Taxotere:

- if you are allergic (hypersensitive) to docetaxel or any of the other ingredients of Taxotere (listed in section 6).
- if the number of white blood cells is too low.
- if you have a severe liver disease.

Appropriate precautions for use; special warnings:

Warnings and precautions
Before each treatment with Taxotere, you will have blood tests to check that you have enough blood cells and sufficient liver function to receive Taxotere. In case of white blood cells disturbances, you may experience associated fever or infections.

Tell your doctor, hospital pharmacist, or nurse immediately if you have abdominal pain or tenderness, diarrhoea, rectal haemorrhage, blood in stool or fever. These symptoms may be a sign of a serious gastrointestinal toxicity, which could be fatal. Your doctor should address them immediately.

Tell your doctor, hospital pharmacist or nurse if you have vision problems. In case of vision problems, in particular blurred vision, you should immediately have your eyes and vision examined.

Tell your doctor, hospital pharmacist or nurse if you have experienced an allergic reaction to previous paclitaxel therapy.

Tell your doctor, hospital pharmacist or nurse if you have heart problems. If you develop acute or worsening problems with your lungs (fever, shortness of breath or cough), please tell your doctor, hospital pharmacist or nurse immediately. Your doctor may stop your treatment immediately.

You will be asked to take premedication consisting of an oral corticosteroid such as dexamethasone, one day prior to Taxotere administration and to continue for one or two days after it in order to minimise certain undesirable effects which may occur after the infusion of Taxotere in particular allergic reactions and fluid retention (swelling of the hands, feet, legs or weight gain).

During treatment, you may be given other medicines to maintain the number of your blood cells.

Severe skin problems such as Stevens-Johnson Syndrome (SJS), Toxic Epidermal Necrolysis (TEN), Acute Generalized Exanthematous Pustulosis (AGEP) have been reported with Taxotere:

- SJS/TEN symptoms may include blistering, peeling or bleeding on any part of your skin (including your lips, eyes, mouth, nose, genitals, hands or feet) with or without a rash. You may also have flu-like symptoms at the same time, such as fever, chills or aching muscles.

- AGEP symptoms may include a red, scaly widespread rash with bumps under the swollen skin (including your skin folds, trunk, and upper extremities) and blisters accompanied by fever.

If you develop severe skin reactions or any of the reactions listed above, immediately contact your doctor or healthcare professional.

Taxotere contains alcohol. Discuss with your doctor if you suffer from alcohol dependency, experience liver impairment. See also section "Taxotere contains ethanol (alcohol)" below.

Other medicines and Taxotere
Please tell your doctor or hospital pharmacist if you are taking or have recently taken any other medicine, including medicines obtained without a prescription. This is because Taxotere or the other medicine may not work as well as expected and you may be more likely to get a side effect. The amount of alcohol in this medicinal product may alter the effects of other medicines.

Pregnancy, breast-feeding and fertility
Ask your doctor for advice before being given any medicine.

Taxotere must NOT be administered if you are pregnant unless clearly indicated by your doctor.

You must not become pregnant during treatment with this medicine and must use an effective method of contraception during therapy, because Taxotere may be harmful for the unborn baby. If pregnancy occurs during your treatment, you must immediately inform your doctor.

You must not breast-feed while you are treated with Taxotere.

If you are a man being treated with Taxotere you are advised not to father a child during and up to 6 months after treatment and to seek advice on conservation of sperm prior to treatment because docetaxel may alter male fertility.

Driving and using machines
The amount of alcohol in this medicinal product may impair your ability to drive or use machines. You may experience side effects of this medicine that may impair your ability to drive, use tools or operate machines (see section 4 Possible side effects). If this happens, do not drive or use any tools or machines before discussing with your doctor, nurse or hospital pharmacist.

Taxotere contains ethanol (alcohol)
This medicinal product contains 50 vol % ethanol anhydrous (alcohol), i.e. up to 1.58 g ethanol anhydrous per vial, equivalent to 40 ml of beer or 17 ml wine.

Harmful for those suffering from alcoholism.
To be taken into account in pregnant or breast-feeding women, in children and high-risk groups such as patients with liver disease, or epilepsy.

The amount of alcohol in this medicinal product may have effects on the central nervous system (the part of the nervous system that includes the brain and spinal cord).

In Taxotere 80 mg/4 ml vial the concentration of docetaxel is 20 mg/ml.

- Then, inject via a single injection (one shot) into a 250 ml infusion bag or bottle containing either 5% glucose solution or sodium chloride 9 mg/ml (0.9%) solution for infusion. If a dose greater than 190 mg of docetaxel is required, use a larger volume of the infusion vehicle so that a concentration of 0.74 mg/ml docetaxel is not exceeded.

- Mix the infusion bag or bottle manually using a rocking motion.
- From a microbiological point of view, reconstitution/dilution must take place in controlled and aseptic conditions and the infusion solution should be used immediately. If not used immediately, in-use storage times and conditions are the responsibility of the user.

Once added as recommended into the infusion bag, the docetaxel infusion solution, if stored below 25°C, is stable for 6 hours. It should be used within 6 hours (including the one hour infusion intravenous administration).

In addition, physical and chemical in-use stability of the infusion solution prepared as recommended has been demonstrated in non-PVC bags up to 48 hours when stored between 2°C to 8°C.

Docetaxel infusion solution is supersaturated, therefore may crystallize over time. If crystals appear, the solution must no longer be used and shall be discarded.

- As with all parenteral products, infusion solution should be visually inspected prior to use, solutions containing a precipitate should be discarded.

Disposal
All materials that have been utilised for dilution and administration should be disposed of according to standard procedures. Do not throw away any medicines via wastewater. Ask your pharmacist how to throw away medicines you no longer use. These measures will help protect the environment.

Use immediately the medicine once added into the infusion bag. If not used immediately, in-use storage times and conditions are the responsibility of the user. More than one vial of concentrate for solution for infusion may be necessary to obtain the required dose for the patient. For example, a dose of 140 mg docetaxel would require 7 ml docetaxel concentrate for solution.

Aseptically withdraw the required amount of concentrate for solution for infusion with a calibrated syringe fitted with a 21G needle.

Each vial is for single use and should be used immediately after opening. If not used immediately, in-use storage times and conditions are the responsibility of the user. More than one vial of concentrate for solution for infusion may be necessary to obtain the required dose for the patient. For example, a dose of 140 mg docetaxel would require 7 ml docetaxel concentrate for solution.

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3. HOW TO USE TAXOTERE

Taxotere will be administered to you by a healthcare professional.

Usual dose
The dose will depend on your weight and your general condition. Your doctor will calculate your body surface area in square meters (m²) and will determine the dose you should receive.

Method and route of administration
Taxotere will be given by infusion into one of your veins (intravenous use). The infusion will last approximately one hour during which you will be in the hospital.

Frequency of administration
You should usually receive your infusion once every 3 weeks.

Your doctor may change the dose and frequency of dosing depending on your blood tests, your general condition and your response to Taxotere. In particular, please inform your doctor in case of diarrhoea, sores in the mouth, feeling of numbness or pins and needles, fever and give her/him results of your blood tests. Such information will allow her/him to decide whether a dose reduction is needed. If you have any further questions on the use of this medicine, ask your doctor, or hospital pharmacist.

4. POSSIBLE SIDE EFFECTS
Like all medicines, this medicine can cause side effects, although not everybody gets them. Your doctor will discuss these with you and will explain the potential risks and benefits of your treatment.

The most commonly reported adverse reactions of Taxotere alone are: decrease in the number of red blood cells or white blood cells, alopecia, nausea, vomiting, sores in the mouth, diarrhoea and tiredness.

The severity of adverse events of Taxotere may be increased when Taxotere is given in combination with other chemotherapeutic agents.

During the infusion at the hospital the following allergic reactions may occur (may affect more than 1 in 10 people):

- flushing, skin reactions, itching
- chest tightness; difficulty in breathing
- fever or chills
- back pain
- low blood pressure.

More severe reactions may occur. If you had an allergic reaction to paclitaxel, you may also experience an allergic reaction to docetaxel, which may be more severe.

The hospital staff will monitor your condition closely during treatment. Tell them immediately if you notice any of these effects.

Between infusions of Taxotere the following may occur, and the frequency may vary with the combinations of medicines that are received

Very common (may affect more than 1 in 10 people):

- infections, decrease in the number of red (anaemia), or white blood cells (which are important in fighting infection) and platelets
- fever, if this happens you must tell your doctor immediately
- allergic reactions as described above
- loss of appetite (anorexia)
- insomnia
- feeling of numbness or pins and needles or pain in the joints or muscles
- headache
- alteration in sense of taste
- inflammation of the eye or increased tearing of the eyes
- swelling caused by faulty lymphatic drainage
- shortness of breath
- nasal drainage; inflammation of the throat and nose; cough
- bleeding from the nose
- sores in the mouth
- stomach upsets including nausea, vomiting and diarrhoea, constipation
- abdominal pain
- indigestion
- hair loss; in most cases normal hair growth should return. In some cases (frequency not known) permanent hair loss has been observed
- redness and swelling of the palms of your hands or soles of your feet which may cause your skin to peel (this may also occur on the arms, face, or body)
- change in the colour of your nails, which may detach
- muscle aches and pains, back pain or bone pain
- change or absence of menstrual period
- swelling of the hands, feet, legs
- tiredness, or flu-like symptoms
- weight gain or loss.

Common (may affect up to 1 in 10 people):

- oral candidiasis
- dehydration
- dizziness
- hearing impaired
- decrease in blood pressure; irregular or rapid heart beat
- heart failure
- oesophagitis
- dry mouth
- difficulty or painful swallowing
- haemorrhage
- raised liver enzymes (hence the need for regular blood tests).

Uncommon (may affect up to 1 in 100 people):

- fainting
- at the injection site, skin reactions, phlebitis (inflammation of the vein) or swelling
- blood clots.
- acute myeloid leukaemia and myelodysplastic syndrome (types of blood cancer) may occur in patients who are treated with docetaxel together with certain other anticancer treatments.

Rare (may affect up to 1 in 1,000 people):

- inflammation of the colon, small intestine, which could be fatal (frequency not known); intestinal perforation.

Frequency not known (cannot be estimated from the available data):

- interstitial lung disease (inflammation of the lungs causing coughing and difficulty breathing. Inflammation of the lungs can also develop when docetaxel therapy is used with radiotherapy)
- pneumonia (infection of the lungs)
- pulmonary fibrosis (scarring and thickening in the lungs with shortness of breath)
- blurred vision due to swelling of the retina within the eye (cystoid macular oedema)
- decrease of the sodium, potassium, magnesium, and/or calcium in your blood (electrolyte balance disorders)
- ventricular arrhythmia or ventricular tachycardia (manifested as irregular and/or rapid heartbeat, severe shortness of breath, dizziness, and/or fainting). Some of these symptoms can be serious. If this happens, you must tell your doctor immediately.
- injection site reactions at the site of a previous reaction.
- non-Hodgkin lymphoma (a cancer affecting the immune system) and other cancers may occur in patients who are treated with docetaxel together with certain other anticancer treatments.
- Stevens-Johnson Syndrome (SJS) and Toxic Epidermal Necrolysis (TEN) (blistering, peeling or bleeding on any part of your skin (including your lips, eyes, mouth, nose, genitalia, hands or feet) with or without a rash. You may also have flu-like symptoms at the same time, such as fever, chills or aching muscles.)
- Acute Generalized Exanthematous Pustulosis (AGEP) (red, scaly widespread rash with bumps under the swollen skin (including your skin folds, trunk, and upper extremities) and blisters accompanied by fever).

Reporting of adverse effects
If you get any side effects talk to your doctor, hospital pharmacist or nurse. This includes any possible side effects not listed in this leaflet. By reporting side effects you can help provide more information on the safety of this medicine.

773012 - G,056,V80,TAXOTERE 20MG LK FXD,4ML,GEF

Plant: Frankfurt (Germany)
Packaging material code: 773012
Packaging material name: G,056,V80,TAXOTERE 20MG LK
FXD,4ML,GEF
Second packaging material code:
VISTAlink folder number: 4093362
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This document has been digitally signed by the following people within the VISTAlink system, following the sanofi group guidelines.

Reason	Signed by	Date
Plant final technical validation	Stefan Passmann (Frankfurt Pharma Proof reading team)	21/02/2020 13:52:55
Labelling validation(French-English)	Valerie Pham (GRA ITC team)	21/02/2020 14:39:37
Global Regulatory validation	Valerie Pham (GRA ITC team)	14/09/2020 13:19:39
Plant ready to print	Beata Garbella (Frankfurt Pharma Labelling Leading Group)	21/09/2020 12:36:52