



For the Patient: Adjuvant therapy for breast cancer using weekly paclitaxel and trastuzumab (Herceptin)

Other names: UBRAJTTW

U Undesignated

BR Breast

AJ Adjuvant

T Trastuzumab (HERCEPTIN®)

TW Paclitaxel (TAXOL®) weekly

Uses:

- UBRAJTTW is a drug treatment given after breast cancer surgery (called adjuvant chemotherapy) in the hope of destroying breast cancer cells that may have spread to other parts of your body. This treatment may reduce the chance of your breast cancer coming back and may improve your overall survival or chance of a cure.

Treatment Plan:

- Your treatment plan consists of 4 chemotherapy cycles (about 3 months), followed by 13 cycles (about 9 months) of trastuzumab (HERCEPTIN®). A cycle length is 3 weeks. The chemotherapy drugs are given intravenously at every visit. For the first four cycles, you will need to have a blood test and see your clinician before the treatment. Subsequent treatments may not require regular blood tests and you will see the clinician every two to three months. Prior to the first treatment with trastuzumab (and every three to four months after that) you may have a test of your heart function as well. The dose and timing of your chemotherapy may be changed based on your blood counts and/or other side effects.

- Trastuzumab (an antibody or immune drug) and Paclitaxel are given together for the first 4 cycles. Cycle 1 is given over 2 days (Trastuzumab on day 1 and Paclitaxel on day 2), followed by Paclitaxel alone on days 8 and 15. Each treatment takes about two to three hours. For subsequent cycles, Trastuzumab and Paclitaxel are given on day 1, followed by Paclitaxel alone on days 8 and 15. You will be given some intravenous medications before each Paclitaxel dose to prevent or lessen the chance of allergic reaction.
- Following the 4 cycles of Trastuzumab and Paclitaxel together, Trastuzumab alone is continued every 3 weeks for a total of 1 year of Trastuzumab therapy. By itself, Trastuzumab takes about 30 minutes to administer after the first couple of treatments.

Instructions:

- Check with your doctor or pharmacist before you start taking any new drugs. Other drugs such as Phenytoin (DILANTIN®), Warfarin (COUMADIN®), and Digoxin (LANOXIN®) may interact with UBRAJTTW.
- You may drink small amounts of alcohol, as it will not affect the safety or usefulness of your treatment.
- Tell other doctors or dentists that you are being treated with UBRAJTTW before you receive any treatment from them.
- If you are a woman, still having menstrual periods, UBRAJTTW may cause your ovaries to stop working, resulting in menopausal symptoms (such as hot flashes) and infertility. Your periods may stop. **This may be permanent**, especially if you are 40 years of age or older. Even if you have stopped having periods after treatment, if you were fertile prior to chemotherapy, you may be able to conceive a pregnancy. Use birth control (but **not** birth control pills) if you could become pregnant, even if you have stopped menstruating because of chemotherapy. Do not breast feed during treatment. Talk to your doctor if you have questions about fertility and birth control after treatment.

The calendar below shows how the medications are given every cycle:**Cycles 1 - 4**

Cycle	Week	TREATMENT PLAN
1	Week 1	Day 1 → Blood test, Trastuzumab IV
	Week 1	Day 2 → Paclitaxel IV
	Week 2	Day 8 → Paclitaxel IV
	Week 3	Day 15 → Paclitaxel IV
Cycles 2 – 4	Week 1	Day 1 → Blood test, Trastuzumab IV, Paclitaxel IV
	Week 2	Day 8 → Paclitaxel IV

	Week 3	Day 15 → Paclitaxel IV
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Cycles 5 onwards

Cycles	Week	TREATMENT PLAN
5 onwards	Week 1	Day 1 → Trastuzumab IV
	Week 2	Day 8 → No treatment
	Week 3	Day 15 → No treatment

Serious Risks of Treatment:

Unwanted side effects can occur with any drug treatment. The ones listed below are among the more frequent concerns with your treatment plan:

During treatment:

- **Infection:** The number of white blood cells that help fight infections may be lowered by the chemotherapy drugs. Your blood cell counts will be checked each week. Because the chemotherapy is given in small doses weekly, there is less risk than with some other regimens for having a big fall in blood cells. Nevertheless, you should be aware that, if you have a fever between treatments, you need to seek medical evaluation urgently, in case your white blood cells are low at that time, making you more vulnerable to serious infection. If you have just had a blood count within a day or two, and it was normal, you may be reassured by talking to a clinician, but it is always safest to seek medical advice for fever, when on chemotherapy. If you can't speak directly to a clinician about your fever, you should immediately go to your **nearest Hospital Emergency and tell the doctor you are on chemotherapy.**
- **Increased risk of bleeding:** The number of platelets (blood cells that help your blood to clot normally after injury) may be lowered by the treatment. They are expected to return to normal by day 1 of next cycle. When the platelet count is low you may be more likely to bruise or bleed. Again, because your blood cells will be checked frequently, it is unlikely you will develop a very low platelet count, but if you do, there may be an increased risk of bruising or bleeding. Notify your cancer doctor promptly if you develop large or numerous bruises, or unusual bleeding (eg. nosebleed that won't stop, blood in stool, urine, or sputum). Try to avoid using ASA or ibuprofen, if other pain medications could be used. Talk to your doctor if you feel you need to use one of these medications while on chemotherapy. For patients receiving Warfarin, which also increases the risk of bleeding, a modification of the dose may be required based on blood test results.

During or after treatment:

- **Heart Failure:** Rarely, Trastuzumab can have a serious effect on the heart, causing failure of the heart's pumping action, which results in shortness of breath, fatigue and leg swelling. Your heart function may be tested before you start treatment, and at intervals while you remain on treatment. Treatment may be stopped or interrupted if there are concerns about your heart function.
- **Neuropathy:** Paclitaxel can cause damage to the peripheral nerve endings (the nerves to the hands and feet, and rarely, other areas). This can result in feelings of numbness and tingling, or sometimes painful burning sensations. If you develop numbness, you will need to be careful when handling things that are sharp, hot, or very cold. The majority of the time, these feelings develop after a number of treatments, are not severe, and will resolve fully

over a period of months once treatment stops. Infrequently (<5%), these feelings might occur early, might be severe, or might not entirely resolve. Inform your clinician if you are developing numbness or tingling.

Common Paclitaxel side effects and management:

SIDE EFFECT	MANAGEMENT
Allergic reactions may occur after the administration of Paclitaxel. Signs of an allergic reaction can vary but might include flushing, rash, itching, and dizziness, swelling or breathing problems, or sudden chest, back or abdominal pain.	<ul style="list-style-type: none"> Dexamethasone is used to help prevent allergic reactions. You will be given dexamethasone as a single injection prior to each treatment. Your nurse will check your heart rate (pulse) and blood pressure if needed. Tell your nurse or doctor <u>immediately</u> if you feel suddenly unwell or unusual during treatment, such as with any of the listed symptoms.
Hair loss. Your hair will often begin to fall out 2-4 weeks after Paclitaxel treatment begins. Your scalp may feel tender. You may lose hair on your face and body. Your hair will grow back once your Paclitaxel treatments are over and sometimes between treatments. The colour and texture of the new hair growth may be different.	<ul style="list-style-type: none"> Avoid hair spray, bleaches, dyes and perms. Apply mineral oil to your scalp to reduce itching. If you lose your eyelashes and eyebrows, protect your eyes from dust and grit with a broad-rimmed hat and glasses. Ask your nurse about information on wigs and head coverings.
Fatigue is common. As the number of chemotherapy cycles increases, fatigue may get worse or last longer. If your cancer has been causing fatigue, you may feel better initially, if treatment is effective.	<ul style="list-style-type: none"> Your energy level will improve with time after treatment is completed. You may obtain a suggestion pamphlet for handling fatigue from nursing staff in your facility.

SIDE EFFECT	MANAGEMENT
<p>Mouth sores may occur during the cycle, and may last days or weeks. Mouth sores can occur on the tongue, gums, and the sides of the mouth or in the throat.</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. • Try baking soda mouth rinses (using ½ teaspoon baking soda or salt in 1 cup warm water) and rinse several times a day. Try ideas in <i>Easy to chew, easy to swallow food ideas</i>*. <p>Tell your doctor about a sore mouth, as your chemotherapy doses may need to be decreased if mouth sores are severe. Call your doctor if you are having difficulty eating or drinking due to pain.</p>
<p>Diarrhea may occur between treatments.</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 fiber foods as outlined in <i>Food ideas to help with diarrhea during chemotherapy</i>.
<p>Pain affecting joints or muscles may occur for a few days after paclitaxel, though with weekly treatment, this is usually mild. After you stop chemotherapy altogether, you may also feel increased joint aching or stiffness for a few months, in response to the withdrawal of treatment.</p>	<ul style="list-style-type: none"> • Take ibuprofen (e.g., ADVIL®) or acetaminophen (e.g. TYLENOL®) for mild to moderate pain. Discuss your symptoms with your cancer team if your pain is severe. • Your family doctor can help you to manage symptoms of joint pain after chemotherapy.
<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 feet when sitting • Avoid tight clothing

*available through your Nurse or Pharmacist

Common trastuzumab side effects and management:

SIDE EFFECT	MANAGEMENT
A flu-like illness may occur shortly after your treatment with Trastuzumab. You may have fever, chills, headache, muscle aches, joint aches, cough, sore throat, and stuffy or runny nose. Flu-like symptoms usually disappear on their own.	<ul style="list-style-type: none">• Take acetaminophen (e.g., TYLENOL[®]) every 3-4 hours if needed. Ibuprofen or ASA can also be tried if acetaminophen doesn't help.• Fever and chills which occur more than 48 hours after treatment may be signs of an infection. They should be reported to the doctor immediately. See details below.
Chills or fever are common while trastuzumab is being infused during the first treatment. Less common are nausea, vomiting, pain, shivering, headache, dizziness, problems breathing, rash and weakness during the infusion. Reactions are uncommon with later treatments even if you have a reaction with the first treatment.	<p>Tell your nurse or doctor <i>immediately</i> if you have a reaction during the treatment.</p> <ul style="list-style-type: none">• Your trastuzumab may be given more slowly.• You may be given other drugs to treat the reaction.
Diarrhea may infrequently occur.	See above under chemotherapy side effects.

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 _____