Your Guide to Chemotherapy Treatment

Beacon Centre

We put our patients first by working as one team; leading and listening, and striving for the best. Together, we make the difference.
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Contact numbers

The Cancer Helpline 01823 34 24 36

For all patients under the care of the Beacon Centre and Ward 9 please call for advice regarding:

- Treatment related symptoms
- Cancer related symptoms
- Haematology related symptoms
- Medication queries
- Advice and support

24 hours a day
7 days a week

Your Chemotherapy Clinical Nurse Specialist is:

Ali Snell 01823 344225

An answerphone message may be left for non-urgent enquiries.
Essential information

Neutropenic sepsis
Neutropenic sepsis is a potentially serious complication associated with chemotherapy treatment. As chemotherapy targets all rapidly dividing cells, not just cancerous cells, your body’s ability to fight infection is reduced as the white cell count falls. Neutrophils (part of the white cell count) are an important part of the body’s defences to fight infection. Neutropenia refers to a low neutrophil count. Often your body temperature changes when your neutrophil count is low and you become exposed to an infection.

You must contact the Beacon Centre immediately if you develop any of the following symptoms of infection:

- A temperature of 38°C or higher at any time
- OR
- A temperature less than 36°C and feeling unwell

Any of the following symptoms with or without a high temperature:

- Shivering or sweating episodes
- Feeling generally unwell or experiencing flu-like symptoms
- Chesty cough
- If you have a PICC or central line and have any redness or discharge around the site, or if you experience any episodes of shivering when the line is flushed.

If you have any of the above, you may be unwell because of an infection and should contact the Beacon Centre (Ward 9 or Beacon Ward if out of hours) immediately. When you telephone the Beacon Centre, a chemotherapy-trained nurse will complete a thorough assessment of your symptoms using a triage tool over the telephone. Depending on your symptoms we may advise you to come into the Medical Assessment Unit (MAU) at Musgrove Park Hospital for urgent assessment and possible admission to hospital.

The chemotherapy nurse will notify MAU that you are on your way and send them a copy of the telephone (triage) assessment sheet. You should bring your neutropenic sepsis alert card with you and give it to the nurse assessing you immediately so that appropriate intravenous antibiotics can be administered quickly.

Do not delay, as treatment may be required urgently.
Your chemotherapy record

We will give you a booklet called ‘Your chemotherapy record’ when you attend your first treatment. Please bring this with you to each of your appointments at the Beacon Centre and when you see any other healthcare professionals. This booklet contains coloured symptom assessment charts which correspond to each cycle of treatment.

We recommend that you use these charts to monitor and record any side effects which you experience. By monitoring your side effects at home you will know what is normal and when to seek help.

How do I use the symptom assessment chart?
Use the coloured chart to identify any side effects you may have between treatments. Decide for each side effect that you are experiencing which colour best describes how you feel and tick that box.

If you tick any RED box you must contact the Beacon Centre or Ward 9 IMMEDIATELY for advice. You may be asked to attend the hospital for a full physical assessment.

If you tick an AMBER box you must contact the Beacon Centre IMMEDIATELY for further advice.

If you tick a GREEN box this is probably a manageable side-effect of your chemotherapy and you should inform the Chemotherapy Team at the time of your next treatment. However if this gets worse or you are concerned please telephone the helpline number.

An alternative to this paper assessment tool is the chemotherapy emergency response tool app available to download, free of charge, from both the app store and google play.
Chemotherapy

What does it mean?
Chemotherapy simply means drug treatment that is given to destroy or control cancer cells. There are many different drugs that attack cancer cells and each works in its own unique way. They can be given on their own or in a variety of combinations with other drugs in order to increase their effectiveness.

Biological therapies are also being increasingly used to destroy cancer cells, either alone or as part of a chemotherapy regime. There are several different types of treatment including monoclonal antibodies and cancer growth inhibitors. If any of these treatments are suitable for you your consultant will discuss them with you.

Why is it given?
The aim of chemotherapy treatment will depend on what type of cancer you have and what stage it is at. It can be given:

• To cure the cancer
• To shrink a tumour prior to surgery
• After surgery or radiotherapy to destroy any remaining cancer cells and reduce the risk of the cancer returning
• To relieve symptoms by reducing the size of the tumour

How does it work?
Whether you have chemotherapy by mouth or injection, the drugs are absorbed into the blood system and the blood carries the drug to the cancer cells. These drugs interfere with the ability of the cell to divide and reproduce. Each drug that you are given will act in a slightly different way.

Because the normal cells in your body also divide, they can be affected by chemotherapy. These side effects are usually temporary and permanent damage is rare with most chemotherapy treatment. For more detailed information on your individual treatment, please refer to your Cancer Backup information sheet.

How is chemotherapy given?

• By mouth as a tablet, capsule or liquid
• Directly into a vein. This can be as a bolus (rapid) injection, slower infusion or by pump over a number of hours or days.
This can be given through a cannula (small plastic tube) in the back of the hand or arm, which is removed when each cycle of treatment is completed. Some patients may require a central line passed into a vein in the chest (central venous catheter) or upper arm (PICC line). These devices are left in place for the duration of treatment.

- Injection into the spine. This is not commonly used, but if required it will be explained in full.

**If I’m given chemotherapy in tablet form should I take any special precautions?**

You will need to take some simple hygiene precautions to limit exposure for anyone handling your chemotherapy tablets. Pregnant women should avoid handling them altogether.

- If you are taking tablets or capsules, do not touch them directly if at all possible but tip them gently from the bottle onto a spoon or medicine measure
- Swallow tablets and capsules with plenty of water. DO NOT CHEW OR CRUSH unless specifically told to do so.
- Be careful how you store and dispose of any containers. Store them well out of the reach of children in a cool, dry cupboard unless told otherwise by your pharmacist or nurse.
- Any unused drug should be returned to the hospital or your local chemist for safe disposal
- Always wash your hands after handling any chemotherapy drugs

**Will chemotherapy hurt?**

Chemotherapy should not be painful. If your treatment is given into your vein and you feel any pain or an unusual sensation, inform one of the nurses immediately. If the injection site is painful, sore or red when you are at home, telephone for advice as soon as possible.

**Where is treatment given?**

Chemotherapy treatment is co-ordinated through the Beacon Centre at Musgrove Park Hospital. It is normally administered Monday to Friday 9am-5pm (not bank holidays) in one of the following areas:
• Beacon Centre Day Unit on an outpatient basis
• Beacon Centre Oncology Ward as an inpatient
• Haematology Ward 9 as an inpatient

In addition, for some patients treatment may be given via:
• The Mobile Chemotherapy Unit which visits Bridgwater, Minehead, Wells and Chard on a weekly basis
• In the home by a company named Healthcare at Home

Chemotherapy information talk

You will be given a 45 minute appointment with a chemotherapy nurse on a separate date to your first treatment. This will enable us to describe in greater detail the chemotherapy treatment you will be having and any possible side effects. We will also give you more specific written information about the chemotherapy drugs.

We recommend that you bring a family member or friend for support as well as a second ‘pair of eyes and ears’ to help remember the information we give you.

You will be given the opportunity to ask any questions you may have.

We will take a photograph of you at this time to help with identification checks prior to administration of each chemotherapy treatment.

If you would prefer not to have your photograph taken please let the nurse know.

On the day of your first treatment

You should eat and drink as normal on your treatment day and arrange for someone to drive you home.

We can provide drinks, snacks and lunch (if you having your treatment at this time) whilst you are in hospital. You may receive your treatment in a single room or communal area.

Ongoing review – what is pre-assessment?
One to three days prior to each cycle of chemotherapy treatment we will ask you to attend the outpatient department for a
pre-assessment appointment with a doctor, pharmacist or chemotherapy nurse specialist. You will need a routine blood test before each appointment, either by arriving one hour early or attending your GP surgery the previous morning. The nurse administering your chemotherapy will give you a blood test form for the next pre-assessment appointment.

The purpose of the pre-assessment appointment is to assess any side effects you may have experienced and look at your blood test results to ensure it is safe to proceed with your treatment as planned. Blood tests are vital as chemotherapy can affect the bone marrow which is the “factory” which produces your blood cells. As some types of chemotherapy drugs can affect the liver or kidneys, additional blood tests may be carried out. The level at which it is safe to give treatment will depend on the drugs you are receiving. Whilst on chemotherapy your blood count may always remain below or above “normal” on chemotherapy but within a safe range for you. A special type of blood test called a tumour marker may be used to monitor some types of cancer. Your consultant or specialist nurse will explain if this is applicable to you and what the results mean.

Common side effects

How will I feel while having chemotherapy?
Some chemotherapy drugs have very few side-effects and you may be able to carry on living a normal everyday life between visits. Other treatments may be more disruptive. It depends on the type of chemotherapy you are having – each drug is different.

Some of the more common side effects of chemotherapy are discussed below but for more specific information about your particular treatment or side effects, please see the individual fact sheets supplied by your chemotherapy nurse. These go into more detail for each chemotherapy drug you will receive.

Bone marrow changes
The bone marrow is the ‘factory’ where your blood cells are made. These consist of red and white cells and platelets.
The main effects of chemotherapy on the blood are:

- **Infection** – white blood cells (WBC) help to fight infection. If your white blood cell and neutrophil (a particular type of white blood cell) count are low then you will be more prone to infections.

- **Bruising or bleeding** – Platelets are the cells which help your blood to clot. If your platelet count is lowered you may notice that you bruise or bleed more easily. If you notice any side effects such as bleeding gums, nose bleeds or small groups of red-purple spots on your skin then you should inform your doctor or nurse.

- **Anaemia** – Red blood cells contain a protein called haemoglobin (Hb) which carries oxygen around the body. If your haemoglobin is low you may become anaemic. Symptoms of anaemia are tiredness, breathlessness and dizziness. Eating a diet rich in iron may help but sometimes a blood transfusion may be necessary.

**How can I help myself avoid infections?**

Most chemotherapy drugs reduce the body’s resistance to infection. Most infections are caused by your own body flora, not by transmission from other people. Whilst it may be worthwhile trying to avoid large crowds and close contact with people who have coughs and colds, it is also important to practice good personal hygiene.

We advise you to:

- Clean your hands regularly and ask any healthcare workers if they have cleaned their hands before examining or treating you. Alcohol rub should be readily available in all areas of The Beacon Centre.
- Ensure you maintain good personal hygiene and brush your teeth regularly with a soft bristle toothbrush. Take a bath or shower every day.
- Clean cuts, scrapes and grazes straight away with warm water, soap and an antiseptic.
- Ask someone to change the water in your flower vase and when gardening wear gloves to protect your hands.
- Stay away from people with a known infection such as flu,
chickenpox or diarrhoea and vomiting. Telephone The Beacon Centre if you are in contact with someone with an infectious or contagious disease such as chicken pox or shingles.

- Avoid any contact with animal waste and wash your hands after handling pets.
- Avoid eating ‘high risk’ foods such as raw or undercooked eggs, soft ripened cheeses, blue veined cheeses, live yoghurts and probiotic drinks, all unpasteurised dairy products, pâté, shellfish and takeaway meals. Wash salads and fruit well. Ensure food is cooked thoroughly. Do not reheat food.

If you are at particular risk of an infection, due to the type of chemotherapy you are receiving, you may be given daily injections for a short time to boost your bone marrow production. If necessary, your chemotherapy nurse will discuss with you how and why the treatment is administered. If you are happy to inject yourself, she will show you or a family member how it is done. Otherwise she will organise for a District or Practise Nurse to administer the treatment.

**Flu vaccinations**

All patients who are receiving chemotherapy are advised to have the seasonal influenza and pneumococcal polysaccharide (PPV) vaccines. Vaccines should either be given before commencing chemotherapy or a couple of days prior to a cycle of treatment. Vaccines should be avoided on the day of treatment itself. If you are a haematology patient your haematologist may recommend that your immediate family members also receive the seasonal influenza vaccine.

**Taking regular paracetamol**

If you think you have an infection, or feel unwell, you MUST check your temperature before you take any paracetamol. This is because paracetamol can mask the signs of a high temperature.

**Extravasation**

Although the placement of a needle into your vein can cause discomfort, the treatment itself should not be painful. However, sometimes the chemotherapy liquid leaks out of the vein into the surrounding tissues. This is known as “extravasation”.

If you feel pain, discomfort, burning, stinging or notice any
redness or swelling around the needle site, either during or after treatment, you MUST inform your nurse immediately. The same applies if you have a PICC or Central Line.

**Phlebitis (sore veins)**
Certain chemotherapy drugs can cause irritation in the vein into which they have been administered. This may result in redness, swelling or discomfort along the vein in your arm. Depending on your treatment, your nurse may then recommend the application of heat via a heat pad or hot water bottle or a cold pack. It may also be helpful to elevate your arm whenever you are able to. You should also take regular painkillers.

**Nausea**
It is common to feel sick (nausea) during and after each cycle of treatment, although this is not a side effect of every drug. Anti-sickness medications will usually help and are commonly given at the time of treatment. If needed, a supply can be given to you to take home. There are different types of anti-sickness drugs so if one does not work for you then please tell your doctor or nurse who will administer a different drug.

Some patients find it helpful to avoid certain foods such as those that are fatty, sugary or spicy. Drinking fizzy drinks as well as food and drink containing ginger can also help.

Sea bands worn around the wrist acting on acupressure points can be helpful for some patients in preventing/reducing nausea. These can be supplied by the Beacon Day Unit or purchased at a chemist.

**Mouth care**
During chemotherapy you may develop a sore mouth. To help to minimise this, it is important to clean your teeth or dentures after each meal and before going to bed each night. Cleaning your teeth with a soft toothbrush may be more comfortable. Drink as much water-based fluid as possible aiming for 2-3 litres (approximately 4-6 pints) per day. If your mouth does become sore you must discuss this with your doctor or nurse when you attend for pre-assessment or treatment. If you are unable to eat, telephone for advice.
If you require dental treatment please discuss this with one of the chemotherapy nurses or doctors first. You should inform your dentist that you are receiving chemotherapy treatment.

**Taste changes**
Chemotherapy can sometimes affect your taste. This can involve loss of taste, bitter or metallic taste or foods tasting sweeter or saltier than usual. Normal taste should return around 2-3 months after treatment has finished. If you are having problems please discuss them with your nurse.

**Appetite**
During your treatment you may find that your appetite reduces and you are eating less, possibly leading to weight loss. It is important to keep well-nourished to maintain a stable weight. Additional nutritional information is available and, if necessary, you may be referred to a dietician. Should you have any further questions or concerns then talk to your nurse or doctor.

Generally it will be quite safe for you to have a small amount of alcohol. A few drugs may react badly so we will tell you if alcohol should be avoided.

**Diarrhoea and constipation**
Both of these side effects can be easily managed. However, if you have four bowel movements more than normal or diarrhoea at night please contact us. Many painkillers and some anti-sickness medication can cause constipation. If you suffer with constipation it is advisable to take regular laxatives with them.

**Fatigue**
Fatigue is a feeling of extreme tiredness or exhaustion. It is a common problem for patients and may be due to the cancer itself or the effects of the treatment. It is important that you explain exactly how you feel to the doctor or nurse, as they may be able to help you minimise these problems.

**Rashes**
Rashes occasionally occur as a result of your chemotherapy and should always be reported to your doctor or nurse.
**Allergic reaction**
A small number of patients may experience a reaction to certain chemotherapy drugs. Should you experience a cough, swelling of the throat or mouth, facial flushing, uncontrollable shivering, any difficulty in breathing, or other unusual symptoms during treatment please inform a nurse immediately so that you may be treated appropriately.

**Hair loss**
Some types of chemotherapy can cause temporary hair loss (alopecia). This can be partial or complete and may involve all body hair. However the hair will re-grow when chemotherapy treatment has finished. There is a weekly wig clinic held at the Beacon Centre. Your nurse will let you know more about hair loss and the wig service if this is appropriate to your treatment.

Scalp cooling can be an effective method of preventing hair loss. It involves a special cap being fitted by the nurse to the patient’s head. The cap is attached to a refrigerated cooling machine that circulates liquid coolant continuously to maintain the cap temperature between -4 and -5 degrees centigrade. Scalp cooling is not suitable for all patients who will lose their hair with chemotherapy. The consultant and nurse will discuss suitability with each individual patient.

After finishing your chemotherapy once your hair is 3 inches (7.5cm) long, and your scalp is in a healthy condition, you can have your hair tinted, perfumed or chemically relaxed if you want to. We do not recommend having these hair treatments during chemotherapy treatment.

**Blood clots**
Cancer and chemotherapy treatment increase the chance of thrombosis (blood clot). Symptoms of a blood clot include pain, swelling and/or redness in a leg, chest pain and shortness of breath. You should contact the Beacon Centre or Ward 9 straight away if you develop any of these symptoms.
General lifestyle

Exercise
Research has shown that some patients undergoing chemotherapy benefit from gentle exercise. This may vary from taking the dog for a walk to joining a low level exercise class. However, if you’re feeling tired it’s important to rest. You should not push yourself too much.

Work
It is entirely up to you whether you continue to work or not throughout your chemotherapy treatment. Please discuss this with your consultant who will offer advice based on the work you do. If you require any specific information on employment and your rights please ask your nurse or contact the MacMillan Cancer Information and Support Centre.

Driving
You do not need to inform the DVLA that you are receiving chemotherapy treatment. We recommend that you do not drive to your first chemotherapy appointment as you may be affected by the treatment. For example, some pre-medication drugs can cause drowsiness. After your first appointment you MUST not drive if you feel unsafe or lacking in confidence.

Social occasions and holidays
There is no reason why you should not go out as long as you do not over tire yourself. If you are thinking of going on holiday tell your consultant. Treatment can usually be arranged around your holiday but it does need careful planning.

The Macmillan Cancer Information and Support Centre can provide more advice on holidays and travel including insurance.

Skin care
It is not advisable to sunbathe during treatment as your skin and eyes may become more sensitive to the effects of sunlight. However, sitting in the shade will not be harmful. Nevertheless, you must always use a high factor sun cream whenever you are outdoors for prolonged periods.
Fertility and sex life
You can continue to have a normal sex life during chemotherapy although you may find that your interest has decreased.

Women sometimes find that their periods become irregular. For men, the sperm count may be reduced but it will usually return to normal once treatment stops. Some drugs however may cause permanent sterility. You will be told if this is likely and sperm banking may be offered.

In all cases barrier contraception should be used as you should not become pregnant or father a child whilst receiving chemotherapy. If you remain sexually active during the time you are on treatment, use condoms as an extra precaution to reduce any risk of further health problems, including infection, for either partner. You may also be asked to confirm you are not pregnant or planning a pregnancy before you start treatment.

Additional support and information
Your diagnosis may provoke a variety of reactions. At first you may experience a mixture of emotions such as shock, fear, anger and disbelief or you may feel nothing at all. Suddenly life seems very different. All these feelings have been well described by people in this situation. It can also have a profound effect on those close to you who may be feeling similar emotions.

With time, these feelings may subside, but coming to terms with the situation and learning how to cope will be very stressful, affecting each patient in a different way.

Being well-informed and feeling supported have been shown to reduce uncertainty, anxiety and depression. Do not be afraid to ask questions or to ask for information. Knowing more about your disease and its treatment can reduce tension and enable you to retain some control over your life. Remember, advances are being made all the time. What you or your family and friends think you know may not be correct or up-to-date.

Always check whether you have understood what you have been told and if necessary ask for further explanation. Receiving information, feeling supported and having the opportunity to talk things through can all have a place in adjusting to your diagnosis.
Many leaflets and booklets about the different diseases and their treatments are available at the hospital.

**Support**

Patients having chemotherapy may also experience emotional and social problems such as:

- Difficulty sleeping
- Anxiety and depression
- Changes in personal / sexual relationships

If you would like to speak to someone about any of these or other similar matters, please speak to your nurse.

**Financial issues**

We know that living with cancer can have a major impact on your income and financial outgoings. Macmillan and the Citizens Advice Bureau can offer advice on any benefits you may be entitled to. Please ask your Clinical Nurse Specialist or Cancer Information Support Officer for a referral to the Citizens Advice Bureau as they visit the Beacon Centre on a regular basis.

Your specialist nurse will also be able to provide more information on any grants which Macmillan may be able to provide. These are means tested and involve completing a form detailing your income and what you would like the money for. Examples of grants given include a tumble drier to make washing clothes easier and assistance with fuel costs.

Anyone with a cancer diagnosis is entitled to free prescriptions. Application forms (FP92A) can be obtained from your GP or the Macmillan Cancer Information and Support Centre situated in the Beacon Centre.

**Red Cross transport**

If you are attending treatment appointments in the Radiotherapy Department or Beacon Day Unit it is possible to arrange transport to and from hospital. You will need to organise this yourself by ringing the Red Cross via the Patient Transport Advice Centre on telephone 01278 727444. If you have any questions about transport please speak to the reception staff in the Beacon Centre.
Would you like more information?

Do you have questions and forgot to ask them during your appointment? Why not visit the Macmillan Cancer Information and Support Centre, a free and accessible service for everyone.

This is located in the reception area of the Beacon Centre.
Telephone number 01823 344252
Email cancer.info@tst.nhs.uk

The information area is accessible during opening hours and is manned by a part time member of staff and trained volunteers (a list of manned hours can be found in the area).

This service is designed to compliment the support, care and treatments you are receiving from other departments within the hospital and provides:

- Unbiased, confidential help and advice
- Up-to-date leaflets and contacts
- Continued support for as long as you need it
- Liaison with you healthcare professionals
- Assisted internet access
- Macmillan and CAB advice on benefits

Local and national support groups

Macmillan Cancer Information and Support Centre
Main Reception, The Beacon Centre
Musgrove Park Hospital, Taunton TA1 5DA
Telephone: 01823 344252
Email: cancer.info@tst.nhs.uk

Somerset Cancer Care Support Groups
(Local charity providing emotional support for people affected by cancer)
Contact via St Margaret’s helpline
Telephone: 0845 0708910
Website: www.somersetcancercare.org.uk

Somerset Direct
(A Somerset County Council information and advice service for older people, carers, relatives and other adults with care needs)
Telephone: 0845 345 9133
Website: www.somerset.gov.uk
Email: adults@somerset.gov.uk

**We are Macmillan Cancer Support** also includes Cancerbackup (Cancer Information specialist nurses give information on all aspects of cancer and its treatment)
89 Albert Embankment, London, SE1 7UQ
Telephone: 0808 800 1234
Websites: www.cancerbackup.org.uk
            www.macmillan.org.uk

**Cancer Research UK**
Telephone: 0808 800 4040 Monday to Friday 9am-5pm
Website: www.cancerhelp.org.uk

**Notes**