

# Fluorouracil (Adrucil®), 5-FU)

**Pronounced:** FLURE-oh-UE-ra-sil

**Classification:** Antimetabolite

## About Fluorouracil

Fluorouracil exerts its anti-cancer effect by preventing synthesis of DNA and RNA in the cell by significantly decreasing thymine (a nucleotide that is one of the building blocks of DNA). Lack of functional DNA and RNA prevent the cancer cell from reproducing and making vital proteins, which results in death of the cell. In this way, fluorouracil slows or stops the growth of cancer cells in your body.

## How to Take Fluorouracil

Fluorouracil is given as an intravenous (IV, into a vein) infusion. How long the infusion takes is dependent on the treatment regimen. It can be given alone or with other medications.

## Possible Side Effects of Fluorouracil

There are a number of things you can do to manage the side effects of fluorouracil. Talk to your doctor or nurse about these recommendations. They can help you decide what will work best for you. These are some of the most common side effects:

### ***Nausea and/or Vomiting***

Talk to your doctor or nurse so they can prescribe medications to help you manage [nausea and vomiting](#). In addition, dietary changes may help. Avoid things that may worsen the symptoms, such as heavy or greasy/fatty, spicy or acidic foods (lemons, tomatoes, oranges). Try antacids, (e.g. milk of magnesia, calcium tablets such as Tums), saltines, or ginger ale to lessen symptoms.

Call your doctor or nurse if you are unable to keep fluids down for more than 12 hours or if you feel lightheaded or dizzy at any time.

### ***Diarrhea***

Your oncology team can recommend medications to relieve [diarrhea](#). Also, try eating [low-fiber](#), bland foods, such as white rice and boiled or baked chicken. Avoid raw fruits, vegetables, whole grain breads, cereals and seeds. Soluble fiber is found in some foods and absorbs fluid, which can help relieve diarrhea. Foods high in soluble fiber include: applesauce, bananas (ripe), canned fruit, orange sections, boiled potatoes, white rice, products made with white flour, oatmeal, cream of rice, cream of wheat, and farina. Drink 8-10 glasses of non-alcoholic, un-caffeinated fluid a day to prevent dehydration.

### ***Low White Blood Cell Count (Leukopenia or Neutropenia)***

White blood cells (WBC) are important for fighting infection. While receiving treatment, your [WBC count can drop](#), putting you at a higher risk of getting an infection. You should let your doctor or nurse know right away if you have a fever (temperature greater than 100.4), sore throat or cold, shortness of breath, cough, burning with urination, or a sore that doesn't heal.

Tips to preventing infection:

- [Washing hands](#), both yours and your visitors, is the best way to prevent the spread of infection.
- Avoid large crowds and people who are sick (i.e.: those who have a cold, fever or cough or live with someone with these symptoms).
- When working in your yard, wear protective clothing including long pants and gloves.
- Do not handle pet waste.
- Keep all cuts or scratches clean.
- Shower or bath daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.
- Ask your doctor or nurse before scheduling dental appointments or procedures.
- Ask your doctor or nurse before you, or someone you live with, has any vaccinations.

### ***Low Red Blood Cell Count (Anemia)***

Your red blood cells are responsible for carrying oxygen to the tissues in your body. When the [red cell count is low](#), you may feel tired or weak. You should let your doctor or nurse know if you experience any shortness of breath, difficulty breathing or pain in your chest. If the count gets too low, you may receive a blood transfusion.

### ***Low Platelet Count (Thrombocytopenia)***

Platelets help your blood clot, so when the [count is low](#) you are at a higher risk of bleeding. Let your doctor or nurse know if you have any excess bruising or bleeding, including nose bleeds, bleeding gums or blood in your urine or stool. If the platelet count becomes too low, you may receive a transfusion of platelets.

- Do not use a razor (an electric razor is fine).



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- Avoid contact sports and activities that can result in injury or bleeding.
- Do not take aspirin (salicylic acid), non-steroidal, anti-inflammatory medications (NSAIDs) such as Motrin®, Aleve®, Advil®, etc. as these can all increase the risk of bleeding. Unless your healthcare team tells you otherwise, you may take acetaminophen (Tylenol).
- Do not floss or use toothpicks and use a soft-bristle toothbrush to brush your teeth.

### ***Mouth Ulcers (Sores)***

Certain cancer treatments can cause [sores or soreness in your mouth](#) and/or throat. Notify your doctor or nurse if your mouth, tongue, inside of your cheek or throat becomes white, ulcerated or painful. Performing [regular mouth care](#) can help prevent or manage mouth sores. If mouth sores become painful, your doctor or nurse can recommend a pain reliever.

- Brush with a soft-bristle toothbrush or cotton swab twice a day.
- Avoid mouthwashes that contain alcohol. A baking soda and/or salt warm water mouth rinse (2 level teaspoons of baking soda or 1 level teaspoon salt in an eight ounce glass of warm water) is recommended 4 times daily.
- If your mouth becomes dry, eat moist foods, drink plenty of fluids (6-8 glasses), and suck on sugarless hard candy.
- Avoid smoking and chewing tobacco, drinking alcoholic beverages and citrus juices.

### ***Loss or Thinning of Scalp and Body Hair (Alopecia)***

Your hair may become [thin, brittle, or may fall out](#). This typically begins two to three weeks after treatment starts. This hair loss can be all body hair, including pubic, underarm, legs/arms, eyelashes, and nose hairs. The use of scarves, wigs, hats and hairpieces may help. Hair generally starts to regrow soon after treatment is completed. Remember your hair helps keep you warm in cold weather, so a hat is particularly important in cold weather or to protect you from the sun.

### ***Hand Foot Syndrome***

[Hand and foot syndrome](#) (HFS) is a skin reaction that appears on the palms of the hands and/or the soles of the feet as a result of certain chemotherapy agents being absorbed by the skin cells. HFS can begin as a mild tingling, numbness, pins-and-needles feeling, or pain or swelling of the hands and/or feet. This can then progress to painful swelling, blistering or peeling skin that can interfere with your ability to do normal activities. Be sure to let your oncology team know right away if you notice these symptoms, as they may need to adjust the chemotherapy dose or take a break to allow the skin to heal. Some tips to help prevent HFS include:

- Avoid tight shoes or socks.
- Avoid activities that put pressure on the palms or soles for 1 week after treatment.



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- Apply moisturizer liberally and often.
- Avoid hot water for baths and showers.

### ***Nail and Skin Changes***

Your fingernails/toenails may become dark, brittle or fall off. You may notice dry skin or changes in the color or tone of your skin. Your skin will be more sensitive to the sun, which can result in severe sunburn or rash. Sun sensitivity can last even after chemotherapy is completed. Avoid the sun between 10-2pm, when it is strongest. Wear sunscreen (at least SPF 15) everyday, wear sunglasses and long sleeves/pants to protect your skin. Keep your fingernails and toenails clean and dry. You may use nail polish, but do not wear fake nails. If any nails fall off, clean the nail bed well with soap and water and cover with a band aid. This medication may cause darkening of your veins as well.

### ***Reproductive Concerns***

Exposure of an unborn child to this medication could cause birth defects, so you should not become pregnant or father a child while on this medication. Effective birth control is necessary during treatment. Even if your menstrual cycle stops or you believe you are not producing sperm, you could still be fertile and conceive. You should consult with your healthcare team before breastfeeding while receiving this medication.

# **Oxaliplatin (Eloxatin®)**

**Pronounced:** ox-AL-i-PLA-tin

**Classification:** Platinum Chemotherapy

### **About Oxaliplatin**

Oxaliplatin is a type of platinum chemotherapy, which are heavy metal compounds that inhibit synthesis of RNA, DNA, and protein in cells. All of these are vital for cells to divide and grow. By preventing them from dividing, the medication can stop the cancer from growing.

### **How to Take Oxaliplatin**

Oxaliplatin is given by intravenous (into a vein) infusion over a period of about 2 hours. It is often given in combination with other chemotherapy medications such as fluorouracil and irinotecan. The dosage and schedule is determined by the person's size, type of cancer, and mode of administration.

This medication can cause dizziness, vision problems or vision loss. You should not drive



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or operate machinery until you know how the medication affects you.

## **Possible Side Effects of Oxaliplatin**

There are a number of things you can do to manage the side effects of oxaliplatin. Talk to your doctor or nurse about these recommendations. They can help you decide what will work best for you. Some of the more common side effects include:

### ***Peripheral Neuropathy (Numbness or Tingling in the Hands and/or Feet)***

This medication can cause two types of neuropathy, which are caused by damage to nerves. The first type tends to occur within 1-2 days of receiving the medication, tends to resolve within 2 weeks, and can reoccur with subsequent doses. It can feel like a tingling or numbness (pins & needles) or burning in the hands, feet, area around the mouth, or in the throat. This neuropathy can be exacerbated by exposure to cold temperature or cold objects (drinking a cold drink can trigger a feeling of spasm in the throat, or touching a cold steering wheel could cause numbness or tingling of the hands). Avoid cold exposure for several days after treatment. Drink room temperature fluids and wear gloves and socks in cool weather.

The second type of neuropathy tends to develop after several doses, persists between treatments (no break in the symptoms), and can get progressively worse with additional doses of the medication. It is typically a numbness and tingling in the hands and/or feet in the area a glove or sock would cover. This can progress to be painful and can affect your ability to perform daily tasks safely (unable to sense temperature of bath water, cannot feel the step with your toe, becoming a fall risk). Patients may have changes in proprioception, which is the ability of the body to be aware of its position. For instance, you can button a shirt without looking because your fingers know how they are bending and moving to perform the task -- this is called proprioception. Without proprioception, your body would not be able to tell the position of the fingers without looking at them. These symptoms are caused by damage to the nerves in the hands and feet. This neuropathy may improve gradually over the months following the discontinuation of treatment, but can become permanent for some patients.

### ***Nausea and/or Vomiting***

Talk to your doctor or nurse so they can prescribe medications to help you manage [nausea and vomiting](#). In addition, dietary changes may help. Avoid things that may worsen the symptoms, such as heavy or greasy/fatty, spicy or acidic foods (lemons, tomatoes, oranges). Try antacids, (e.g. milk of magnesia, calcium tablets such as Tums), saltines, or ginger ale to lessen symptoms.

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## **Diarrhea**

Your oncology team can recommend medications to relieve [diarrhea](#). Also, try eating [low-fiber](#), bland foods, such as white rice and boiled or baked chicken. Avoid raw fruits, vegetables, whole grain breads, cereals and seeds. Soluble fiber is found in some foods and absorbs fluid, which can help relieve diarrhea. Foods high in soluble fiber include: applesauce, bananas (ripe), canned fruit, orange sections, boiled potatoes, white rice, products made with white flour, oatmeal, cream of rice, cream of wheat, and farina. Drink 8-10 glasses of non-alcoholic, un-caffeinated fluid a day to prevent dehydration.

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Tips to preventing infection:

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- Avoid large crowds and people who are sick (i.e.: those who have a cold, fever or cough or live with someone with these symptoms).
- When working in your yard, wear protective clothing including long pants and gloves.
- Do not handle pet waste.
- Keep all cuts or scratches clean.
- Shower or bath daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.
- Ask your doctor or nurse before scheduling dental appointments or procedures.
- Ask your doctor or nurse before you, or someone you live with, has any vaccinations.

## **Low Red Blood Cell Count (Anemia)**

Your red blood cells are responsible for carrying oxygen to the tissues in your body. When the [red cell count is low](#), you may feel tired or weak. You should let your doctor or nurse know if you experience any shortness of breath, difficulty breathing or pain in your chest. If the count gets too low, you may receive a blood transfusion.

## **Low Platelet Count (Thrombocytopenia)**

Platelets help your blood clot, so when the [count is low](#) you are at a higher risk of bleeding. Let your doctor or nurse know if you have any excess bruising or bleeding, including nose bleeds, bleeding gums or blood in your urine or stool. If the platelet count becomes too low, you may receive a transfusion of platelets.



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- Do not use a razor (an electric razor is fine).
- Avoid contact sports and activities that can result in injury or bleeding.
- Do not take aspirin (salicylic acid), non-steroidal, anti-inflammatory medications (NSAIDs) such as Motrin®, Aleve®, Advil®, etc. as these can all increase the risk of bleeding. Unless your healthcare team tells you otherwise, you may take acetaminophen (Tylenol).
- Do not floss or use toothpicks and use a soft-bristle toothbrush to brush your teeth.

## **Fatigue**

**Fatigue** is very common during cancer treatment and is an overwhelming feeling of exhaustion that is not usually relieved by rest. While on cancer treatment, and for a period after, you may need to adjust your schedule to manage fatigue. Plan times to rest during the day and conserve energy for more important activities. Exercise can help combat fatigue; a simple daily walk with a friend can help. Talk to your healthcare team for helpful tips on dealing with this side effect.

## **Mouth Ulcers (Sores)**

Certain cancer treatments can cause **sores or soreness in your mouth** and/or throat. Notify your doctor or nurse if your mouth, tongue, inside of your cheek or throat becomes white, ulcerated or painful. Performing **regular mouth care** can help prevent or manage mouth sores. If mouth sores become painful, your doctor or nurse can recommend a pain reliever.

- Brush with a soft-bristle toothbrush or cotton swab twice a day.
- Avoid mouthwashes that contain alcohol. A baking soda and/or salt warm water mouth rinse (2 level teaspoons of baking soda or 1 level teaspoon salt in an eight ounce glass of warm water) is recommended 4 times daily.
- If your mouth becomes dry, eat moist foods, drink plenty of fluids (6-8 glasses), and suck on sugarless hard candy.
- Avoid smoking and chewing tobacco, drinking alcoholic beverages and citrus juices.

## **Allergic Reactions**

In some cases, patients can have an allergic reaction to this medication. Signs of a reaction can include: shortness of breath or difficulty breathing, chest pain, rash, flushing or itching or a decrease in blood pressure. If you notice any changes in how you feel during the infusion, let your nurse know immediately. The infusion will be slowed or stopped if this occurs. Depending on the severity of your reaction, you may still be able to receive the medication with a pre-medication to prevent a reaction, or if the medication is given at a slower rate.

## **Liver Toxicity**



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This medication can cause liver toxicity, which your doctor may monitor for using blood tests called liver function tests. Notify your healthcare provider if you notice yellowing of the skin or eyes, your urine appears dark or brown or pain in your abdomen, as these can be signs of liver toxicity.

### **Other Side Effects**

Some less common side effects include:

- Posterior reversible encephalopathy syndrome (PRES). Symptoms include headache, seizure, lethargy, confusion, blindness and other visual and neurological disturbances. Report any of these symptoms to your healthcare team immediately.
- Lung changes, including pulmonary fibrosis (a scarring and stiffening of the lung tissue). Notify your healthcare provider if you have new or worsening shortness of breath, non-productive cough, fever, wheezing or difficulty breathing.
- Let your care team know if you have had or have cardiac (heart) problems as some of these can become worse on therapy and require ECG monitoring.
- Rhabdomyolysis (muscle damage) can occur. Report any muscle pain or weakness, reduced or no urine output, or red-brown colored urine to your healthcare provider.

### **Reproductive Concerns**

Exposure of an unborn child to this medication could cause birth defects, so you should not become pregnant or father a child while on this medication. Effective birth control is necessary during treatment. Even if your menstrual cycle stops or you believe you are not producing sperm, you could still be fertile and conceive. You should consult with your healthcare team before breastfeeding while receiving this medication.

# **Bevacizumab (Avastin®)**

**Pronounced:** BEV-a-SIZ-oo-mab

**Classification:** Monoclonal Antibody

### **About Bevacizumab**

Bevacizumab is a monoclonal antibody that binds to and inhibits the activity of vascular endothelial growth factor (VEGF). This prevents the VEGF from interacting with its receptor on endothelial cells (lining of blood vessel). This, in turn, inhibits the formation of new blood vessels, which slows down the growth of the particular tissue. In essence, it kills tumors by cutting off their blood supply.

### **How to Take Bevacizumab**



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Bevacizumab is given by intravenous (IV, into a vein) infusion. The treatment is delivered over 90 minutes for the first infusion. If that dose is well tolerated, the second infusion can be administered over 60 minutes. If this is well tolerated, subsequent infusions can be given over 30 minutes. Dosage depends on the person's size and type of cancer being treated.

Bevacizumab is usually given at the same time as other chemotherapy medications. Therefore, this should be kept in mind as the side effects are reviewed.

## **Possible Side Effects**

There are a number of things you can do to manage the side effects of bevacizumab. Talk to your doctor or nurse about these recommendations. They can help you decide what will work best for you. These are some of the most common side effects:

### ***Infusion Reactions***

The infusion can cause a reaction that may lead to chills, fever, low blood pressure, nausea and vomiting. You will receive Tylenol and diphenhydramine prior to the infusion to help prevent these reactions. Some patients will also receive a steroid before the infusion to prevent a reaction. Reactions are most common during the first week of therapy, including the evening after the infusion. Your doctor or nurse will tell you what to do if this happens.

### ***High Blood Pressure***

Patients receiving bevacizumab can develop high blood pressure. Your blood pressure should be monitored at every clinic visit or every 2-3 weeks. If your blood pressure is elevated, you will be treated with a medication to reduce your pressure. If severe hypertension develops, bevacizumab should be discontinued immediately. In both cases, your blood pressure should continue to be monitored, even if bevacizumab is stopped. Signs of hypertension to report to your team include: blurry vision, nosebleed, headache and fatigue.

### ***Gastrointestinal Perforation***

This medication can cause a tear in the intestinal wall, also called a gastrointestinal perforation. Signs of this can include: new or worsening pain in the abdomen, new abdominal swelling, chills, fever, constipation, nausea or vomiting. If you experience any of these, contact your healthcare provider immediately or go to the emergency room.

### ***Bleeding***

Patients may experience minor bleeding, such as a nosebleed. Serious bleeding has also occurred in patients treated with this medication, including coughing up blood, bleeding into the stomach, vomiting blood, bleeding in the brain (stroke), nosebleeds and vaginal



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bleeding. People who have had serious bleeding should not take this medication. These events are uncommon, though if they occur, bevacizumab should be discontinued. While a nosebleed may not seem like much of a concern, you should notify your healthcare team right away if you develop bleeding of any sort.

### **Constipation**

There are several things you can do to prevent or relieve constipation. Include fiber in your diet (fruits and vegetables), drink 8-10 glasses of non-alcoholic fluids a day, and keep active. A stool softener once or twice a day may prevent constipation. If you do not have a bowel movement for 2-3 days, you should contact your healthcare team for [suggestions to relieve the constipation](#).

### **Nausea and/or Vomiting**

Talk to your doctor or nurse so they can prescribe medications to help you manage [nausea and vomiting](#). In addition, dietary changes may help. Avoid things that may worsen the symptoms, such as heavy or greasy/fatty, spicy or acidic foods (lemons, tomatoes, oranges). Try antacids, (e.g. milk of magnesia, calcium tablets such as Tums), saltines, or ginger ale to lessen symptoms.

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## ***Kidney Damage***

Kidney damage can occur while receiving bevacizumab. Your healthcare team will monitor this by periodically checking the amount of protein in your urine. If the protein levels become elevated, you may require further urine tests to evaluate your kidney function. If your kidneys become damaged, you may need to stop receiving this medication.

## ***Blood Clots, Stroke and Heart Attack***

Bevacizumab can increase the risk of blood clots, stroke and heart attack. If you experience symptoms of these problems, you should contact your healthcare provider immediately or go to an emergency room. Symptoms can include: swelling, redness or pain in an extremity, chest pain or pressure, pain in your arm, back, neck or jaw, shortness of breath, numbness or weakness on one side of the body, trouble talking, confusion or mental status changes.

## ***Wound Healing***

This medication can lead to slower or incomplete wound healing, such as a surgical wound not healing or staying closed. Therefore, it is recommended that the medication be discontinued 4 weeks prior to any surgery. In addition, any surgical incision should be fully healed prior to starting or restarting the medication. If you have a surgical wound that has not healed or begins to have signs of infection (redness, swelling, warmth), report this to your healthcare team.

## ***Additional Rare, But Serious, Side Effects***

A possible, but rare, side effect is the development of a fistula, which is an abnormal passage between two body parts (for instance, a hole between the lung and esophagus).

Posterior Reversible Encephalopathy Syndrome (PRES) has been reported with this medication. PRES is a neurological disorder, which can present with headache, seizure, lethargy, confusion, blindness and other visual and neurologic disturbances. Report any of these neurological symptoms to your healthcare team immediately.

## ***Sexual & Reproductive Concerns***

This drug may affect your reproductive system, resulting in the menstrual cycle or sperm production becoming irregular or stopping permanently. Women may experience menopausal effects including hot flashes and [vaginal dryness](#). In addition, the desire for sex may decrease during treatment.

Exposure of an unborn child to this medication could cause birth defects, so you should not become pregnant or father a child while on this medication. Effective birth control is



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necessary during treatment and for at least 6 months after treatment, even if your menstrual cycle stops or you believe you are not producing sperm. You may want to consider sperm banking or egg harvesting if you may wish to have a child in the future. Discuss these options with your oncology team.



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