

Carboplatin (Paraplatin®)

Pronounce: car-boe-PLATT-in

Classification: Platinum Chemotherapies

About Carboplatin (Paraplatin®)

Carboplatin is a heavy metal compound that affects the RNA, DNA, and protein in cells. By preventing cancer cells from dividing, the medication can stop the cancer from growing.

How to Take Carboplatin

Carboplatin is given by intravenous (IV, into a vein) injection. Your dose is based on your size, kidney function, and type of cancer. It can be given alone, or with other drugs.

Even when carefully and correctly administered by trained personnel, this drug may cause a feeling of burning and pain. There is a risk that this medication may leak out of the vein at the injection site, causing tissue damage that can be severe. If the area of injection becomes red, swollen, or painful at anytime during or after the injection, tell your care team right away. Do not apply anything to the site unless instructed by your care team.

Carboplatin can interact with certain medications including some antibiotics, diuretics and blood thinners. Be sure to tell your healthcare provider about all medications and supplements you take.

Possible Side Effects

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

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°F or 38°C), 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 bathe daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.

- Ask your oncology care team before scheduling dental appointments or procedures.
- Ask your oncology care team 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 oncology care team 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 oncology care team 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).
- 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/Advil (ibuprofen), Aleve (naproxen), Celebrex (celecoxib) etc. as these can all increase the risk of bleeding. Please consult with your healthcare team regarding use of these agents and all over the counter medications/supplements while on therapy.
- Do not floss or use toothpicks and use a soft-bristle toothbrush to brush your teeth.

Nausea and/or Vomiting

Talk to your oncology care team 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 saltines, or ginger ale to lessen symptoms.

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

Electrolyte Changes

This medication can affect the normal levels of electrolytes (sodium, potassium, magnesium, calcium, etc.) in your body. Your levels will be monitored using blood tests. If your levels become too low, your care team may prescribe specific electrolytes to be given by IV or taken by mouth. Do not take any supplements without first consulting with your care team.

Liver Toxicity

This medication can cause liver toxicity, which you will be monitored for using blood tests called liver function tests. If you develop elevations in your liver function tests, your healthcare provider may need to lower your dose or stop the medication. 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.

Kidney Problems

Carboplatin can impact your kidney function. Your healthcare team will monitor your kidney function throughout treatment. Try to drink at least 6-8 glasses of uncaffeinated fluids a day. Call your doctor or nurse if you do not urinate for more than 12 hours.

Live Vaccines

You, or anyone you live with, should avoid having live or live-attenuated vaccines while receiving this medication. These include herpes zoster (Zostavax) for shingles prevention, oral polio, measles, nasal flu vaccine (FluMist®), rotovirus and yellow fever vaccines.

Less common, but important side effects can include:

- **Peripheral Neuropathy (Numbness or Tingling in the Hands and/or Feet):** [Peripheral neuropathy](#) is a toxicity that affects the nerves. It causes numbness or a tingling feeling in the hands and/or feet, often in the pattern of a stocking or glove. This can get progressively worse with additional doses of the medication. In some people, the symptoms slowly resolve after the medication is stopped, but for some it never goes away completely. You should let the oncology care team know if you experience numbness or tingling in the hands and/or feet, as they may need to adjust the doses of your medication.
- **Allergic Reactions:** In some cases, patients can have an allergic reaction to this medication. Signs of a reaction can include: rash, itching, hives, flushing, and/or shortness of breath or difficulty breathing. 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.
- **Vision/Hearing Changes:** In rare cases, this medication can cause changes to hearing and vision. Contact your care team if you notice ringing in your ears, decrease in hearing, or changes in your vision.

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 not breastfeed while receiving this medication.

Etoposide (Toposar[®], VePesid[®], Etopophos[®], VP-16)

Pronounce: e-toe-POE-side

Classification: Topoisomerase inhibitor

About Etoposide (Toposar[®], VePesid[®], Etopophos[®], VP-16)

Etoposide works by blocking the action of an enzyme in cells called topoisomerase, which is necessary for cell replication and tumor growth. Cells need this enzyme to keep their DNA in the proper shape when they are dividing. Blocking this enzyme leads to breaks in the DNA, which leads to cancer cell death.

How to Take Etoposide

Etoposide is given by intravenous (IV, into a vein) infusion. It can also be given by mouth in the form of a [capsule](#), but this article will focus on the intravenous route. The dosage and schedule is determined by the person's size, type of cancer, and mode of administration. It can be given alone or with other medications.

Even when carefully and correctly administered by trained personnel, this drug may cause a feeling of burning and pain. There is a risk that this medication may leak out of the vein at the injection site, resulting in tissue damage that can be severe. If the area of injection becomes red, swollen, or painful at any time during or after the injection, notify your care team immediately. Do not apply anything to the site unless instructed by your care team.

Possible Side Effects of Etoposide

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

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°F or 38°C), 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 bathe daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.
- Ask your oncology care team before scheduling dental appointments or procedures.
- Ask your oncology care team 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 oncology care team 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 oncology care team 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).
- 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/Advil (ibuprofen), Aleve (naproxen), Celebrex (celecoxib) etc. as these can all increase the risk of bleeding. Please consult with your healthcare team regarding use of these agents and all over the counter medications/supplements while on therapy.
- Do not floss or use toothpicks and use a soft-bristle toothbrush to brush your teeth.

Mouth Ulcers (Mucositis)

Certain cancer treatments can cause [sores or soreness in your mouth](#) and/or throat. Notify your oncology care team 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 with warm water mouth rinse (2 level teaspoons of baking soda or 1 level teaspoon of 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.

Nausea and/or Vomiting

Talk to your oncology care team 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 saltines, or ginger ale to lessen symptoms.

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

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.

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.

Less common, but important side effects can include:

- **Lowering of Blood Pressure:** Blood pressure may drop while this medication is being infused. When receiving this medication through a vein, your nurse will be checking your blood pressure before and during the infusion. It may become necessary to stop the administration of this medication or slow down the infusion rate if your blood pressure drops.
- **Allergic Reactions:** Patients can have an allergic reaction to this medication. Signs of a reaction can include: swelling, chills, fever, increased heart rate, shortness of breath or difficulty breathing, 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.
- **Radiation Recall:** Radiation recall is when the administration of a medication causes a skin reaction that looks like a sunburn (redness, swelling, soreness, peeling skin) in areas where radiation was previously given. Notify your oncology team if you notice this side effect. Treatment can include topical steroid ointments and a delay in your next chemotherapy dose.
- **Secondary Malignancies:** There is a very low risk of developing leukemia due to treatment with this medication, which can occur many years after treatment. This is most often associated with repeated treatments or high doses.

Sexual & Reproductive Concerns

This medication 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 necessary during treatment and for at least 6 months for women and 4 months for men 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. You should not breastfeed while receiving this medication.

Ifosfamide (Ifex®)

Content Contributor: Karen Arnold-Korzeniowski, BSN RN

Pronounce: eye-FOSS-fa-mide

Classification: Alkylating Agent

About Ifosfamide (Ifex®)

Ifosfamide exerts its anti-cancer effect by a process called alkylation. Alkylation damages the DNA of cells, which prevents them from dividing and causes them to die. Since cancer cells, in general, divide faster and with less error correcting than healthy cells, cancer cells are more sensitive to this damage.

How to Take Ifosfamide

Ifosfamide is given by intravenous (into a vein) infusion. The dosage and schedule are determined by the person's size and type of cancer. It can be given alone or with other drugs.

The blood levels of this medication can be affected by certain foods and medications, so they should be avoided. These include grapefruit, grapefruit juice, verapamil, ketoconazole, rifampin, phenytoin, St. John's wort, and fluconazole. Be sure to tell your healthcare provider about all medications and supplements you take.

Possible Side Effects of Ifosfamide

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

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°F / 38°C), 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 bathe daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.
- Ask your oncology care team before scheduling dental appointments or procedures.
- Ask your oncology care team 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 oncology care team 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 oncology care team 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).
- 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/Advil (ibuprofen), Aleve (naproxen), Celebrex (celecoxib), etc. as these can all increase the risk of bleeding. Please consult with your healthcare team regarding the use of these agents and all over-the-counter medications/supplements while on therapy.
- Do not floss or use toothpicks and use a soft-bristle toothbrush to brush your teeth.

Nervous System Toxicity

In rare cases, ifosfamide can be toxic to the nervous system. Symptoms of this can include mild confusion, drowsiness, difficulty walking, blurry vision, hallucinations, personality changes, seizure, and coma. Toxicity can develop immediately after treatment up to several days later. Your caregiver should be aware of this rare side effect and know to report any changes in your behavior to your healthcare team right away.

Effect on Kidneys and Bladder

Ifosfamide can damage the kidneys. It can irritate or cause damage to the lining of the bladder, causing you to have blood in your urine. Intravenous fluids will be given with your treatment to flush the kidneys and bladder. A medication called Mesna will be given to protect the bladder lining. Your care team will monitor your kidney function with blood tests. Drink 6-8 glasses of fluid a day and try to urinate every 2-3 hours. Call your doctor or nurse if you have difficulty urinating or have blood in your urine.

Nausea and/or Vomiting

Talk to your oncology care team 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 saltines, or ginger ale to lessen symptoms.

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

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.

Less common, but important side effects can include:

- **Secondary Cancers:** A secondary cancer is one that develops as a result of cancer treatment for another cancer. This is quite rare, but you should be aware of the risk. In most cases, a secondary cancer related to chemotherapy is a blood cancer (leukemia, lymphoma). This can occur years after treatment. This is most often associated with repeated treatments or high doses. Your provider will

monitor your labs closely. Consider having a complete blood count with differential checked annually by your healthcare provider if you received high-risk therapies.

- **Lung Changes:** This medication may cause pulmonary fibrosis (scarring and stiffening of the lung tissue) or interstitial pneumonitis. These problems can develop months to years after treatment is completed and may be more common in people with pre-existing lung conditions. You may have breathing tests (pulmonary function tests) performed periodically. Call your physician right away if you have shortness of breath, cough, wheezing, or difficulty breathing.
- **Heart Problems:** Ifosfamide can cause or worsen pre-existing heart problems including congestive heart failure, arrhythmias, ST-segment and t-wave changes, pericardial effusion, pericarditis, decreased heart function, and heart attack. Notify your healthcare provider if you have sudden weight gain or swelling in the ankles or legs. If you develop chest pain or pressure, pain in the left arm, back, or jaw, sweating, shortness of breath, clammy skin, nausea, dizziness, or lightheadedness, call 911 or go to the nearest emergency room.
- **Liver Problems:** This medication can cause liver toxicity, which your oncology care team may monitor 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 you have pain in your abdomen, as these can be signs of liver toxicity. This medication, and when used in combination with other medications, may also potentially cause a serious side effect called veno-occlusive disease, also known as hepatic sinusoidal obstruction syndrome. This is caused by blockage of the blood flow through the small veins of the liver. Symptoms that should immediately be reported to your care team include yellowing of the skin or eyes, an enlarged liver which can lead to discomfort in the upper abdomen, weight gain, and fluid accumulation in the belly. The chance of having this side effect is higher if you are planning to receive a stem cell transplant after receiving this medication.
- **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.

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 necessary during treatment and for a 6 month period 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. You should not breastfeed while taking this medication.

Rituximab (Rituxan®)

Pronounce: ri-TUK-si-mab

Classification: Monoclonal Antibody

About Rituximab (Rituxan®)

Monoclonal antibodies are created in a lab to attach to the targets found on specific types of cancer cells. The antibody “calls” the immune system to attack the cell it is attached to, resulting in the immune system killing the cell. These antibodies can work in different ways, including stimulating the immune system to kill the cell,

blocking cell growth or other functions necessary for cell growth. Rituximab is directed against a protein called CD20, found on the surface of normal and cancerous B-cells, which are part of the immune system. Once rituximab attaches itself to the B cells expressing CD20, it summons the body's immune system to attack and destroy those cells.

How to Take Rituximab

Rituximab is given by intravenous (IV, into a vein) infusion. It may take several hours or longer to receive your first dose of rituximab. Depending on how you tolerate the medication, you may receive subsequent doses more quickly. The dosage and schedule are determined by the person's body size, type of cancer, and treatment regimen. Prior to each dose, the patient may be given medications, including acetaminophen and an antihistamine (such as diphenhydramine), to decrease the risk of an infusion reaction.

You, or anyone you live with, should avoid having live or live-attenuated vaccines while receiving this medication. These include herpes zoster (Zostavax) for shingles prevention, oral polio, measles, nasal flu vaccine (FluMist®), rotovirus, and yellow fever vaccines.

Possible Side Effects of Rituximab

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

Infusion and Allergic Reactions

Allergic or infusion reactions may occur during the treatment, typically within 30 minutes to 2 hours of beginning the first infusion. This is less common after the first treatment.

During the infusion, if you experience difficulty breathing or swallowing, experience chest pain, cough or wheezing, swelling of lips or face, develop itching, rash or hives, lightheadedness, fever, chills, or shakes inform your nurse immediately. Additional medications may be given to alleviate your discomfort. Your infusion may be slowed or temporarily stopped.

Severe Skin and Mouth Reactions

Notify your healthcare provider if you develop painful sores or blisters, on your skin, lips, or inside your mouth, rash or peeling skin.

Hepatitis B Reactivation

This medication can also cause Hepatitis B reactivation in patients who have previously had hepatitis. Be sure your healthcare provider is aware of previous Hepatitis B diagnosis and treatment. You will also be tested for the Hepatitis B virus prior to beginning treatment with this medication.

Progressive Multifocal Leukoencephalopathy (PML)

Progressive Multifocal Leukoencephalopathy (PML) is a rare but very serious brain infection that has been reported with this medication. The signs of PML may develop over several weeks or months. They may include changes in mood or usual behavior, confusion, thinking problems, loss of memory, changes in vision, speech, or walking, and decreased strength or weakness on one side of the body. If you develop any of these signs, notify your oncology care team immediately.

Infection and Low White Blood Cell Count (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°F or 38°C), 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 bathe daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.
- Ask your oncology care team before scheduling dental appointments or procedures.
- Ask your oncology care team before you, or someone you live with has any vaccinations.

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.

Nausea and/or Vomiting

Talk to your oncology care team 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 saltines, or ginger ale to lessen symptoms.

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

Less common, but important side effects can include:

- ***GI Obstruction or Tear:*** This medication can cause bleeding or a tear in the intestinal wall. Signs of these problems include: unexpected bleeding, blood in the stool or black stools, coughing up blood, vomiting blood, vomit that looks like coffee grounds, fever, severe pain in the abdomen, or new abdominal swelling. If you experience any of these, contact your oncology care team immediately or go to the emergency room.
- ***Flu-Like Symptoms:*** You may experience flu-like symptoms, including muscle and body aches, headache, fever, and chills. Acetaminophen may help relieve these symptoms. However, fever can be a sign of an infection and should be reported to your healthcare provider.
- ***Tumor Lysis Syndrome:*** If there are a large amount of tumor cells in your body prior to treatment, you are at risk for tumor lysis syndrome. This happens when the tumor cells die too quickly and their waste overwhelms the body. You may be given a medication (allopurinol) and IV fluids to help prevent this. If you experience nausea, vomiting, diarrhea, or become lethargic (drowsy, sluggish), notify your oncology team right away. TLS can affect your kidney function. Your provider will monitor your kidney function with blood work. Notify your provider if you have little or no urine output.
- ***Heart Problems:*** Rituximab can cause chest pain or irregular heartbeats. Notify your healthcare provider if you develop cardiac symptoms.
- ***Kidney Problems:*** This medication can cause kidney problems, including an increased creatinine level, which your oncology care team may monitor for using blood tests. Notify your healthcare provider if you notice decreased urine output, blood in the urine, swelling in the ankles, or loss of appetite.

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 and for at least 12 months after treatment. Even if your menstrual cycle stops or you believe you are not producing sperm, you could still be fertile and conceive. You should not breastfeed while taking this medication or for 6 months after your last dose.

Current Biosimilars

There are biosimilar versions of rituximab. A biosimilar is a medication that has been approved by the FDA because it is very similar to an FDA-approved medication (called a reference product, or the medication it is being compared to), and there are no meaningful differences between the biosimilar product and the reference product. These medications may be used interchangeably.

The biosimilar versions of this medication include rituximab-abbs, rituximab-arrx, and rituximab-pvvr.

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