



KEEP ALL MEDICINE OUT OF THE SIGHT AND REACH OF CHILDREN

Gemcitabine (Gemzar)

What is gemcitabine?

Gemcitabine is one of a group of chemotherapy drugs called anti metabolites. Anti metabolites are similar to normal body molecules but they are slightly different in structure. These differences mean that anti metabolites stop cells working properly. It is a treatment for

- Cancer of the pancreas
- Non small cell lung cancer
- Breast cancer that has spread, in combination with paclitaxel
- Bladder cancer, in combination with cisplatin
- Ovarian cancer, in combination with carboplatin

How you have gemcitabine

Gemcitabine is a clear liquid. You have it into your bloodstream (intravenously). Having the drip usually takes about an hour.

You usually have gemcitabine as a course of several cycles of treatment. The exact treatment plan depends on which type of cancer you have. You can find out more about the way chemotherapy treatment is planned in our planning chemotherapy section.

Common side effects

More than 10 in every 100 people have one or more of the side effects listed below.

- A temporary drop in the number of blood cells made by the bone marrow, causing
- An increased risk of getting an infection from a drop in white blood cells – it is harder to fight infections and you can become very ill. You may have headaches, aching muscles, a cough, sore throat, pain passing urine or feel cold and shivery
- Tiredness and breathlessness due to a drop in red blood cells (anaemia) – you may need a blood transfusion
- Bruising more easily due to a drop in platelets – you may have nosebleeds, bleeding gums after brushing your teeth, or lots of tiny red spots or bruises on your arms or legs (known as petechia)
- Some of these side effects can be life threatening, particularly infections. You should contact your doctor or specialist nurse if you have any of these effects. Your doctor will check your blood counts regularly to see how well your bone marrow is working.
- Other common side effects include
- Tiredness (fatigue) during and after the course of treatment – most people find their energy levels are back to normal from 6 months to a year after their treatment ends
- Drowsiness for a few hours after having treatment due to the presence of alcohol in the drug compound – drinking alcohol may make the drowsiness worse
- Feeling or being sick, which is usually mild but happens to about 7 out of 10 people (70%)
- Liver changes in about 6 out of 10 people – you are unlikely to notice any symptoms and your liver function will almost certainly go back to normal when treatment is finished. To be on the safe side, you will have regular blood tests to check how well your liver is working



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- Flu like symptoms in about 2 in 10 people (20%) a few hours after treatment, including headaches, muscle aches (myalgia), a high temperature and shivering – 6 to 8 hourly paracetamol can help
- Swelling in your face, hands and feet occurs in about 3 out of every 10 people (30%) treated – this usually goes away on its own, but tell your doctor or nurse if you have it
- Wheeziness or breathlessness occurs in from 1 to 4 out of 10 people (10 to 40%) – it is more common in people with lung cancer
- Small amounts of blood and protein in your urine – this may be found when your nurse tests your urine and is not harmful
- A high temperature (above 38°C) about 6 to 12 hours after treatment in about 4 out of 10 people (40%) – paracetamol 6 to 8 hourly should help
- A skin rash in about 1 in 4 people (25%) that is itchy in 1 out of 10 people (10%)
- Hair thinning

Occasional side effects

- Between 1 and 10 in every 100 people have one or more of these.
- Diarrhoea or constipation – drink plenty of fluids and tell your doctor or nurse if it becomes severe or continues for more than 3 days
- A sore mouth or mouth ulcers
- Difficulty sleeping
- Drowsiness in about 1 in 10 people – you may be very drowsy for a while but this goes away on its own
- Loss of appetite
- Loss of fertility – you may not be able to become pregnant or father children after this treatment. Talk to your doctor before starting treatment if having a child is important to you
- Women may stop having periods (amenorrhoea) – this may only be temporary
- A cough
- Back or muscle pain
- A runny nose
- Sweating

Rare side effects

- Fewer than 1 in 100 people have these effects.
- Long term changes in the lung
- An irregular heart beat or heart muscle changes
- Kidney changes – you will have regular blood tests to check how well your kidneys are working

Important points to remember

The side effects above may be mild or more severe. They may be increased if you are having other drugs or radiotherapy at the same time. A side effect may get better or worse through your course of treatment, or more side effects may develop as the course goes on. This depends on

- How many times you've had the drug before
- Your general health



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- The amount of the drug you have (the dose)
- Other drugs you are having

Coping with side effects

Talk to your doctor, pharmacist or nurse about all your side effects so that they can help you manage them. They can give you advice or reassure you. Your nurse will give you a contact number to ring if you have any questions or problems. If in doubt, call them.

Other medicines

Tell your doctor about any other medicines you are taking, including vitamins, herbal supplements, and over the counter remedies – some drugs can react together.

Pregnancy and contraception

This drug may have a harmful effect on a developing baby. It is not advisable to become pregnant if you are having gemcitabine. Men need to use reliable contraception while having the drug and for about 6 months after the end of treatment. Talk to your doctor or nurse about contraception before starting treatment.

Breastfeeding

Breastfeeding is not advisable during this treatment because the drug may come through in the breast milk.

Alcohol Use

Gemcitabine treatment contains alcohol (equal to half a glass of wine or half a pint of beer) and may make you drowsy or dizzy, especially if you have drunk alcohol. Do not operate machinery or drive if you feel drowsy.

Medical and dental treatment

If you need to go into hospital for any reason other than cancer, always tell the doctors and nurses that you are having chemotherapy. Give them contact details for your cancer doctor.

Talk to your cancer doctor or nurse if you think you need dental treatment. Always tell your dentist you are having chemotherapy.

Immunisations and chemotherapy

- You should not have immunisations with live vaccines while you are having chemotherapy or for at least 6 months afterwards. These include rubella, mumps, measles (usually given together as MMR), BCG, yellow fever and Zostavax (shingles vaccine).
- You can have other vaccines, but they may not give you as much protection as usual until your immune system has fully recovered from your chemotherapy. It is safe to have the flu vaccine.
- It is safe for you to be in contact with other people who've had live vaccines as injections. There can be problems with vaccines you take by mouth (oral vaccines), but not many people have these now. So there is usually no problem in being with any baby or child who has recently had any vaccination. You might need to make sure that you aren't in contact with anyone who has had oral polio, cholera or typhoid vaccination recently, particularly if you live abroad.