



KEEP ALL MEDICINE OUT OF THE SIGHT AND REACH OF CHILDREN

Gemcitabine and paclitaxel (GemTaxol)

What is GemTaxol?

GemTaxol is the name of a combination of chemotherapy drugs used to treat breast cancer. This combination of drugs is also being researched for other types of cancers. It is made up of the drugs

- Gemcitabine (also called Gemzar)
- Paclitaxel (also known as Taxol)

The side effects of a combination of drugs are usually a mixture of those of each drug. You may get some or all of the side effects. The combination may increase or decrease your chance of getting each side effect or it may change the severity.

How you have GemTaxol

- Gemcitabine and paclitaxel are clear colourless fluids. You have these drugs into your bloodstream (intravenously).
- You usually have GemTaxol chemotherapy as cycles of treatment. You may have 4 to 6 cycles over 3 to 5 months. Each cycle of treatment lasts 3 weeks.
- On the first day, you have drips (infusions) of gemcitabine and paclitaxel. The gemcitabine drip takes about half an hour and paclitaxel takes 3 hours. For the next 6 days you have no treatment. On the 8th day you have a gemcitabine drip. Then you have no treatment for 2 weeks. This completes one treatment cycle and you then start again.

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. This can cause
- 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. You may have injections just under the skin of your abdomen to make your bone marrow produce more white blood cells.
- 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. Contact your doctor or nurse straight away if you have any of these effects. Your doctor will check your blood counts regularly to see how well your bone marrow is working.
- **Contact your treatment center straight away if you have any of these effects or if your temperature goes above 38°C**
- Tiredness (fatigue) during and after treatment – most people find their energy levels are back to normal within 6 months to a year
- Feeling or being sick affects about 7 out of every 10 people (70%), but is usually well controlled with anti sickness medicines



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- Numbness or tingling in fingers and toes can cause difficulty with fiddly things such as doing up buttons – this begins within a few days or weeks and usually goes within a few months after treatment ends
- Complete hair loss affects most people but this is temporary – your hair will grow back when the treatment ends
- Aching joints (arthralgia) and aching muscles (myalgia) affect about 6 out of 10 people (60%) who have paclitaxel – it may start a couple of days after treatment and last for about 5 days
- Diarrhoea – drink plenty of fluids and tell your doctor or nurse if diarrhoea becomes severe or continues for more than 3 days
- A sore mouth
- Mild allergic reactions in about 1 out of 5 people (20%) who have paclitaxel – let your treatment team know if you have a rash or redness of the face. Usually you have steroids before treatment to prevent a reaction but a few people may have a more severe allergic reaction. Let your treatment team know immediately if you have any skin rashes, itching, shivering, a red face, a headache, shortness of breath, anxiety, dizziness, feeling hot, or a sudden need to pass urine
- Flu like symptoms (headaches, muscle aches, a high temperature and shivering) affect about 2 out of 10 people (20%) within a few hours of having gemcitabine – paracetamol can help
- Swelling in your face, hands and feet affects about 3 out of every 10 people (30%) – it usually goes away on its own, but let your doctor or nurse know if you have it
- A skin rash, which may itch, in about 1 out of 4 people (25%)
- Drowsiness (somnolence) affects about 1 out of 10 people (10%) treated with gemcitabine and you may be very sleepy after treatment – this usually goes away on its own, but tell your treatment team if you have this effect

Occasional side effects

- Between 1 and 10 in every 100 people have one or more of these.
- Wheeziness or breathlessness affects about 1 out of 12 people (8%)
- Women may stop having periods (amenorrhoea) but this may be temporary
- Loss of fertility – we don't know exactly how this drug affects fertility so do talk to your doctor before starting treatment if you plan to have a baby in the future
- Low blood pressure
- Slowing of the heart rate (bradycardia)
- Abdominal pain
- Temporary taste changes
- Headaches
- Liver changes that are very mild and unlikely to cause symptoms – the liver usually goes back to normal when treatment is finished, but you will have regular blood tests to check how well your liver is working



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- Inflammation around the drip site – if you notice any signs of redness, swelling or leaking at your drip site, tell your doctor or chemotherapy nurse immediately

Important points to remember

You may have some of the above effects. They may be mild or more severe. A side effect may get worse through your course of treatment. Or you may have more side effects as the course goes on. This depends on

- How many times you've had a drug before
- Your general health
- How much of the drug you have (the dose)
- Other drugs you are having

Talk to your doctor, pharmacist or nurse about all your side effects so 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.

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

These drugs may have a harmful effect on a developing baby. Talk to your doctor or nurse about contraception before having treatment if there is any chance that you could become pregnant. It is important to use reliable contraception throughout the treatment.

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

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.