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**KEEP ALL MEDICINE OUT OF THE SIGHT AND REACH OF CHILDREN**

## **FLAG-IDA**

### **Your treatment**

- Your doctor or nurse clinician has prescribed for you a treatment called FLAG-IDA.
- The treatment is part of the induction therapy for AML. You will receive Cycle 1 of the treatment in hospital and stay in until your blood counts recover. This means you will be in hospital for about 4 weeks, but this may vary from person to person. You will then have a small period of time at home and come back to hospital to start Cycle 2. Your treatment includes:
  - Cycle 1
    - G-CSF (white blood cell growth factor) given by injection under the skin in the abdomen or leg for 7 days (days 1 to 7)
    - Fludarabine given via an infusion (drip) over 30 minutes, once a day for 5 days (days 2 to 6)
    - Ara-C (cytarabine) given via an infusion (drip) over 4 hours, once a day (4 hours after the fludarabine) for 5 days (days 2 to 6)
    - Idarubicin given via an infusion (drip) over 1 hour once a day for 3 days (days 4 to 6)
  - Cycle 2
    - The same as Cycle 1
- You will have a routine blood test before the start of each cycle of treatment.
- Increased risk of serious infection:
  - You are vulnerable to infection while you are having chemotherapy. Minor infections can become life-threatening in a matter of hours if left untreated. Symptoms of infection include fever, shivering, sweats, sore throat, diarrhoea, discomfort when you pass urine, cough or breathlessness. We recommend that you use a digital thermometer so you can check your temperature. You can buy one from your local pharmacy. A normal temperature is between 36°C and 37°C.

### **Possible side effects**

Chemotherapy can cause many different side effects. Some are more likely to occur than others. We are all different, so we may get different side effects with varying severity. Most side effects are usually temporary, but in some rare cases they can be life-threatening. It is important to tell your hospital doctor or nurse about any side effects so they can be monitored and, where possible, treated.

### **Common side effects**

Idarubicin because of its red colour may discolour your urine red or pink for the first few times following treatment. This is perfectly normal and nothing to worry about.

### **Bruising or bleeding**

This treatment can reduce the production of platelets which help the blood clot. Let your doctor know if you have any unexplained bruising or bleeding, such as nosebleeds, bloodspots or rashes on the skin, and bleeding gums. You may need a platelet transfusion.



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### **Anaemia (low number of red blood cells)**

While having this treatment you may become anaemic. This may make you feel tired and breathless. Let your doctor or nurse know if these symptoms are a problem. You may need a blood transfusion.

You will have a routine blood test every day while you are in hospital to monitor the effects of the chemotherapy, but please tell your nurse if you experience any of the symptoms listed above.

### **Eye irritation**

This is a known side effect of the Ara-C at the dose given in this treatment. We will give you eye drops to try to prevent this, but please let your nurse or doctor know if your eyes feel uncomfortable.

### **Nausea and vomiting (sickness)**

The severity of this varies from person to person. Anti-sickness medication will be given along with your chemotherapy to prevent this. If you continue to feel or be sick, tell your nurse because your anti-sickness medication may need to be changed or increased.

### **Hair loss**

Hair loss is usually total. The hair falls out gradually 10 to 14 days following your first course of treatment. The time scale varies from person to person. Please remember that this is a temporary side effect and your hair will grow back when your treatment is completed. If you would like an appointment with the wig service, this can be arranged for you.

### **Lethargy**

Some chemotherapy may make you feel tired and lacking in energy. It can be frustrating when you feel unable to cope with routine tasks. If you do feel tired, take rest when necessary. Gentle exercise such as walking can be beneficial.

### **Uncommon side effects**

- G-CSF can sometimes cause an aching sensation or pain in the bones. This can usually be controlled with a mild painkiller and will only last while having the injections.
- Ara-C can sometimes cause a syndrome that can result in some or all of the following: fever, weakness and aching in your muscles and bones, a rash and pain in the chest. This will not affect everyone and will disappear soon after the Ara-C infusions stop.
- Fludarabine can occasionally cause some feelings of agitation, confusion or visual disturbances. These are very rare but tell your nurse or doctor about anything unusual.

### **Extravasation**

When chemotherapy leaks outside the vein. If you develop redness, soreness or pain at the injection site at any time please let us know straightaway.

### **Diarrhoea**

If this becomes a problem during or after your treatment, anti-diarrhoea tablets can be prescribed by your doctor. Ask the staff for a copy of Eating: Help yourself which has some useful ideas about diet when you are having treatment.



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### Sore mouth

Following treatment your mouth may become sore and you may notice mouth ulcers. To prevent infection you should use an antibacterial mouthwash (Chlorhexidine). Ask your doctor or nurse for advice. The chemotherapy booklet also has general mouthcare advice. Occasionally during treatment you may experience a strange taste sometimes described as metallic or bitter. A strongly flavoured sweet or mint will help to disguise this.

### Rare side effects

#### Irregular heart beats

Occasionally this can happen as a result of the Idarubicin. It is quite rare if your heart is healthy and is usually reversible. Please make sure you tell a doctor if your heart beat feels different from normal or you have pains in the chest.

#### Skin changes

Sometimes as a result of the chemotherapy, your skin may appear darker in colour or lightly tanned, especially around the joints. This is known as hyperpigmentation. The skin will return to normal when treatment is finished. Some chemotherapy can make your skin more sensitive to the sun than usual. Sit in the shade, avoid too much sun and use a sunblock cream. Asian and African-Caribbean people may develop noticeable light patches on their skin.

#### Serious and potentially life threatening side effects

In a small proportion of patients chemotherapy can result in very severe side effects which may rarely result in death. The team caring for you will discuss the risk of these side effects with you.

#### Sex, contraception & fertility

Protecting your partner and contraception: We recommend that you or your partner use a condom during sexual intercourse while you are having the course of chemotherapy. Chemotherapy is dangerous to unborn babies and this will also protect you and your partner from any chemotherapy drugs that may be present in semen and in the vagina. If you suspect that you may be pregnant please tell your doctor immediately.

#### Fertility

This chemotherapy may affect your ability to have children. If you have any concerns about your fertility, please discuss this with your doctor or nurse clinician before you start treatment.

#### Late side effects

Some side effects may become evident only after a long time. In reaching any decision with you about treatment, the potential benefit you receive from treatment will be weighed against the risks of serious long term side effects to the heart, lungs, kidneys and bone marrow. With some drugs there is also a small but definite risk of developing another cancer. If any of these problems specifically applies to you, the doctor will discuss these with you and note this on your consent form.



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### **Important points to remember**

The side effects above may be mild or more severe. 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
- 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. Your nurse will give you a contact number. You can ring if you have any questions or problems. They can give you advice or reassure you. 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**

AC may have a harmful effect on a developing baby. It is important not to become pregnant if you are having this treatment. Talk about contraception with your doctor or nurse before starting the treatment.

### **Breastfeeding**

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 this treatment or for at least 6 months afterwards.

Live vaccines include rubella, mumps, measles (usually given together as MMR), BCG and yellow fever. You can have other vaccines, but they may not give you as much protection as usual until your immune system has fully recovered.

It is safe for you to be in contact with other people who've had live vaccines as injections. There can be problems with oral vaccines, but not many people have oral vaccines 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.