



For the Patient: **HNNAVCAP**

Treatment of Recurrent or Metastatic Nasopharyngeal Cancer with Capecitabine

HN = Head and Neck

N = Nasopharyngeal

AV = AdVanced

CAP = Capecitabine

ABOUT THIS MEDICATION

What is this drug used for?

- Capecitabine is an anticancer medication used for many types of cancer. It is a tablet taken by mouth.

How do these drugs work?

- Capecitabine interferes with the genetic material, DNA and RNA, of cancer cells and kills them and prevents their growth. Capecitabine does not work until it is taken up by the cancer cell and changed into the active form, 5-fluorouracil.

INTENDED BENEFITS

- This therapy is being given to destroy and/or prevent the growth of new cancer cells in your body.
- This treatment may improve your current symptoms, and delay or prevent the onset of new symptoms.
- This treatment is meant to delay the progression of your cancer.

TREATMENT SUMMARY

How are these drugs given?

- Capecitabine is taken twice a day, about 10 to 12 hours apart. You may be given tablets of more than one strength to make the dose that is right for you.
- Capecitabine tablets are swallowed with water within 30 minutes after breakfast and after dinner.
- Capecitabine is usually given for 14 days, followed by a 7 day break. Each 21 day period is one cycle. This treatment may be given for 6 or more cycles at the discretion of the treating physician.

What will happen when I get my drugs?

- A blood test is done within one month prior to starting your first treatment.
- A blood test is done before day 1 of each cycle of treatment. The dose and timing of your chemotherapy may be changed based on your blood counts and/or other side effects.
- You may be given a prescription for anti-nausea medication (filled at your regular pharmacy). Your pharmacist will counsel you when to take them and how to manage any nausea. It is easier to prevent nausea than to treat it once it has occurred, so follow suggestions given to you.

- To prevent nausea, be well-hydrated and eat small meals frequently. Refer to the pamphlet on “Food Choices to Help Control Nausea”.

Treatment Protocol

DATE	CYCLE		TREATMENT
	1	Week 1	Capecitabine by mouth in AM and PM for 7 days
		Week 2	Capecitabine by mouth in AM and PM for 7 days
		Week 3	no treatment
	2	Week 1	Capecitabine by mouth in AM and PM for 7 days
		Week 2	Capecitabine by mouth in AM and PM for 7 days
		Week 3	no treatment
	3	Week 1	Capecitabine by mouth in AM and PM for 7 days
		Week 2	Capecitabine by mouth in AM and PM for 7 days
		Week 3	no treatment
	4	Week 1	Capecitabine by mouth in AM and PM for 7 days
		Week 2	Capecitabine by mouth in AM and PM for 7 days
		Week 3	no treatment
	5	Week 1	Capecitabine by mouth in AM and PM for 7 days
		Week 2	Capecitabine by mouth in AM and PM for 7 days
		Week 3	no treatment
	6	Week 1	Capecitabine by mouth in AM and PM for 7 days
		Week 2	Capecitabine by mouth in AM and PM for 7 days
		Week 3	no treatment

CHEMOTHERAPY SIDE EFFECTS AND MANAGEMENT

Are there any risks?

Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly important for you to be aware of as they are directly related to the common actions of the drugs in your treatment plan.

SERIOUS SIDE EFFECTS	How common is it?	MANAGEMENT
Chest pain or pressure or irregular heartbeat.	rare	Stop taking capecitabine, Call the oncologist <i>immediately</i> and go to your nearest emergency department.
Hand-foot skin reaction may occur. The palms of your hands and soles of your feet may tingle, become red, numb, painful, or swollen. Skin may also become dry or itchy.	very common	<ul style="list-style-type: none"> • Avoid tight-fitting shoes or rubbing pressure to hands and feet, such as that caused by heavy activity. • Clean hands and feet with lukewarm water and gently pat to dry; avoid hot water. • Apply lanolin-containing creams (e.g., BAG BALM® , UDDERLLY SMOOTH®) to hands and feet, liberally and often. • Tell your cancer doctor at the next visit if you have any signs of hand-foot skin reaction. <p>Stop taking capecitabine and call your cancer doctor if the skin reaction is painful, as your dose may need to be changed.</p>

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
Your white blood cells will decrease during or after your treatment. They usually return to normal after your last treatment. White blood cells protect your body by fighting bacteria (germs) that cause infection. When they are low, you are at greater risk of having an infection.	very common	<p>To help prevent infection:</p> <ul style="list-style-type: none"> • Wash your hands often and always after using the bathroom. • Take care of your skin and mouth. • Avoid crowds and people who are sick. • Stop taking capecitabine and call your doctor <i>immediately</i> at the first sign of an infection such as fever (over 100°F or 38°C by an oral thermometer), chills, cough, or burning when you pass urine.

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
<p>Your platelets may decrease during or after your treatment. They will return to normal after your last treatment. Platelets help to make your blood clot when you hurt yourself. You may bruise or bleed more easily than usual.</p>	<p>uncommon</p>	<p>To help prevent bleeding problems:</p> <ul style="list-style-type: none"> • Try not to bruise, cut, or burn yourself. • Clean your nose by blowing gently. Do not pick your nose. • Avoid constipation. • Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene. <p>Some medications such as ASA (e.g., ASPIRIN®) or ibuprofen (e.g., ADVIL®) may increase your risk of bleeding.</p> <ul style="list-style-type: none"> • Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart). • For minor pain, try acetaminophen (e.g., TYLENOL®) first, but occasional use of ibuprofen may be acceptable.
<p>Nausea and vomiting may occur. Many people have little or no nausea.</p>	<p>common</p>	<p>You may be given a prescription for anti-nausea drug(s) to take at home. It is easier to prevent nausea than treat it once it has occurred, so follow directions closely:</p> <ul style="list-style-type: none"> • Drink plenty of liquids. • Eat and drink often in small amounts. • Try the ideas in <i>Food Choices to Help Control Nausea</i>.

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
<p>Diarrhea may occur during treatment.</p>	<p>common</p>	<p>To help diarrhea:</p> <ul style="list-style-type: none"> • Drink plenty of fluids. • Eat and drink often in small amounts. • Avoid high fibre foods as outlined in <i>Food Ideas to Help with Diarrhea During Chemotherapy</i>. • Note: If lactose in milk usually gives you diarrhea, the lactose in the tablet may be causing your diarrhea. Take LACTAID® tablets just before your capecitabine dose. • Stop taking capecitabine and call your cancer doctor if you have four stools a day more than usual or diarrhea during the night, as your dose may need to be changed.
<p>Sore mouth may occur during treatment. Mouth sores can occur on the tongue, the sides of the mouth, or in the throat. Mouth sores or bleeding gums can lead to infection.</p>	<p>common</p>	<ul style="list-style-type: none"> • Brush your teeth gently after eating and at bedtime with a very soft toothbrush. If your gums bleed, use gauze instead of a brush. Use baking soda instead of toothpaste. • Make a mouthwash with ½ teaspoon baking soda or salt in 1 cup warm water and rinse several times a day. • Try soft, bland foods like puddings, milkshakes and cream soups. • Avoid spicy, crunchy or acidic food, and very hot or cold foods. • Try the ideas in <i>Food Ideas for a Sore Mouth During Chemotherapy</i>.

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
Tiredness and lack of energy may occur.	common	<ul style="list-style-type: none"> • Do not drive a car or operate machinery if you are feeling tired. • Try the ideas in <i>Your Bank to Energy Savings: How People with Cancer Can Handle Fatigue</i>.

INSTRUCTIONS FOR THE PATIENT

How should I take this drug?

Capecitabine is swallowed whole with water. Take the tablets within 30 minutes after breakfast and dinner. Capecitabine is taken for 14 days and then stopped for 7 days. This rest period is important for your blood cells to recover. Your doctor will decide how many cycles of treatment you will need.

What if I miss a dose?

If you miss a dose of capecitabine, take it as soon as you can if it is within 6 hours of the missed dose. If it is over 6 hours since the missed dose, skip the missed dose and go back to the usual dosing time. Call your doctor during office hours to ask about making up the missed dose.

How should I store this drug?

Store at room temperature (15-30°C), in the blister package provided.

What other drugs can interact with capecitabine?

- **Warfarin** (COUMADIN®), **phenytoin** (DILANTIN®), and **fosphenytoin** (CEREBYX®) may interact with capecitabine. Tell your doctor if you are taking these or any other drugs as you may need extra blood tests or your dose may need to be changed.
- Check with your doctor or pharmacist before you start taking any new prescription or non-prescription products.

THE FOLLOWING INFORMATION IS VERY IMPORTANT

STOP TAKING CAPECITABINE AND SEE YOUR DOCTOR OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an **infection** such as fever (over 100°F or 38°C by oral thermometer), chills, cough, pain, or burning when you pass urine.
- Signs of **bleeding problem** such as black, tarry stools, blood in urine, pinpoint red spots on skin, extensive bruising.
- Signs of **heart problems** such as fast or uneven heartbeat, chest pain, chest pressure, shortness of breath or difficulty breathing, swelling of ankles, or fainting.

STOP TAKING CAPECITABINE AND SEE YOUR DOCTOR AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- **Painful hand-foot skin reaction** such as painful redness, peeling, tingling, numbness, swelling or blistering of the palms of your hands and/or the bottoms of your feet.
- **Diarrhea** with four stools a day more than usual, or diarrhea during the night.
- **Nausea** that causes you to eat a lot less than usual or **vomiting** more than 2 times in 24 hours.
- **Painful redness, swelling or sores on your lips, tongue, mouth or throat.**
- Signs of **liver problems** such as yellow eyes or skin, white or clay-coloured stools.
- Signs of **anemia** such as unusual tiredness or weakness.
- **Severe abdominal or stomach cramping or pain.**

CHECK WITH YOUR DOCTOR IF ANY OF THE FOLLOWING CONTINUE OR BOTHER YOU:

- Painless hand-foot skin reaction such as redness, peeling, tingling, numbness, swelling or blistering of the palms of your hands and/or bottoms of your feet.
- Painless redness, swelling or sores on your lips, tongue, mouth or throat.
- Uncontrolled nausea, vomiting, loss of appetite, diarrhea, or constipation.
- Skin rash or itching.
- Changes in fingernails or toenails.
- Heartburn; mild to moderate abdominal or stomach pain.
- Severe skin reaction where you have had radiation.
- Watery, irritated eyes.

If you experience symptoms or changes in your body that have not been described above but worry you, or in any symptoms are severe, contact:

_____ at telephone

number: _____