

For the Patient: LUSCPI

Other Names: Treatment of Recurrent Small Cell Lung Cancer (SCLC) with Cisplatin and Irinotecan

LU = LUng
SC = Small Cell
PI = CisPlatin, Irinotecan

ABOUT THIS MEDICATION

What are these drugs used for?

LUSCPI is an intravenous (through the vein) drug treatment used for Small Cell Lung Cancer. The goal of this treatment is to help control or shrink the cancer and some of the symptoms caused by it.

How do these drugs work?

Cisplatin is an anticancer drug that works by *preventing* the synthesis of DNA, RNA, and proteins that are needed for cancer cells to divide.

Irinotecan is an anticancer drug that works by interfering with dividing cells and preventing an increase in the number of cancer cells.

INTENDED BENEFITS

This therapy is being given to destroy and/or limit the growth of cancer cells in your body.

This treatment can help with controlling some of the symptoms the cancer may be causing, such as pain, coughing, wheezing, difficulty swallowing, weight loss and fatigue.

This treatment may delay or prevent new symptoms from starting.

TREATMENT SUMMARY

How are these drugs given?

- You will receive two intravenous (IV) chemotherapy drugs called cisplatin and irinotecan. They will be given to you at the clinic by a chemotherapy nurse. The treatment is repeated every 3 weeks. This 3 week or 21-day period of time is called a “cycle”. You will need to receive treatment on day 1 and day 8 of each cycle. The cycle is usually repeated up to a maximum of 6 cycles, but may be changed depending on how the chemotherapy affects you.
- For each cycle, you will have the two medications given to you intravenously on Day 1, and one medication given to you intravenously on Day 8.
 - Day 1:
 - Irinotecan is given first, and is given intravenously over approximately half-an-hour (30 minutes).

- Cisplatin is given second, and is given intravenously over approximately one hour (60 minutes).
- Day 8:
 - Only irinotecan is given on this day and it is given intravenously over approximately half-an-hour (30 minutes).

This calendar outlines your overall treatment plan:

C Y C L E	DATE	TREATMENT PLAN
		▶ Week 1 → Irinotecan and Cisplatin IV x 1 day
	1	▶ Week 2 → Irinotecan IV x 1 day
		Week 3 → No Treatment

C Y C L E	DATE	TREATMENT PLAN
		▶ Week 1 → Irinotecan and Cisplatin IV x 1 day
	2	▶ Week 2 → Irinotecan IV x 1 day
		Week 3 → No Treatment

C Y C L E	DATE	TREATMENT PLAN
		▶ Week 1 → Irinotecan and Cisplatin IV x 1 day
	3	▶ Week 2 → Irinotecan IV x 1 day
		Week 3 → No Treatment

C Y C L E	DATE	TREATMENT PLAN
		▶ Week 1 → Irinotecan and Cisplatin IV x 1 day
	4	▶ Week 2 → Irinotecan IV x 1 day
		Week 3 → No Treatment

C Y C L E	DATE	TREATMENT PLAN
		▶ Week 1 → Irinotecan and Cisplatin IV x 1 day
	5	▶ Week 2 → Irinotecan IV x 1 day
		Week 3 → No Treatment

C Y C L	DATE	TREATMENT PLAN
		▶ Week 1 → Irinotecan and Cisplatin IV x 1 day

E		► Week 2 → Irinotecan IV x 1 day
6		Week 3 → No Treatment

What will happen when I get my drugs?

- A blood test is done on or before the first day of each treatment with irinotecan and cisplatin (day 1 and day 8 of each cycle).
- The dose and timing of your chemotherapy may be changed based on your blood test results and/or other side effects.
- Your very first treatment will take longer than other treatments because a nurse will be reviewing the possible side effects of your chemotherapy plan and will discuss with you how to manage them. ***It is a good idea to bring someone with you to your first chemotherapy appointment.***
- You will be given a prescription for anti-nausea medications (to be filled at your regular pharmacy). Please bring your anti-nausea medications with you for each treatment. Your nurse will tell you when to take the anti-nausea medication(s). You may also need to take your anti-nausea drugs at home after therapy. It is easier to prevent nausea than to treat it once it happens, so follow directions closely.

SIDE EFFECTS AND MANAGEMENT

Are there any risks?

- The doctor will review the risks of treatment and possible side effects with you before starting treatment.

SIDE EFFECTS	How Common Is It?	MANAGEMENT
<p>Nausea and vomiting may occur after your treatment and may last for up to 24 hours. Nausea may last longer for some patients (i.e. delayed nausea and vomiting).</p>	<p>Very Common</p>	<p>You will be given a prescription for anti-nausea drug(s) to take before your chemotherapy treatment and/or at home. It is easier to prevent nausea than to treat it once it has happened, 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 Control Nausea</i>”. • Your doctor may manage delayed nausea and vomiting differently. Be sure to let your doctor know if you experience this.
<p>Your white blood cells will decrease 3-4 weeks after your treatment. They usually return to normal 5 weeks 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.</p>	<p>Very Common</p>	<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 by gently washing regularly. • Avoid crowds and people who are sick. <p>Call your doctor immediately 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.</p>

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>Very Common</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. • Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene. Avoid taking ASA (eg: Aspirin®) or Ibuprofen (eg: Advil®), <i>unless prescribed by your doctor.</i>
<p>Early diarrhea may occur during or shortly after an irinotecan treatment (within 24 hours). It starts with watery eyes, stomach cramps and sweating.</p>	<p>Common</p>	<ul style="list-style-type: none"> • Tell your nurse or doctor immediately if you have watery eyes, stomach cramps or sweating during or after your treatment. • Early diarrhea is treated with a medication called atropine, which is injected into a vein or under your skin. If your cancer centre is closed, your cancer doctor may tell you to go to your Hospital Emergency for atropine treatment.

SIDE EFFECTS	How Common Is It?	MANAGEMENT
<p>Late diarrhea may occur one day to several days after an irinotecan treatment. It starts with stools more loose or often than usual.</p>	<p>Common</p>	<ul style="list-style-type: none"> • Late diarrhea must be treated immediately with loperamide 2 mg tablets (eg Imodium®): • Take TWO tablets at the first sign of loose or more frequent stools than usual. • Then take ONE tablet every TWO hours until diarrhea has stopped for 12 hours. • At night, you may take TWO tablets every FOUR hours (set your alarm) during the time you usually sleep. • This dose is much higher than the package directions. It is very important that you take this higher dose to stop the diarrhea. • Always keep a supply of loperamide (eg, have 48 tablets on hand). You can buy loperamide at any pharmacy without a prescription. • To help diarrhea: • Eat and drink often in small amounts. • Avoid high fiber foods as outlined in Food Ideas to Help with Diarrhea During Chemotherapy. • If diarrhea does not improve 24 hours after starting loperamide or lasts more than 36 hours, call your doctor.
<p>Allergic reactions may rarely occur. Signs of an allergic reaction are dizziness, confusion and wheezing. This reaction may occur immediately or several hours after treatment.</p>		<p>Tell your nurse if this happens while you are receiving treatment or contact your oncologist immediately if this happens after you leave the clinic.</p>
<p>Cisplatin burns if it leaks under the skin.</p>	<p>Rare</p>	<p>Tell your nurse or doctor immediately if you feel burning, stinging, or any other change while the drug is being given.</p>
<p>Tiredness or lack of energy may occur.</p>	<p>Common</p>	<ul style="list-style-type: none"> • Do not drive a car or operate machinery if you are feeling tired.

SIDE EFFECTS	How Common Is It?	MANAGEMENT
<p>Pain or tenderness may occur where the needle was placed in your vein.</p>	Common	<ul style="list-style-type: none"> • Apply cool compresses or soak in cool water for 15-20 minutes several times a day.
<p>Hair loss sometimes occurs and may begin within a few days or weeks of treatment. Your hair may thin or you may become totally bald. Your scalp may feel tender. You may lose hair on your face and body. Your hair will grow back once your treatments are over and sometimes between treatments. Colour and texture may change.</p>	Common	<ul style="list-style-type: none"> • Use a gentle shampoo and soft brush. • Care should be taken with use of hair spray, bleaches, dyes, perms. • Protect your scalp with a hat, scarf or wig in cold weather. • Cover your head or apply sunblock on sunny days. • Apply mineral oil to your scalp to reduce itching.
<p>Sore mouth may occur a few days after treatment. Mouth sores can occur on the tongue, the sides of the mouth or in the throat. <i>Mouth sores or bleeding gums can lead to an infection.</i></p>	Common	<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. • Call your doctor if you are having difficulty eating or drinking due to pain. • Try the ideas in “<i>Help with Sore Mouth during Chemotherapy</i>”

INSTRUCTIONS FOR THE PATIENT

What other drugs can interact with LUSCPI?

- Other drugs such as some antibiotics given by vein (eg: tobramycin, vancomycin), phenytoin (DILANTIN®), St John's Wort and prochlorperazine (STEMETIL®) may interact with LUSCPI. Tell your doctor if you are taking these or other drugs as you may need extra blood tests, your dose may need to be changed or your treatment may need to be held for a few days.
- Check with your doctor or pharmacist before you start taking any new prescription or non-prescription drugs.

Other important things to know:

- Cisplatin can cause changes in kidney function, but this is not frequent with the doses used in this type of treatment. It is important that you are well-hydrated before and after treatment.
- Sometimes, the nerve which allows you to hear can be affected by cisplatin. This could result in you experiencing "tinnitus" (ringing in the ears) or a change in your hearing. Report any of these problems to your doctor and/or nurse.
- The drinking of alcohol (in small amounts) does not appear to affect the safety or usefulness of this treatment.
- This treatment may cause sterility in men and menopause in women. If you plan to have children, discuss this with your doctor before starting treatment.
- This treatment may damage sperm and may cause harm to the baby if used during pregnancy. It is best to use *birth control* while you are undergoing treatment. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.
- Tell all doctors or dentists you see that you are being treated with irinotecan and cisplatin before you receive treatment of any form.

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 an oral thermometer), chills, cough, pain or burning when you pass urine.
- Diarrhea that occurs within the first 24 hours after irinotecan treatment.
- Signs of a **stroke** such as sudden onset of severe headache, eyesight changes, slurred speech, loss of coordination, weakness or numbness in an arm or leg.
- Signs of **bleeding problems** such as black, tarry stools, blood in urine or pinpoint red spots on skin.
- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling or breathing problems.
- Signs of a **blood clot** such as tenderness or hardness over a vein, calf swelling and tenderness, sudden onset of cough, chest pain or shortness of breath.
- Signs of **heart problems** such as fast or uneven heartbeat.

- **Seizures or loss of consciousness.**

SEE YOUR DOCTOR AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- **Muscle weakness.**
- Signs of **kidney problems** such as lower back or side pain, swelling of feet or lower legs.
- Uncontrolled **nausea, vomiting or diarrhea.**
- Signs of **anemia** such as unusual tiredness or weakness.
- **Numbness** or tingling in feet or hands.
- Signs of **lung problems** such as shortness of breath or difficulty breathing
- Signs of **liver problems** such as yellow eyes or skin, white or clay-coloured stools.

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

- Easy bruising or bleeding.
- Uncontrolled nausea, vomiting, or diarrhea.
- Redness, swelling, pain or sores where the needle was placed or along the arm.
- Redness, swelling, pain or sores on your lips, tongue, mouth or throat.
- Skin rash or itching.
- Ringing in your ears or hearing problems.
- Numbness or tingling in feet or hands or painful leg cramps.
- Signs of anemia such as unusual tiredness or weakness.

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