

Managing the side effects of chemotherapy

An Educational Resource for Patients With Triple-Negative Disease



You will have side effects from chemotherapy. But which ones, how bad they are, and how long they last will depend on the drugs used, the dose received, and the therapy schedule.

The most important tip for managing the side effects of chemotherapy is to communicate with your treatment team. If you are having problems, let them know immediately.

Why? Because your team can help you better manage your side effects so that you can feel well and continue with your chemotherapy schedule.

The drugs used most often against triple-negative breast cancer kill tumor cells that are in the process of dividing. Many of the side effects of chemotherapy result from effects on healthy tissues that also contain quickly dividing cells. These typically include cells in your bone marrow and blood, cells lining your gastrointestinal (GI) tract (including the mouth), and your hair follicles.

Side effects related to bone marrow suppression

Bone marrow is where white blood cells (WBCs), red blood cells (RBCs), and platelets are made. When bone marrow is affected by chemotherapy, your body may not make enough of these blood cells. This can cause some side effects like those listed in the table at the bottom of this page.

During and after chemotherapy, you will have regular blood tests to look for reduced bone marrow function, but you should talk to someone from your treatment team if you begin to notice any of the symptoms listed in the table at the bottom of the page.

Side effects related to damaged gastrointestinal (GI) tract lining

Nausea, vomiting, diarrhea, constipation, and mouth sores are also side effects of chemotherapy that can be prevented or treated. And all of these side effects occur when your GI-tract lining can't replace cells as rapidly as they are lost. The most effective way to manage nausea and vomiting is prevention.

Antiemetics (drugs to prevent nausea and vomiting)

are usually given before chemotherapy, but can also be given after it, when needed.

Some degree of diarrhea occurs in about 75% of chemotherapy patients and can be serious—and even life threatening—if it leads to dehydration and malnutrition. ***If your diarrhea lasts for more than 48 hours, report it to your treatment team.*** To prevent serious complications from diarrhea,

Blood cell	Function	Symptoms With Too Few Cells	Medical Management
WBC	Fight off infection	Fever; sore throat; cough or shortness of breath; stuffy nose; burning during urination; shaking chills; redness, swelling, pain, and warmth at an injection site or at the site of an injury	You may be given a drug called a growth factor to boost WBC production
RBC	Carry oxygen in the blood	Extreme tiredness; pale skin and gums; dizziness; headache; irritability; shortness of breath, especially with exertion; low blood pressure; increased heart and/or breathing rate	You may have a blood transfusion; if the situation is serious, you may be given an RBC growth factor
Platelets	Assist in clotting	Bruise easily; longer than normal bleeding time after a minor cut; bleeding gums; nosebleeds; small reddish spots on the skin; headaches; blood in stool or urine	You may have a platelet transfusion

© 2011 Med-IQ.

Med-IQ[®]
Inspiring Medical Education

Supported by an educational grant from

sanofi aventis
Because health matters

Managing the side effects of chemotherapy



you should make sure you drink plenty of fluids. Your body's levels of potassium and sodium can also become too low after a long bout of diarrhea. You can get your potassium levels up by eating bananas and skinless potatoes and by drinking fruit juices and sports drinks. You can get your sodium levels up by drinking sports drinks, soups, and broths and eating crackers, pretzels, and other salty foods.

Constipation can also be a common side effect of chemotherapy and other medications you might receive during treatment (pain medications and anti-nausea/vomiting medications, for example). The regular use of stool softeners can help relieve some of these symptoms. But, again, this is another problem that you should be sure to share with your treatment team.

Painful mouth and throat sores can make it difficult for you to eat, drink, and talk, but they usually disappear on their own in a few days. While you wait for them to go away, it can help to avoid alcohol and hot, spicy, or acidic foods. Drinking cold milk can also help ease some of this pain, and some patients find applesauce to be soothing. In addition, some topical medicines can be very soothing, so be sure to let a member of your treatment team know if you are having trouble eating or drinking due to pain from mouth sores. If you notice a white substance that looks like cottage cheese in your mouth or throat, you may have an oral yeast infection, which will require medical attention.

A special note about hair loss

Hair loss, also known as alopecia (al-o-pee-sha), is a common side effect of chemotherapy. For some

women with breast cancer, the thought of losing their hair is so disturbing that they refuse to undergo chemotherapy after surgery and radiation. Don't go this route—if you're worried about hair loss, talk to your physician. In the meantime, here are some basic facts about this common side effect:

- Hair loss usually begins 7 to 21 days after the start of chemotherapy
- It usually takes 3 to 6 months for hair to grow back
- Some women only have partial hair loss; others have total alopecia that includes the hair on their head as well as their body hair, including eyebrows, eyelashes, and pubic hair

There are some things you can do to take charge and make this side effect more bearable:

- Prepare your loved ones; children may be especially sensitive about your hair loss
- Consider cutting your hair very short before chemotherapy; if you get used to seeing yourself with short hair now, you won't have to wait as long to feel "back to normal" when your hair starts to regrow
- Hair loss may be reduced somewhat by treating it gently—no harsh shampoos or dyes, no heat from dryers and electric curlers, careful brushing and combing, and no styles that pull (like braids and ponytails)
- Consider shaving your head and wearing a wig
- If you plan to wear a wig, get fitted for one before you start treatment
- Consider using head coverings such as hats, scarves, and turbans
- Be prepared for the possibility that, at first, your hair may grow back a different color and/or texture (these changes are not usually permanent)

