

Your Intravenous (IV) Cisplatin Chemotherapy Schedule

For people who have gynecologic cancer

Read this resource to learn:

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For questions about your chemotherapy appointment call:
416 946 2220, Press 1.

Or visit: www.chemotherapy.theprincessmargaret.ca

Your first day of chemotherapy is: _____



About cisplatin chemotherapy

What is cisplatin chemotherapy?

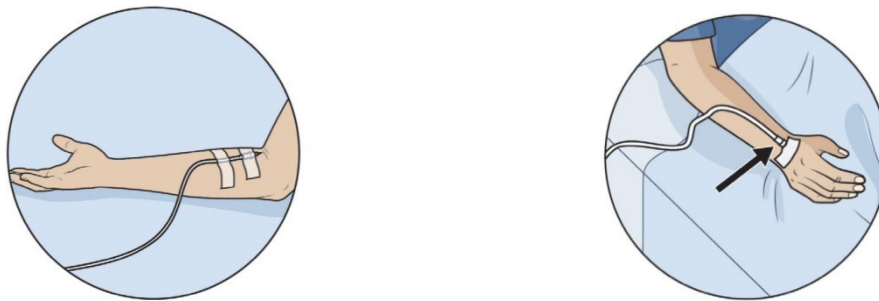
Chemotherapy is a type of cancer treatment that uses medicine to kill cancer cells. You will be getting a chemotherapy medicine called cisplatin.

How long will my chemotherapy treatment last?

One cycle of cisplatin chemotherapy is once every 3 weeks.
Ask your oncologist (cancer doctor) how many cycles you will get.

How will I get chemotherapy?

You will get your chemotherapy through an intravenous (IV) needle. Intravenous is often called "IV" for short. The nurse will insert a needle into a vein on the back of your hand or lower arm. The needle is hooked up to a plastic tube and a bag that contains the chemotherapy medicine.



Here are images of an IV.

How often will I see my oncologist (cancer doctor) during chemotherapy?

You will see your oncologist (cancer doctor) once before each cycle of chemotherapy. Check your appointment schedule for times and dates.

Why do I need so many blood tests?

Chemotherapy affects your whole body. A blood test will show your oncologist (cancer doctor) and nurses how well your body is working.

They use the blood test to:

1. Decide whether it is safe to give you chemotherapy
2. See whether or not your medicines need to be adjusted

The 3 most common blood tests are:

- Complete Blood Count (CBC). This test shows the number of red blood cells, white blood cells (cells that fight off infection), and platelets (cells that help stop bleeding).
- Creatinine. This test shows how well your kidneys are working.
- Liver function. This test shows how well your liver is working.

Your chemotherapy may be delayed if your blood counts are too low. Your oncologist (cancer doctor) will talk to you about this.

For more information, read pages 11, 12, 13 and 14.

Where to go for your appointments

Where do I go for my appointments?

All of your chemotherapy related appointments are at the Princess Margaret Cancer Centre.

For blood tests:

Go to the Blood Collection Lab on the main floor at Princess Margaret.

For chemotherapy:

Go to the Chemotherapy Daycare Unit located on the 4th floor of Princess Margaret.

To pick up medicine:

Your doctor will send your prescriptions directly to your pharmacy after your clinic visit. Call your pharmacy to make sure they received the prescription. If they did not, call your doctor's office and tell the administrator.

If you use the Princess Margaret Outpatient Pharmacy, you must pick up the prescription at least 3 days before your first treatment. The Princess Margaret Outpatient Pharmacy is located on the main floor.

For appointments with your oncologist (cancer doctor):

Go to the Gynecology Clinic, on the 5th Floor of Princess Margaret. Your appointment schedule will also tell you where the clinic is.

What should I bring to my chemotherapy appointment?

- Your health card.**
- Private insurance information (if you have any).**
- Money for parking and food.**
- Any medicine you need to take during the day.** This includes ondansetron hydrochloride (Zofran), dexamethasone (Decadron), prochlorperazine (Stemetil), and any medicines you usually take.
- Something to do.** Bring something like a music player with headphones, books, laptops or tablets to keep you busy. You may be in the unit for a long time. There is free WiFi in the hospital.
- Meals and snacks for the day.** Bring foods with mild smells. Strong smells can sometimes make other patients feel sick. The clinic provides free juice, cookies and popsicles.
- Someone to drive you home.** It is not safe to drive after the appointment. Some of the medicines will make you drowsy.
- If you want, one family member or friend can check on you during your treatment.**

Managing side effects

What are some possible side effects?

Different kinds of chemotherapy cause different side effects.

Your type of chemotherapy may cause these side effects:

- Nausea (feeling like you will throw up) and vomiting (throwing up)
- Constipation (trouble having a poo)
- Low white blood cell counts
- Low platelets
- Low red blood cell count
- Cancer-related fatigue (feeling of tiredness that will not go away with rest or sleep)
- Hair thinning
- Peripheral neuropathy (a numb or tingling feeling in your hands or feet)
- Decreased hearing and ringing in the ears

Not everyone gets these side effects. Read the section below to learn about each kind.

Talk to your oncologist (cancer doctor) or nurse if you have any questions. The phone numbers can be found on page 24.

Nausea and vomiting

Nausea is the feeling that you want to throw-up. Vomiting is throwing-up. Nausea and vomiting can happen before, during or after your treatment.

What you can do to manage nausea and vomiting:

Take your anti-nausea medicines to help prevent and control nausea. Take your anti-nausea medicines before you feel nausea. Do not wait until you start to throw-up to take your medicine. It is easier to prevent nausea and vomiting than it is to stop it once it starts.

- Take ondansetron hydrochloride (Zofran), and dexamethasone (Decadron) as prescribed (told by your doctor). See your treatment schedule on page 19 or page 26 or the instructions on the medicine bottle for more details.
- If you still feel like throwing-up, take prochlorperazine (Stemetil) as well. Follow your doctor's instructions on how to take it.

If you have diabetes, it is important to tell your family doctor that you are taking dexamethasone (Decadron). Decadron may cause your blood sugar to go up.

Here are other tips to help you manage nausea and vomiting:

- Eat small amounts of food during the day. For example, try to eat every 2 hours.
- Eat slowly.
- Avoid spicy or strong smelling foods.
- Make notes about how you are feeling and tell your doctor or nurse at your next visit.
- Keep track of when you feel sick or vomit. For example, what time of the day do you start to feel sick? Do certain foods make you feel sick or vomit? If the same things happen over and over, try to change the pattern.

- Try recipes that are made for people getting chemotherapy. You can find these recipes:
 - in a book called “Goes Down Easy” available in the Patient and Family Library. You can borrow or buy a copy.
 - on the ELLICSR kitchen website at www.ellicsrkitchen.ca

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if:



- Your anti-nausea medicine is not working.
- You cannot keep fluid down for more than 12 hours.

Your doctor or nurse will need to help you manage this.

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057. They are available
 - Weekdays: 5:00 pm to 8:30 am
 - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy.

Constipation

Constipation means it is hard to have a bowel movement (poo). You may have less bowel movements (poo) than is normal for you. Or you may have stool (poo) that is dry and hard to get out. This happens when your bowels (the part of your body that moves poo out) slows down or stops working.

Your chemotherapy, pain medicines or your anti-nausea medicine Zofran (ondansetron hydrochloride) can cause constipation.

What you can do to manage constipation:

If you do not have a bowel movement between Day 1 and the morning of Day 2, take senna (Senokot). Then, call your nurse. The phone number is listed on the next page, page 10.

- Drink 6 cups (or 1.5 litres) of fluid every day. Fluid is any liquid that does not have alcohol in it. It also includes fluids in the food you eat such as juices in fruit.
- Eat foods that have fibre such as:
 - raw veggies (such as leafy greens)
 - fruits (such as berries, apple with skin, grapes, oranges)
 - whole grain products (such as breads, cereals)
 - dried fruits, beans and lentils
 - prune juice

Important: People with ovarian cancer should not increase fibre in their diet if they have or are at risk of bowel obstruction. (See page 10 for symptoms of bowel obstruction).

- Stay active (for example, go for a walk)
- **Do NOT** use suppositories or enemas before asking your doctor. These medicines go in the rectum (bum) to help with constipation.

Note: if you have an ileostomy or colostomy DO NOT take senna (Senokot) unless your doctor has told you to.

Call your Gynecology Resource nurse at 416 946 2220 at extension 2 if you notice these signs:



- No bowel movement (poo) for 2 days
- Nausea (feeling like you will throw up)
- Vomiting (throwing up)
- Lower back pain
- A bloated (swollen) stomach
- Not passing gas

These may be a sign of blockage in your bowels (bowel obstruction). Your doctor or nurse will need to help you manage this.

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.
They are available
 - Weekdays: 5:00 pm to 8:30 am
 - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department.
Tell the staff there that you are getting chemotherapy treatment.

Low white blood cell count (WBC)

White blood cells help your body fight infection. When your white blood cell count is low, you are at risk of getting an infection. Your white blood cell count will start to drop 7 – 14 days after you get your chemotherapy.

What you can do to lower your risk of getting an infection:

- Wash your hands with soap and water often. You can also use hand sanitizer.
- Try to avoid going to crowded places, for example, malls, public transit and movie theatres.
- Keep your home and surfaces clean.
- Do not go near people who are sick.

What are signs of an infection?

If you have a fever, it may be a sign that you may have an infection. It is very important to get this treated right away.

Many women get hot flashes after gynecological cancer surgery. It may be hard to tell the difference between a fever and a hot flash. These steps help you know if you have a fever or if you are having a hot flash.

To check if you have a fever:

1. Take your temperature with a thermometer
2. Wait 1 hour.
3. Take your temperature again

If your temperature is over 38 °C (100.4 °F) both times, then you have a fever.

- Do not take any acetaminophen (Tylenol) as it may hide your fever.
- Do not take acetylsalicylic acid (Aspirin) or ibuprofen (Advil) because it can affect your blood unless your doctor approves.

You may be able to take these medicines after you have been seen by a doctor.

Note: Some pain medications contain acetaminophen (Tylenol) make sure you check your temperature first before taking it.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if you have any of these signs:



- Fever over 38 °C (100.4 °F)
- Chills and shaking or tremors
- Not able to drink or keep down 6 to 10 cups (1.5 litres to 2.5 litres) of fluid every day

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.
They are available
 - Weekdays: 5:00 pm to 8:30 am
 - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department.
Tell the staff there that you are getting chemotherapy treatment.

Low platelet count (PLT)

Platelets form clots to help you stop bleeding. For example, if you were to cut your finger, your blood would clot to protect the area. Low platelets put you at risk of bleeding

What you can do to lower your risk of bleeding:

- Use a soft tooth brush.
- Use an electric razor when shaving.
- Talk to your oncologist (cancer doctor), nurse or pharmacist **before** taking:
 - Acetylsalicylic acid (Aspirin) or Advil or Motrin (ibuprofen). These medicines can thin your blood and cause bleeding.
 - Any new medicines (including herbal or traditional medicine).

Your health care provider needs to check to see if they are blood thinners.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if you have any of these signs:



- Blood in your vomit
- Bleeding gums
- Nosebleed
- Blood in your urine (pink pee)
- Blood in your stool (dark, sticky or jelly-like poo)

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.
They are available
 - Weekdays: 5:00 pm to 8:30 am
 - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department.
Tell the staff there that you are getting chemotherapy treatment.

Low red blood cells (RBC)

Red blood cells carry oxygen through your body. When your red blood cells are low, you may have anemia. Anemia may make you feel very tired.

To help you feel less tired:

- Save your energy. For example, pace yourself and take naps.
- Eat foods high in iron (a mineral that helps make red blood cells) like meat and red beets.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if you have any of these signs:



- Dizzy or light-headed
- Short of breath
- Your heart is pounding rapidly (very fast)

If you have chest pain call 911.

Do not start taking iron pills unless our doctor tells you too.

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.
They are available
 - Weekdays: 5:00 pm to 8:30 am
 - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department.
Tell the staff there that you are getting chemotherapy treatment.

Cancer-related fatigue

Cancer-related fatigue is not the same as normal tiredness. It is a kind of tiredness or lack of energy that does not go away with rest or sleep. You may still feel tired after sleep or rest. This is the most common side effect of chemotherapy.

What you can do to manage cancer-related fatigue:

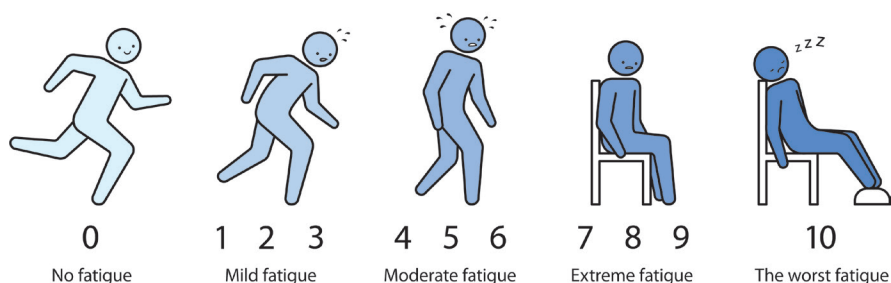
- Spread out the work you need to do over the day.
- Plan rest breaks.
- Do hard tasks when you have the most energy.
- Do light exercise to stay active (such as walking).
- Do not skip meals. Drink 6 to 10 cups (1.5L to 2.5L) of fluid every day. Fluid includes any liquid you drink that does not have alcohol in it. It also includes fluids in the food you eat such as juices in fruit.
- Do most of your sleeping at night. If you need to nap, take your nap before 3:00 pm.

Call your Gynecology Resource Nurse at 416 946 2220 ext. 2 if you have:

- Extreme or worst fatigue
- Look at the fatigue scale below to help you know your level of fatigue. Extreme fatigue is any amount between 7 to 10 on the scale.
- Trouble getting out of bed because of fatigue
- Trouble doing your normal tasks or work

Your oncologist (cancer doctor) or nurse will still need to help you manage this.

Fatigue Scale: Choose the number that best describes how you feel today



Hair thinning

With cisplatin chemotherapy there is no hair loss. There is hair thinning.

Decreased hearing and ringing in the ears

This type of chemotherapy may cause decreased hearing and ringing in the ears. You may hear a high-pitched ringing sound in your ear during treatment.

Call your Gynecology Resource nurse at 416 946 2220 ext. 2 if you have any of these signs:



- High pitched ringing in your ears
- Decreased hearing

This is not an emergency. But, your doctor or nurse will still need to help you manage this. For example, if you have hearing loss, your doctor will book you in for a hearing test.

If this happens at night, on a weekend or on a holiday:

- Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057. They are available
 - Weekdays: 5:00 pm to 8:30 am
 - Weekends and holidays: available 24 hours

Your treatment schedule



Check your appointment schedules for exact times and locations:

Pick up the printed list with the exact times and dates for your appointments at the Gynecology Department.



Pick up your medicine from the pharmacy:

If you use the Princess Margaret Outpatient Pharmacy, you must pick up the prescription below, at least 3 days before your 1st treatment appointment.

- ondansetron hydrochloride (Zofran)
- dexamethasone (Decadron)
- senna (Senekot)
- prochlorperazine (Stemetil)

If you choose to use your local pharmacy, check to see that they received the prescription from your doctor. If they did not, call your doctor's office and tell the administrator.



Go to your doctor's appointments:

This week you will have an appointment with your oncologist (cancer doctor).



Get a blood test:

Do this at least 1.5 hours before your oncologist appointment.

Week 1



Check your appointment schedules for exact times and locations:

Refer to this list for the exact times and dates for your appointments.



Take your nausea medicine:

If you still feel nauseous after taking ondansetron hydrochloride (Zofran), and dexamethasone (Decadron), take prochlorperazine (Stemetil) every 6 hours, as needed.



Take your constipation medicine:

If you do not have a bowel movement between Day 1 and the morning of Day 2, take senna (Senokot). Then, see the instructions on page 10 to know who to call right away.

Day 1 (1st day of chemotherapy)

1. Bring your ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) to your chemotherapy appointment. The nurse will let you know when to take it during the appointment.
2. Go to your chemotherapy appointment. The appointment will last for 3 hours. You will get cisplatin chemotherapy through a vein in your arm.
3. Take senna (Senokot) at night, if you are constipated.

Day 2

1. Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) **with breakfast**.
2. Take dexamethasone (Decadron) **with dinner before 6:00 pm**. If you take the medicine later than this you may find it hard to fall asleep.
3. Take senna (Senokot) at night, if you are constipated.

Day 3

1. Take dexamethasone (Decadron) **with breakfast.**
2. Take Decadron (dexamethasone) **with dinner before 6:00 pm.** If you take the medicine later than this you may find it hard to fall asleep.
3. Take senna (Senokot) at night, if you are constipated.

Weeks 2 and 3



Check your appointment schedules for exact times and locations:

Refer to this list for the exact times and dates for your appointments.



Take your nausea medicine:

If you still feel like throwing up take prochlorperazine (Stemetil) every 6 hours, as needed.

Who to contact if you have questions

Questions about appointment date and times

Gynecology Oncology Reception
416 946 2220, Press 1.

Questions about treatment and side effects

All treatment and care (weekdays from 9:00 am to 4:00 pm)
Gynecology Oncology Resource Nurse
Phone: 416 946 2220
Press 2, then leave a message

All treatment and care (weekends and holidays)
Afterhours Carepath Cancer Nurse
Phone: 1 877 681 3057
Weekdays: 5:00 pm to 8:30 am
Weekends and holidays: available 24 hours

Questions about medicine

How to take your medicine
Pharmacy Triage Line
Phone: 416 946 4501 ext. 3345
A pharmacist will return your call within 72 hours

How to pick up your medicine prescriptions

(Monday to Friday 9:00 am to 5:30 pm)
Princess Margaret Outpatient Pharmacy
Phone: 416 946 6593

The week of chemotherapy



Check your appointment schedules for exact times and locations:

Pick up the printed list with the exact times and dates for your appointments at the Gynecology Department.



Pick up your medicine from the pharmacy:

Remember to call your pharmacy to check that they received your prescription. If they did not, call your doctor's office and tell the administrator. If you use the Princess Margaret Outpatient Pharmacy, you must pick up the prescription at least 3 days before your first treatment. The Princess Margaret Outpatient Pharmacy is located on the main floor.



Go to your doctor's appointment:

This week you will have an appointment with your oncologist (cancer doctor).



Get a blood test:

Do this at least 1.5 hours before your oncologist appointment.

Week 1 chemotherapy schedule

Start date (Day 1): _____

Note: If you have an ileostomy/colostomy do NOT take senna (Senokot) unless your doctor has told you to

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
During the day	Bring ondansetron (Zofran) and dexamethasone (Decadron) with you to your appointment	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) with breakfast	Take dexamethasone (Decadron) with breakfast				
	Go to chemotherapy appointment (3 hours)						
In the evening		Take dexamethasone (Decadron) with dinner before 6:00 pm	Take dexamethasone (Decadron) with dinner before 6:00 pm				
	Take senna (Senokot [†]) at night, if constipated	Take senna (Senokot) at night, if constipated	Take senna (Senokot) at night, if constipated				



Check your appointment schedules for exact times and locations: Refer to this list for the dates and times of your appointments.



Take your nausea medicine: If you still feel nauseous after taking ondansetron hydrochloride (Zofran) and dexamethasone (Decadron), take prochlorperazine (Stemetil) every 6 hours as well.



***Take your constipation medicine:** If you do not have a bowel movement between Day 1 and the morning of Day 2, take senna (Senokot). Then, see the instructions on page 10 to know who to call right away.

Weeks 2 and 3 chemotherapy schedule

Start date (Day 8): _____

Note: If you have an ileostomy/colostomy do NOT take senna (Senokot) unless your doctor has told you to



Check your appointment schedules for exact times and locations:

Refer to this list for the exact times and dates for your appointments.



Take your nausea medicine:

If you are feeling nauseous, take prochlorperazine (Stemetil) every 6 hours, as needed.



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