

Your Intravenous (IV) Carboplatin and Paclitaxel Chemotherapy Schedule

For people who have a gynecologic cancer

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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 Carboplatin and Paclitaxel chemotherapy

What is Carboplatin and Paclitaxel chemotherapy?

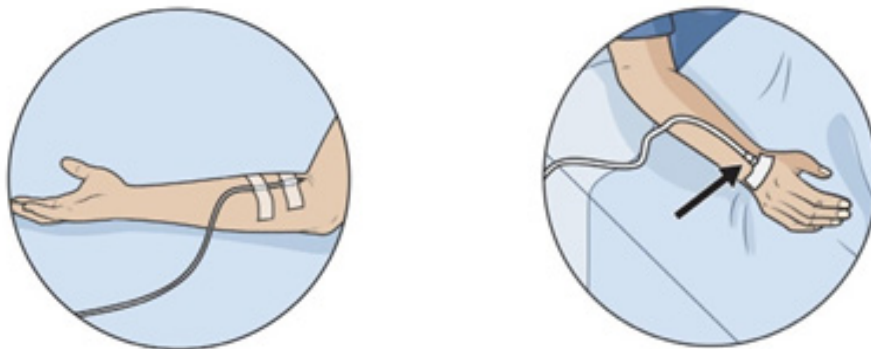
Chemotherapy is a cancer treatment that uses medicine to kill cancer cells. You will be getting 2 chemotherapy medicines called carboplatin and paclitaxel.

How long will my chemotherapy treatment last?

One cycle of carboplatin and paclitaxel 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 chemotherapy medicine. This will take about 6 hours.



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 to have so many blood tests?

Chemotherapy affects your whole body. Blood tests are used to:

- Decide whether it is safe to give you chemotherapy
- See if your medicines need to be adjusted or changed

The 3 most common blood tests are:

- Complete Blood Count (CBC). This test shows the number of red blood cells (cells that carry oxygen in your body), 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 at your appointments. Read pages 12, 13, 14 and 15.

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 in the main lobby of Princess Margaret.

For chemotherapy treatment:

Go to Chemotherapy and Transfusion Centre located on the 4th floor of Princess Margaret

To pick up medicine:

The Princess Margaret Outpatient Pharmacy is located on the main floor.

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

If you use a pharmacy near you, give them your prescription as early as possible to ensure they have cancer-related medicines in stock.

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 (OHIP).
- Your appointment schedule (This is on a white sheet of paper).
- Private insurance information (if you have any).
- Money for parking and food.
- Any medicine you need to take during the day.
- 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 for support or company can sit with you in the treatment area. If you have more than one person, they can wait in the waiting room.

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 of having to throw-up) and vomiting (throwing-up)
- Constipation (trouble having a poo)
- Low white blood cells in your blood
- Low platelets in your blood
- Low red blood cell count
- Cancer-related fatigue (feeling of tiredness that will not go away with rest or sleep)
- Hair loss
- Joint pain
- Peripheral neuropathy (a numb or tingling feeling in your fingers and toes)

Not everyone gets these side effects. Read the information below to learn about each side effect and what you can do to manage them. Talk to your oncologist (cancer doctor) or nurse if you have any questions. The phone numbers can be found on page 23.

Important: Rare (not common) reactions

During your chemotherapy your nurse will ask you to let them know if you start to experience any of the symptoms below:

- Shortness of breath
- Sudden back pain
- Chest pain or pressure (heaviness)

After receiving chemotherapy, some patients may develop a rash (red itchy spots) anywhere on their body.

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



- If you are at home and develop a rash (red itchy spots) on your body

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.

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 possibly aprepitant (Emend) as prescribed (told by your doctor). See your treatment schedule on page 20 or page 24 or the instructions on the medicine bottle for more details.
- If you still feel like throwing-up, take teva-olanzapine (Olanzapine) 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 will be getting dexamethasone (Decadron) on the day of your treatment which may cause your blood sugar to go up.

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 medications or your anti-nausea medicine ondansetron hydrochloride (Zofran) 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 page 11.

- Drink 6 cups (or 1.5 litres) of fluid every day (unless restricted by your doctor). 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.
- Stay active. Walking is best.
- Your doctor will tell you if you should add fibre to your diet. Foods that have fibre are:
 - 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 11 for symptoms of bowel obstruction).

- **Do NOT** use suppositories or enemas before asking your doctor.

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

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



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

This 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 and tell the staff there that you are getting chemotherapy.

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 to 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 the early 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 people 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 make sure if you have a fever or if you have a hot flash.

To check if you have a fever:

1. Take your temperature.
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:



- Fever over 38 °C (100.4 °F)
- Chills and shaking
- Not able to keep fluids down for more than 12 hours

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

1. Call the Afterhours Carepath Cancer nurse at 1 877 681 3057.
Ask for the nursing supervisor. They are available:
 - Weekdays: 5:00pm to 8:30am
 - 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.

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 toothbrush.
- Use an electric razor when shaving.
- Talk to your oncologist (cancer doctor), nurse or pharmacist **before** taking:
 - Acetylsalicylic acid (Aspirin) or ibuprofen (Advil or Motrin).
 - 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:



- 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. Ask for the nursing supervisor. 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.

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.

What you can do to 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 feel



- Dizzy or light-headed
- Shortness of breath
- Your heart is pounding very fast
- **If you have chest pain call 911**

Do not start taking iron pills unless your doctor tells you to.

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

1. Call the Afterhours Carepath Cancer nurse at 1 877 681 3057.
Ask for the nursing supervisor. 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.

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 cups or 1.5 litres (unless restricted by your doctor) 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.

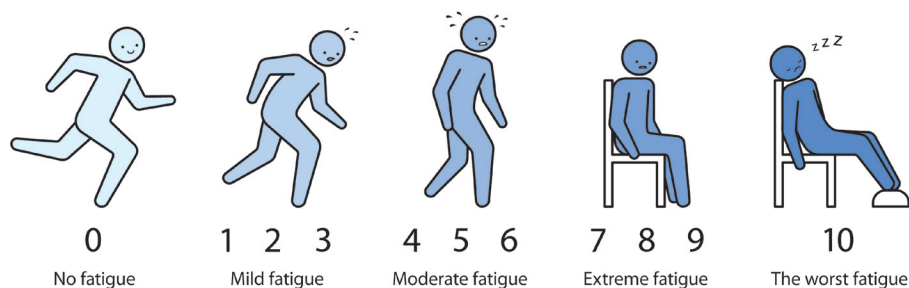
- Do most of your sleeping at night. If you need to nap, take your nap before 3:00 pm.

Call your Gynecology Resource Nurse at 416 946 2220 extension # 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 Loss

Most people who get paclitaxel will lose their hair. You may start losing your hair 2 to 3 weeks after you start chemotherapy.

Hair loss can happen anywhere on your body. This includes eyebrows, facial hair and pubic hair (hair on your genitals).

Your hair will grow back. This often happens 2 to 3 weeks after your chemotherapy ends.

What you can do to cope with hair loss:

- Cut your hair shorter at the start of chemotherapy. Do not shave your head. You may end up with cuts and scratches. This makes it easier for germs to get into your body.
- Use a mild shampoo and sun protection. This will protect your scalp.
- Wear scarves or hats.
- Attend the “Look Good Feel Better” class. This class is led by cosmeticians and wig specialists.
- Learn how to manage side effects of treatment that may change your appearance. Visit the Princess Margaret class calendar at www.theprincessmargaret.ca/en/calendar.
- Visit the Princess Margaret wig/scarf salon on the 3rd floor. Wigs and scarves may be covered by private insurance. Ask your oncologist (cancer doctor) to provide a prescription.

Pick up the Wig Salon brochure at the Patient and Family Library (main floor lobby, Princess Margaret Cancer Centre).

Joint pain

You may have joint pain during chemotherapy. Some examples of joints are knuckles and knees. The pain will feel like arthritis.

You may start feeling this 1 to 3 days after your chemotherapy appointment. Tell your doctor if you notice this symptom.

What you can do to manage joint pain:

On days 1 to 6 of your chemotherapy schedule:

If you feel pain, take acetaminophen (Tylenol). Take it every 4 to 6 hours, as needed.

On days 7 to 14 of your chemotherapy schedule:

- Follow the instructions on page 12 to check your temperature before you take acetaminophen (Tylenol).
- If you do not have a fever, you can take the acetaminophen (Tylenol).
- Do not skip this step before taking acetaminophen (Tylenol) as the medicine will cover up a possible fever, which can be a sign of infection.

Peripheral neuropathy (a numb or tingling feeling in your hands or feet)

Peripheral neuropathy is numbness and tingling in your fingers and toes. Some people may feel unsteady on their feet. They may also have trouble picking up items with their fingers.

Peripheral neuropathy can make it harder to notice hot surfaces (like stove tops), and you may be more likely to get burned.

What you can do to prevent burns:

- Check the temperature of anything you touch with your elbow.
- Check the water temperature before you shower, bathe or wash your hands.

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 first treatment appointment.

- Ondansetron hydrochloride (Zofran)
- Aprepitant (Emend), if prescribed
- Senna (Senokot)
- Teva-olanzapine (Olanzapine)

If you choose to use your local pharmacy, go as early as possible to make sure they have the cancer-related medicines in stock.



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 hour 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 aprepitant (Emend if prescribed), take teva-olanzapine (Olanzapine) every 12 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 11 to know who to call right away.

Day 1 (1st day of chemotherapy)

1. Bring your ondansetron hydrochloride (Zofran) and aprepitant (Emend if prescribed) 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 6 hours. You will get two chemotherapy medicines called carboplatin and paclitaxel through a vein in your arm.
3. Take senna (Senokot) at night if constipated.

Day 2

1. If prescribed take ondansetron hydrochloride (Zofran) in the morning.
2. If prescribed take aprepitant (Emend) in the morning.
3. Take senna (Senokot) at night, if constipated.

Day 3

1. If prescribed take ondansetron hydrochloride (Zofran) in the morning
2. If prescribed take aprepitant (Emend) in the morning.
3. Take senna (Senokot) at night, if 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 are feeling nauseous, take teva-olanzapine (Olanzapine) every 12 hours, as needed.

Who to contact if you have questions

Questions about appointment dates and times

Gynecology Oncology Reception

Phone: 416 946 2220, Press 1.

Questions about treatment and side effects

Weekdays from 9:00 am to 4:00 pm

Gynecology Oncology Nursing

Phone: 416 946 2220

Press 2, then leave a message

After hours, 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

Pharmacy Triage Line

Phone: 416 946 4501 extension 3345

A pharmacist will return your call within 72 hours

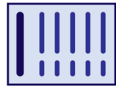
How to pick up your medicine prescriptions

(Monday to Friday 9:00 am to 5:30 pm)

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 Oncology Clinic Reception.



Pick up your medicine from the pharmacy:

You can use the Princess Margaret Outpatient Pharmacy or a pharmacy near you. Go at least 3 days before your 1st treatment appointment. If you choose to use your local pharmacy, go as early as possible. They may not have cancer-related medicines in stock.



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		If prescribed: Take ondansetron hydrochloride (Zofran) If prescribed: Take aprepitant (Emend)	If prescribed: Take ondansetron hydrochloride (Zofran) If prescribed: Take aprepitant (Emend)				
	Bring ondansetron hydrochloride (Zofran) and aprepitant (Emend if prescribed) to your chemotherapy appointment						
	Go to chemotherapy appointment (6 hours)						
	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) or aprepitant (Emend), take teva-olanzapine (Olanzapine) every 12 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 11 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 teva-olanzapine (Olanzapine) every 12 hours, as needed.

The development of patient education resources is supported by the Princess Margaret Cancer Foundation.



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Visit www.uhnpatienteducation.ca for more health information. Contact pfep@uhn.ca to request this brochure in a different format, such as large print or electronic formats.

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