

## Docetaxel (Taxotere)

[Read more about our content writing process](#)

**Pronounced:** DOE-se-TAX-el

**Classification:** Antineoplastic Agent

### About Docetaxel (Taxotere)

Docetaxel works by disrupting the microtubular network in cells, which is essential for cell division and other normal cellular functions. Docetaxel interferes with the function of microtubules, resulting in inactive microtubule bundles, causing cells to die.

### How to Take Docetaxel

Docetaxel is given by intravenous (IV, into a vein) infusion, usually over an hour. The dosage and schedule are determined by the person's size and type of cancer. It can be given alone or with other drugs. You will be given a corticosteroid prior to the infusion to prevent severe fluid retention and allergic reactions. The steroid is given in pill form or by IV, which will be determined by your healthcare provider.

This medication contains alcohol and may cause intoxication. You should not drive after the infusion until you know how it will affect you.

Grapefruit can change how your body absorbs this medication. Do not eat grapefruit or drink grapefruit juice during the 2 days before, the day of, and two days after each dose.

This medication can cause severe side effects if given to a patient whose liver function is abnormal. Your labs will be closely monitored prior to each dose of docetaxel and the dose may be decreased or held if your liver function is not normal.

Even when carefully and correctly administered by trained personnel, this drug may cause a feeling of burning and pain. There is a risk that this medication may leak out of the vein at the injection site, resulting in tissue damage that can be severe. If the area of injection becomes red, swollen, or painful at any time during or after the injection, notify your care team immediately. Do not apply anything to the site unless instructed by your care team.

### Possible Side Effects of Docetaxel

There are a number of things you can do to manage the side effects of docetaxel. Talk to your care team about these recommendations. They can help you decide what will work best for you. These are some of the most common or important side effects:

#### Allergic Reactions

Allergic reactions are possible with this medication. Signs of a reaction can include: shortness of breath or difficulty breathing, swelling of the face, lips, tongue or throat, trouble swallowing, chest pain, rash, flushing, hives or itching or a decrease in blood pressure. If you notice any changes in how you feel during the infusion, let your nurse know immediately. The infusion will be slowed or stopped if this occurs.

#### Fluid Retention

Docetaxel can cause your body to hold too much fluid, which can be a serious side effect. Medications will be given before each treatment to decrease the risk of this side effect. Call your healthcare provider if you do not urinate for more than 12 hours, experience shortness of breath, have an unexpected weight gain or develop swelling in your hands, feet, ankles or legs.

## Low White Blood Cell Count (Leukopenia or Neutropenia)

White blood cells (WBC) are important for fighting infection. While receiving treatment, your [WBC count can drop](#), putting you at a higher risk of getting an infection. You should let your doctor or nurse know right away if you have a fever (temperature greater than 100.4° F /38° C), sore throat or cold, shortness of breath, cough, burning with urination, or a sore that doesn't heal.

### Tips to preventing infection:

- [Washing hands](#), both yours and your visitors, is the best way to prevent the spread of infection.
- Avoid large crowds and people who are sick (i.e.: those who have a cold, fever or cough or live with someone with these symptoms).
- When working in your yard, wear protective clothing including long pants and gloves.
- Do not handle pet waste.
- Keep all cuts or scratches clean.
- Shower or bath daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.
- Ask your oncology care team before scheduling dental appointments or procedures.
- Ask your oncology care team before you, or someone you live with has any vaccinations.

## Low Red Blood Cell Count (Anemia)

Your red blood cells are responsible for carrying oxygen to the tissues in your body. When the [red cell count is low](#), you may feel tired or weak. You should let your doctor or nurse know if you experience any shortness of breath, difficulty breathing, or pain in your chest. If the count gets too low, you may receive a blood transfusion.

## Low Platelet Count (Thrombocytopenia)

Platelets help your blood clot, so when the [count is low](#) you are at a higher risk of bleeding. Let your oncology care team know if you have any excess bruising or bleeding, including nose bleeds, bleeding gums or blood in your urine or stool. If the platelet count becomes too low, you may receive a transfusion of platelets.

- Do not use a razor (an electric razor is fine).
- Avoid contact sports and activities that can result in injury or bleeding.
- Do not take aspirin (salicylic acid), non-steroidal, anti-inflammatory medications (NSAIDs) such as Motrin/Advil (ibuprofen), Aleve (naproxen), Celebrex (celecoxib), etc. as these can all increase the risk of bleeding. Please consult with your healthcare team regarding the use of these agents and all over the counter medications/supplements while on therapy.
- Do not floss or use toothpicks and use a soft-bristle toothbrush to brush your teeth.

## Loss or Thinning of Scalp and Body Hair (Alopecia)

Your hair may become [thin, brittle, or may fall out](#). This typically begins two to three weeks after treatment starts. This hair loss can be all body hair, including pubic, underarm, legs/arms, eyelashes, and nose hairs. The use of scarves, wigs, hats, and hairpieces may help. Hair generally starts to regrow soon after treatment is completed. Remember your hair helps keep you warm in cold weather, so a hat is particularly important in cold weather or to protect you from the sun.

## Fatigue

[Fatigue](#) is very common during cancer treatment and is an overwhelming feeling of exhaustion that is not usually relieved by rest. While on cancer treatment, and for a period after, you may need to adjust your schedule to manage fatigue. Plan times to rest during the day and conserve energy for more important activities. Exercise can help combat fatigue; a simple daily walk with a friend can help. Talk to your healthcare team for helpful tips on dealing with this side effect.

## Peripheral Neuropathy (Numbness or Tingling in the Hands and/or Feet)

[Peripheral neuropathy](#) is a toxicity that affects the nerves. It causes numbness or a tingling feeling in the hands and/or feet, often in the pattern of a stocking or glove. This can get progressively worse with additional doses of the medication. In some people, the symptoms slowly resolve after the medication is stopped, but for some, it never goes away completely. You should let the oncology care team know if you experience numbness or tingling in the hands and/or feet, as they may need to adjust

the doses of your medication.

## Nail and Skin Changes

Your fingernails/toenails may become dark, brittle or fall off. You may notice dry skin or changes in the color or tone of your skin. Your skin will be more sensitive to the sun, which can result in severe sunburn or rash. Sun sensitivity can last even after chemotherapy is completed. Avoid the sun between 10-2 pm, when it is strongest. Wear sunscreen (at least SPF 15) every day, wear sunglasses and long sleeves/pants to protect your skin. Keep your fingernails and toenails clean and dry. You may use nail polish, but do not wear fake nails. If any nails fall off, clean the nail bed well with soap and water and cover with a Band-Aid.

## Mouth Ulcers (Mucositis)

Certain cancer treatments can cause [sores or soreness in your mouth](#) and/or throat. Notify your oncology care team if your mouth, tongue, inside of your cheek or throat becomes white, ulcerated, or painful. Performing [regular mouth care](#) can help prevent or manage mouth sores. If mouth sores become painful, your doctor or nurse can recommend a pain reliever.

- Brush with a soft-bristle toothbrush or cotton swab twice a day.
- Avoid mouthwashes that contain alcohol. A baking soda and/or salt with warm water mouth rinse (2 level teaspoons of baking soda or 1 level teaspoon of salt in an eight ounce glass of warm water) is recommended 4 times daily.
- If your mouth becomes dry, eat moist foods, drink plenty of fluids (6-8 glasses), and suck on sugarless hard candy.
- Avoid smoking and chewing tobacco, drinking alcoholic beverages, and citrus juices.

## Diarrhea

Your oncology care team can recommend medications to relieve [diarrhea](#). Also, try eating [low-fiber](#), bland foods, such as white rice and boiled or baked chicken. Avoid raw fruits, vegetables, whole grain bread, cereals, and seeds. Soluble fiber is found in some foods and absorbs fluid, which can help relieve diarrhea. Foods high in soluble fiber include: applesauce, bananas (ripe), canned fruit, orange sections, boiled potatoes, white rice, products made with white flour, oatmeal, cream of rice, cream of wheat, and farina. Drink 8-10 glasses of non-alcoholic, un-caffeinated fluid a day to prevent dehydration.

## Nausea and/or Vomiting

Talk to your oncology care team so they can prescribe medications to help you manage [nausea and vomiting](#). In addition, dietary changes may help. Avoid things that may worsen the symptoms, such as heavy or greasy/fatty, spicy or acidic foods (lemons, tomatoes, oranges). Try saltines, or ginger ale to lessen symptoms.

Call your oncology care team if you are unable to keep fluids down for more than 12 hours or if you feel lightheaded or dizzy at any time.

## Constipation

There are several things you can do to prevent or relieve constipation. Include fiber in your diet (fruits and vegetables), drink 8-10 glasses of non-alcoholic fluids a day, and keep active. A stool softener once or twice a day may prevent constipation. If you do not have a bowel movement for 2-3 days, you should contact your healthcare team for [suggestions to relieve constipation](#).

## Decrease in Appetite or Taste Changes

[Nutrition](#) is an important part of your care. Cancer treatment can affect your appetite and, in some cases, the side effects of treatment can make eating difficult. Ask your oncology care team about nutritional counseling services at your treatment center to help with food choices.

- Try to eat five or six small meals or snacks throughout the day, instead of 3 larger meals.
- If you are not eating enough, nutritional supplements may help.
- You may experience a metallic taste or find that food has no taste at all. You may dislike foods or beverages that you liked before receiving cancer treatment. These symptoms can last for several months or longer after treatment ends.
- Avoid any food that you think smells or tastes bad. If red meat is a problem, eat chicken, turkey, eggs, dairy products, and fish without a strong smell. Sometimes cold food has less of an odor.
- Add extra flavor to meat or fish by marinating it in sweet juices, sweet and sour sauce, or dressings. Use seasonings like

basil, oregano, or rosemary to add flavor. Bacon, ham, and onion can add flavor to vegetables.

## Muscle or Joint Pain/Aches

Your healthcare provider can recommend medications and other strategies to help relieve pain.

### Less common, but important side effects can include:

- **Radiation Recall:** Radiation recall is when the administration of a medication causes a skin reaction that looks like a sunburn (redness, swelling, soreness, peeling skin) in areas where radiation was previously given. Notify your oncology team if you notice this side effect. Treatment can include topical steroid ointments and a delay in your next chemotherapy dose.
- **Vision Problems:** Docetaxel can cause eye problems that cause blurred vision or loss of vision. Report any vision changes to your healthcare team immediately.
- **Secondary Cancers:** A secondary cancer is one that develops as a result of cancer treatment for another cancer. This is quite rare, but you should be aware of the risk. In most cases, a secondary cancer related to chemotherapy is a blood cancer (leukemia, lymphoma, myelodysplastic syndrome, renal cancer). This can occur years after treatment. This is most often associated with repeated treatments or high doses. Your provider will monitor your labs closely. Consider having a complete blood count with differential checked annually by your healthcare provider if you received high risk therapies.
- **Skin Reactions:** This medication can cause a skin reaction that progresses from redness with swelling to peeling skin. Be sure to inform your provider of any skin changes you develop as skin reactions can become serious.
- **Neurologic Reactions:** This medication can cause abnormal burning or prickling sensations (paresthesia), abnormal sense of touch (dysesthesia), and pain. If you are having any of these symptoms, contact your care team.
- **Neutropenic enterocolitis/Typhlitis/Colitis:** Docetaxel can cause bowel problems that can be very serious. Notify your care team immediately if you experience stomach pain with or without a fever, tenderness in your stomach, or diarrhea.
- **Tumor Lysis Syndrome:** If there are a large number of tumor cells in your body prior to treatment, you are at risk for tumor lysis syndrome. This happens when the tumor cells die too quickly and their waste overwhelms the body. You may be given medication (allopurinol) and IV fluids to help prevent this. If you experience nausea, vomiting, diarrhea, or become lethargic (drowsy, sluggish), notify your oncology team right away. TLS can affect your kidney function. Your provider will monitor your kidney function with blood work. Notify your provider if you have little or no urine output.

## Reproductive Concerns

Exposure of an unborn child to this medication could cause birth defects, so you should not become pregnant or father a child while on this medication. Effective birth control is necessary during treatment and for 6 months after treatment for women. Men who are treated with this medication should use effective birth control during and for 3 months after the last dose. Even if your menstrual cycle stops or you believe you are not producing sperm, you could still be fertile and conceive. You should not breastfeed while receiving this medication or for 1 week after your last dose.

# Carboplatin (Paraplatin®)

[Read more about our content writing process](#)

**Pronounced:** car-boe-PLATT-in

**Classification:** Platinum Chemotherapies

## About Carboplatin (Paraplatin®)

Carboplatin is a heavy metal compound that inhibits synthesis of RNA, DNA, and protein in cells. All of these compounds are vital for cells to divide and grow. By preventing them from dividing, the medication can stop the cancer from growing.

## How to Take Carboplatin

Carboplatin is given by intravenous (IV, into a vein) injection. The schedule and dosage are based on the person's size, kidney function, and the cancer type being treated. It can be given alone, or with other drugs.

Even when carefully and correctly administered by trained personnel, this drug may cause a feeling of burning and pain. There is a risk that this medication may leak out of the vein at the injection site, resulting in tissue damage that can be severe. If the area of injection becomes red, swollen, or painful at anytime during or after the injection, notify your care team immediately. Do not apply anything to the site unless instructed by your care team.

Carboplatin can interact with certain medications including some antibiotics, diuretics and blood thinners. Be sure to tell your healthcare provider about all medications and supplements you take.

## Possible Side Effects

There are a number of things you can do to manage the side effects of carboplatin. Talk to your care team about these recommendations. They can help you decide what will work best for you. These are some of the most common or important side effects:

### Low White Blood Cell Count (Leukopenia or Neutropenia)

White blood cells (WBC) are important for fighting infection. While receiving treatment, your [WBC count can drop](#), putting you at a higher risk of getting an infection. You should let your doctor or nurse know right away if you have a fever (temperature greater than 100.4° F or 38° C), sore throat or cold, shortness of breath, cough, burning with urination, or a sore that doesn't heal.

Tips to preventing infection:

- [Washing hands](#), both yours and your visitors, is the best way to prevent the spread of infection.
- Avoid large crowds and people who are sick (i.e.: those who have a cold, fever or cough or live with someone with these symptoms).
- When working in your yard, wear protective clothing including long pants and gloves.
- Do not handle pet waste.
- Keep all cuts or scratches clean.
- Shower or bath daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.
- Ask your oncology care team before scheduling dental appointments or procedures.
- Ask your oncology care team before you, or someone you live with has any vaccinations.

### Low Red Blood Cell Count (Anemia)

Your red blood cells are responsible for carrying oxygen to the tissues in your body. When the [red cell count is low](#), you may feel tired or weak. You should let your oncology care team know if you experience any shortness of breath, difficulty breathing, or pain in your chest. If the count gets too low, you may receive a blood transfusion.

### Low Platelet Count (Thrombocytopenia)

Platelets help your blood clot, so when the [count is low](#) you are at a higher risk of bleeding. Let your oncology care team know if you have any excess bruising or bleeding, including nose bleeds, bleeding gums, or blood in your urine or stool. If the platelet count becomes too low, you may receive a transfusion of platelets.

- Do not use a razor (an electric razor is fine).
- Avoid contact sports and activities that can result in injury or bleeding.
- Do not take aspirin (salicylic acid), non-steroidal, anti-inflammatory medications (NSAIDs) such as Motrin/Advil (ibuprofen), Aleve (naproxen), Celebrex (celecoxib) etc. as these can all increase the risk of bleeding. Please consult with your healthcare team regarding use of these agents and all over the counter medications/supplements while on therapy.
- Do not floss or use toothpicks and use a soft-bristle toothbrush to brush your teeth.

### Nausea and/or Vomiting

Talk to your oncology care team so they can prescribe medications to help you manage [nausea and vomiting](#). In addition, dietary changes may help. Avoid things that may worsen the symptoms, such as heavy or greasy/fatty, spicy or acidic foods (lemons, tomatoes, oranges). Try saltines, or ginger ale to lessen symptoms.

Call your oncology care team if you are unable to keep fluids down for more than 12 hours or if you feel lightheaded or dizzy at any time.

## Electrolyte Changes

This medication can affect the normal levels of electrolytes (sodium, potassium, magnesium, calcium, etc.) in your body. Your levels will be monitored using blood tests. If your levels become too low, your care team may prescribe specific electrolytes to be given by IV or taken by mouth. Do not take any supplements without first consulting with your care team.

## Liver Toxicity

This medication can cause liver toxicity, which you will be monitored for using blood tests called liver function tests. If you develop elevations in your liver function tests, your healthcare provider may need to lower your dose or stop the medication. Notify your healthcare provider if you notice yellowing of the skin or eyes, your urine appears dark or brown or pain in your abdomen, as these can be signs of liver toxicity.

## Kidney Problems

Carboplatin can impact your kidney function. Your healthcare team will monitor your kidney function throughout treatment. Try to drink at least 6-8 glasses of uncaffeinated fluids a day. Call your doctor or nurse if you do not urinate for more than 12 hours.

## Live Vaccines

You, or anyone you live with, should avoid having live or live-attenuated vaccines while receiving this medication. These include herpes zoster (Zostavax) for shingles prevention, oral polio, measles, nasal flu vaccine (FluMist®), rotovirus and yellow fever vaccines.

## Less common, but important side effects can include:

- **Peripheral Neuropathy (Numbness or Tingling in the Hands and/or Feet):** [Peripheral neuropathy](#) is a toxicity that affects the nerves. It causes numbness or a tingling feeling in the hands and/or feet, often in the pattern of a stocking or glove. This can get progressively worse with additional doses of the medication. In some people, the symptoms slowly resolve after the medication is stopped, but for some it never goes away completely. You should let the oncology care team know if you experience numbness or tingling in the hands and/or feet, as they may need to adjust the doses of your medication.
- **Allergic Reactions:** In some cases, patients can have an allergic reaction to this medication. Signs of a reaction can include: rash, itching, hives, flushing, and/or shortness of breath or difficulty breathing. If you notice any changes in how you feel during the infusion, let your nurse know immediately. The infusion will be slowed or stopped if this occurs. Depending on the severity of your reaction, you may still be able to receive the medication with a pre-medication to prevent a reaction, or if the medication is given at a slower rate.
- **Vision/Hearing Changes:** In rare cases, this medication can cause changes to hearing and vision. Contact your care team if you notice ringing in your ears, decrease in hearing, or changes in your vision.

## Reproductive Concerns

Exposure of an unborn child to this medication could cause birth defects, so you should not become pregnant or father a child while on this medication. Effective birth control is necessary during treatment. Even if your menstrual cycle stops or you believe you are not producing sperm, you could still be fertile and conceive. You should not breastfeed while receiving this medication.

## Cetuximab (Erbix®)

[Read more about our content writing process](#)

**Pronounced:** se-TUX-i-mab

**Classification:** Monoclonal Antibody

## About Cetuximab (Erbix®)

Monoclonal antibodies are created in a lab to attach to the targets found on specific types of cancer cells. The antibody “calls”

the immune system to attack the cell it is attached to, resulting in the immune system killing the cell. These antibodies can work in different ways, including stimulating the immune system to kill the cell, blocking cell growth or other functions necessary for cell growth.

Cetuximab is a man-made version of a naturally occurring human/mouse antibody that inhibits the epidermal growth factor receptor (EGFR). The EGFR is a protein that is abnormally over-expressed in many cancers, and the inhibition of EGFR results in a decrease in tumor cell growth and decreased production of other factors responsible for metastasis (spreading of cancer). This medication treats both head and neck and colorectal cancer. The colorectal cancer needs to test positive for the k-ras wild type. Your cancer cells will be tested for this mutation.

## How to Take Cetuximab

Cetuximab is given through intravenous (IV, into a vein) infusion. The dose is based on your size and how often you receive the medication depends on which disease you are being treated for and what other treatments you are receiving. Before your first dose, you will be given a pre-medication such as diphenhydramine (Benadryl) to prevent an infusion reaction. Whether or not you receive pre-medications before subsequent doses will be at the discretion of your care team. Your dose may be changed if you have a reaction to the medication.

## Possible Side Effects

There are a number of things you can do to manage the side effects of cetuximab. Talk to your care team about these recommendations. They can help you decide what will work best for you. These are some of the most common or important side effects:

### Infusion Reaction

Some patients will develop a reaction to the medication. This most commonly occurs with the first dose. Reactions can cause chills, fever, shortness of breath, difficulty breathing, hoarseness, itching, or low blood pressure. Tell your nurse right away if you experience any of these. You will be given medication prior to the infusion to help prevent this reaction. You will be monitored for at least 1 hour after the completion of your infusion.

### Heart Problems

Cetuximab can cause heart problems including cardiac arrest and heart attack. Patients with a prior history of coronary artery disease and/or receiving radiation therapy are at highest risk. Notify your healthcare team or go to the emergency room immediately if you experience chest pain, shortness of breath, or feel dizzy or faint.

### Electrolyte Abnormalities

This medication can impact the electrolyte levels in your blood; including magnesium, calcium, and potassium. This can even occur after the completion of treatment. Your healthcare team will monitor your electrolyte levels during treatment, and for at least 8 weeks following the completion of treatment.

### Nail and Skin Changes

Cetuximab has some unique nail and skin side effects that you may develop. Patients may develop a rash. While this rash may look like acne, it is not, and should not be treated with acne medications. The rash may appear red, swollen, crusty and dry, and feel sore. You may also develop very dry skin, which may crack, be itchy or become flaky or scaly. The rash may be the worst during the first few weeks of treatment but may continue until treatment is stopped. Tips for managing your skin include:

- Use a thick, alcohol-free emollient lotion or cream on your skin at least twice a day, including right after bathing.
- Sun exposure can worsen the rash. Use a sunscreen with an SPF of 30 or higher and wear a hat and sunglasses to protect your head and face from the sun.
- Bathe in cool or lukewarm water and pat your skin dry.
- Use soaps, lotions, and laundry detergents without alcohol, perfumes, or dyes.
- Wear gloves to wash dishes or do housework or gardening.
- Drink plenty of water and try not to scratch or rub your skin.
- Notify your healthcare team if you develop a rash as they may have management suggestions and/or prescribe a topical

medication to apply to the rash or an oral medication.

While receiving cetuximab, you may develop an inflammation of the skin around the nail bed/cuticle areas of toes or fingers, which is called paronychia. It can appear red, swollen or pus filled. Nails may develop "ridges" in them or fall off. You may also develop cuts or cracks that look like small paper cuts in the skin on your toes, fingers or knuckles. These side effects may appear several months after starting treatment but can last for many months after treatment stops.

- Follow the same recommendations for your skin (above).
- Don't bite your nails or cuticles or cut the cuticles.
- Keep your fingernails and toenails clean and dry.
- You may use nail polish, but do not wear fake nails.
- Notify your doctor or nurse if any nails fall off or you develop any of these side effects or other skin abnormalities.

## Sun Sensitivity

This medication can make your skin more sensitive to the sun, which can result in severe sunburn or rash. Sun sensitivity can last even after chemotherapy is completed. Limit sun exposure while receiving this medication, and for two months following the last dose. Avoid the sun between 10-2pm, when it is strongest. Wear sunscreen (at least SPF 15) everyday; wear sunglasses, a hat, and long sleeves/pants to protect your skin and seek out shade whenever possible.

## Fatigue

**Fatigue** is very common during cancer treatment and is an overwhelming feeling of exhaustion that is not usually relieved by rest. While on cancer treatment, and for a period after, you may need to adjust your schedule to manage fatigue. Plan times to rest during the day and conserve energy for more important activities. Exercise can help combat fatigue; a simple daily walk with a friend can help. Talk to your healthcare team for helpful tips on dealing with this side effect.

## Nausea and/or Vomiting

Talk to your oncology care team so they can prescribe medications to help you manage **nausea and vomiting**. In addition, dietary changes may help. Avoid things that may worsen the symptoms, such as heavy or greasy/fatty, spicy or acidic foods (lemons, tomatoes, oranges). Try saltines, or ginger ale to lessen symptoms.

Call your oncology care team if you are unable to keep fluids down for more than 12 hours or if you feel lightheaded or dizzy at any time.

## Muscle or Joint Pain/Aches and Weakness

Your healthcare provider can recommend medications and other strategies to help relieve pain.

## Less common, but important side effects can include:

- **Hair Changes:** While receiving cetuximab, your eyelashes may grow very fast, become very long and bother your eyes. Speak to your provider about how to best manage this side effect. The hair on your head may become curly, fine, or brittle. These changes tend to resolve once treatment is stopped.
- **Lung Problems:** Cetuximab can cause interstitial lung disease (ILD), especially in those with pre-existing lung problems. You may have breathing tests (pulmonary function tests) performed periodically. Call your physician right away if you have shortness of breath, cough, wheezing, or difficulty breathing.

## Reproductive Concerns

Exposure of an unborn child to this medication could cause birth defects, so you should not become pregnant or father a child while on this medication. If you do become pregnant, your care team will decide whether or not you should receive the medication. Effective birth control is necessary during treatment and for 6 months after treatment has stopped. Even if your menstrual cycle stops or you believe you are not producing sperm, you could still be fertile and conceive. You should not breastfeed while receiving this medication, and for 2 months after your last treatment.

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OncoLink is designed for educational purposes only and is not engaged in rendering medical advice or professional services. The information provided through OncoLink should not be used for diagnosing or treating a health problem or a disease. It is not a substitute for professional care. If you have or suspect you may have a health problem or have questions or concerns about the medication that you have been prescribed, you should consult your health care provider.