

Cisplatin (Platinol®)

Pronounce: SIS-plat-in

Classification: Platinum Coordination Complex

About Cisplatin (Platinol®)

Cisplatin 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 cancer from growing.

How to Take Cisplatin

Cisplatin is given through intravenous (IV, into a vein) infusion. The dose and schedule are determined by your size and type of cancer. You will be given IV fluids prior to receiving cisplatin. 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 right away. Do not apply anything to the site unless told to do so by your care team.

This medication can affect the blood levels of some anti-seizure medications. 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 cisplatin. 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:

Kidney Problems

This medication can cause kidney problems, including an increased creatinine level, which your oncology care team will monitor for using blood tests. Notify your healthcare provider if you notice decreased urine output, blood in the urine, swelling in the ankles, or loss of appetite.

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 your 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.

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.

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 bathe 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.

Hearing Problems

Cisplatin can cause hearing loss and ringing in the ears. Your hearing will be checked prior to you receiving cisplatin and as needed throughout treatment. Call your doctor or nurse if you have ringing in your ears or if you notice a decrease in your hearing.

Allergic Reactions

In some cases, patients can have an allergic reaction to this medication. Signs of a reaction can include: shortness of breath or difficulty breathing, chest pain, rash, flushing 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. 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.

Important but Less Common Side Effects

- **Electrolyte Abnormalities:** This medication can affect the normal levels of electrolytes (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.
- **Taste and Smell Changes:** 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. Ask your nurse about nutritional counseling services to help with food choices.
- **Vision Changes:** This medication can cause blurred vision and a change in color perception, especially with higher doses or increased frequency of doses. 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). 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.
- **Posterior Reversible Encephalopathy Syndrome (PRES):** In rare cases, this medication has caused a neurological disorder called posterior reversible encephalopathy syndrome (PRES), also called reversible posterior leukoencephalopathy (RPLS). Symptoms of PRES/RPLS include headache, seizure, lethargy, confusion, blindness, and other visual and neurological disturbances. Report any of these symptoms to your healthcare team immediately.

Reproductive Concerns

This medication may affect your reproductive system, resulting in the menstrual cycle or sperm production becoming irregular or stopping permanently. Women may experience menopausal effects including hot flashes and vaginal dryness. In addition, the desire for sex may decrease during treatment. You may want to consider sperm banking or egg harvesting if you may wish to have a child in the future. Discuss these options with your oncology team.

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. For women, effective birth control is necessary during treatment and for at least 14 months after treatment, even if your menstrual cycle stops. For men, effective birth control is necessary during treatment and for at least 11 months after treatment, even if you believe you are not producing sperm. You should consult with your healthcare team before breastfeeding while receiving this medication.

Ifosfamide (Ifex®)

Content Contributor: Karen Arnold-Korzeniowski, BSN RN

Pronounce: eye-FOSS-fa-mide

Classification: Alkylating Agent

About Ifosfamide (Ifex®)

Ifosfamide uses a process called alkylation to kill cancer cells. Alkylation damages the DNA of cells, preventing them from dividing. This causes them to die. Since cancer cells tend to divide faster and with less error-correcting than healthy cells, cancer cells are more sensitive to this damage.

How to Take Ifosfamide

Ifosfamide is given by intravenous (into a vein) infusion. The dosage and schedule are based on your size and type of cancer. It can be given alone or with other drugs.

The blood levels of this medication can be affected by certain foods and medications, so they should be avoided. These include grapefruit, grapefruit juice, verapamil, ketoconazole, rifampin, phenytoin, St. John's wort, and fluconazole. Be sure to tell your healthcare provider about all medications and supplements you take.

Possible Side Effects of Ifosfamide

There are a number of things you can do to manage the side effects of ifosfamide. 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 care team 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 for 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 bathe 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 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.

Nervous System Toxicity

In rare cases, ifosfamide can be toxic to the nervous system. Symptoms of this can include mild confusion, drowsiness, difficulty walking, blurry vision, hallucinations, personality changes, seizure, and coma. Toxicity can develop immediately after treatment or up to several days later. Your caregiver should be aware of this rare side effect and know to report any changes in your behavior to your healthcare team right away.

Effect on Kidneys and Bladder

Ifosfamide can damage the kidneys. It can irritate or cause damage to the lining of the bladder, causing you to have blood in your urine. Intravenous (IV) fluids will be given with your treatment to flush the kidneys and bladder. A medication called Mesna will be given to protect the bladder lining. Your care team will monitor your kidney function with blood tests. Drink 6 to 8 glasses of fluid a day and try to urinate every 2 to 3 hours. Call your provider if you have difficulty urinating or have blood in your urine.

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.

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.

Important but Less Common Side Effects

- **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). 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.
- **Lung Changes:** This medication may cause pulmonary fibrosis (scarring and stiffening of the lung

tissue) or interstitial pneumonitis. These problems can develop months to years after treatment is completed and may be more common in people with pre-existing lung conditions. 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.

- **Heart Problems:** Ifosfamide can cause or worsen pre-existing heart problems including congestive heart failure, arrhythmias, ST-segment and t-wave changes, pericardial effusion, pericarditis, decreased heart function, and heart attack. Notify your healthcare provider if you have sudden weight gain or swelling in the ankles or legs. If you develop chest pain or pressure, pain in the left arm, back, or jaw, sweating, shortness of breath, clammy skin, nausea, dizziness, or lightheadedness, call 911 or go to the nearest emergency room.
- **Liver Problems:** This medication can cause liver toxicity, which your oncology care team may monitor using blood tests called liver function tests. Notify your healthcare provider if you notice yellowing of the skin or eyes, your urine appears dark or brown, or you have pain in your abdomen, as these can be signs of liver toxicity. This medication, and when used in combination with other medications, may also potentially cause a serious side effect called veno-occlusive disease, also known as hepatic sinusoidal obstruction syndrome. This is caused by blockage of the blood flow through the small veins of the liver. Symptoms that should immediately be reported to your care team include yellowing of the skin or eyes, an enlarged liver which can lead to discomfort in the upper abdomen, weight gain, and fluid accumulation in the belly. The chance of having this side effect is higher if you are planning to receive a stem cell transplant after receiving this medication.
- **Allergic Reactions:** In some cases, patients can have an allergic reaction to this medication. Signs of a reaction can include shortness of breath or difficulty breathing, chest pain, rash, flushing 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.

Sexual & Reproductive Concerns

This drug may affect your reproductive system, resulting in the menstrual cycle or sperm production becoming irregular or stopping permanently. Women may experience menopausal effects including hot flashes and [vaginal dryness](#). In addition, the desire for sex may decrease during treatment.

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 a 6 month period after treatment, even if your menstrual cycle stops or you believe you are not producing sperm. You may want to consider sperm banking or egg harvesting if you may wish to have a child in the future. Discuss these options with your oncology team. You should not breastfeed while taking this medication.

Vinblastine (Velban®, Alkaban AQ)

Pronounce: vin-BLAS-teen

Classification: Antimicrotubule Agent/Vinca Alkaloid

About Vinblastine (Velban®, Alkaban AQ)

Vinblastine is a member of the vinca alkaloids family of chemotherapy agents. These medications work by interfering with cell division, which leaves the tumor unable to grow and spread. Vinblastine was developed from the Madagascar periwinkle plant.

How to Take Vinblastine

This medication is administered intravenously (IV, into a vein). Your dose and dosing schedule is based on your

size and the type of cancer being treated.

This medication is a vesicant. 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, causing tissue damage that can be severe. If the area of injection becomes red, swollen, or painful at any time during or after the injection, tell your provider right away. Do not apply anything to the site unless instructed by your provider.

The blood levels of this medication can be affected by certain foods and medications, so they should be avoided. These include: grapefruit, grapefruit juice, ketoconazole, rifampin, phenytoin, St. John's wort, and many anti-fungal medications. Be sure to tell your healthcare provider about all medications and supplements you take.

Possible Side Effects of Vinblastine

There are a number of things you can do to manage the side effects of vinblastine. Talk to your provider 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:

Constipation

Vinblastine can cause serious constipation, abdominal (belly) pain, and can even cause a blockage or stoppage of the bowel (called paralytic ileus) if not treated right away. There are several things you can do to prevent or relieve constipation. Include fiber in your diet (fruits and vegetables), drink 8 to 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 to 3 days, call your provider for [suggestions to relieve the constipation](#).

Neurotoxicity

This is a toxicity that affects your nerves. The most common effect is called [peripheral neuropathy](#), which affects the nerves in the hands and feet, causing numbness or tingling. This can get progressively worse with the more doses you get and can cause problems with balance or walking. In some people, the symptoms slowly get better after the medication is stopped, but for some, it never goes away completely. You should let your provider know if you have numbness or tingling in your hands and feet, as they may need to change the dose of your medication.

This medication can also cause neurologic toxicity that causes depression, headache, fatigue, dizziness, and seizures. It can also cause toxicity of the cranial nerves, which affects your vocal cords (changes in voice), eyes (visual changes), or facial nerves (drooping of the face or mouth). Patients can develop severe pain in the jaw soon after the first treatment with vincristine, which is caused by the medication affecting the nerves. If you have any of these problems, call your provider right away.

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 provider 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 bathe daily and perform frequent [mouth care](#).
- Do not cut cuticles or ingrown nails. You may wear nail polish, but not fake nails.
- Ask your provider before scheduling dental appointments or procedures.
- Ask your provider before you, or someone you live with, has any vaccinations.

Mouth Ulcers (Sores)

Certain cancer treatments can cause [sores or soreness in your mouth](#) and/or throat. Call your provider 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 provider 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 warm water mouth rinse (2 level teaspoons of baking soda or 1 level teaspoon 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 to 8 glasses), and suck on sugarless hard candy.
- Avoid smoking and chewing tobacco, drinking alcoholic beverages, and citrus juices.

Loss or Thinning of Scalp and Body Hair (Alopecia)

Your hair may become [thin, brittle, or may fall out](#). This often 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 important in cold weather or to protect you from the sun.

High Blood Pressure

This medication can cause high blood pressure (hypertension). Patients should have their blood pressure checked regularly during therapy.

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 provider 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 have 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.

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 provider for helpful tips on dealing with this side effect.

Nausea and/or Vomiting

Talk to your provider 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 antacids, (e.g. milk of magnesia, calcium tablets such as Tums), saltines, or ginger ale to lessen symptoms.

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

Important but Less Common Side Effects

- **Urinary retention:** Some patients may be unable to urinate (even when you feel that you need to). If you notice you are unable to urinate, you should call your provider right away or go to the emergency room.
- **Pain in tumor-containing tissue:** Some patients may have pain in tumor-containing tissue. This is thought to occur due to swelling of that area during its response to treatment.
- **Radiation Recall:** This medication may cause radiation recall. It may present as a skin reaction that looks like a sunburn (redness, swelling, soreness, peeling skin) in areas where radiation was previously given. Tell your provider if you notice this side effect. Treatment can include topical steroid ointments and a delay in your next chemotherapy dose.

Sexual & Reproductive Concerns

This drug may affect your reproductive system, resulting in your menstrual cycle or sperm production becoming irregular or stopping permanently. In addition, the desire for sex may decrease during treatment.

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 for females is necessary during treatment and for at least 7 months after your last dose, even if your menstrual cycle stops. Effective birth control for males is necessary during treatment and for at least 4 months after your last dose, even if you believe you are not producing sperm. You may want to consider sperm banking or egg harvesting if you may wish to have a child in the future. Discuss these options with your provider. You should not breastfeed while receiving this medication and for at least 1 week after your last dose.

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.