



Lynda Jackson Macmillan Centre

support & information at Mount Vernon Cancer Centre

... supporting people affected by cancer...

This leaflet forms part of a series of publications produced by the Lynda Jackson Macmillan Centre (LJMC).

If you would like further information about any aspect of cancer and its treatments, please drop in to the centre or call the Helpline.

The LJMC is staffed by healthcare professionals and trained volunteers and is part of the Mount Vernon Cancer Centre.

Services offered at the LJMC include:

- Drop-in centre for support and information
- Telephone helpline
- Benefits advice*
- Complementary therapies*
- Relaxation classes
- Counselling*
- Look Good...Feel Better™ beauty workshops
- Self-help courses

* These services are available to NHS patients under the care of an oncologist based at Mount Vernon Cancer Centre.

The **Lynda Jackson Macmillan Centre** is situated between the Cancer Centre and Gate 3 (White Hill)

Opening hours: **Mon-Fri: 9.30am-1.00pm & 2.00-4.30pm**

Mount Vernon Cancer Centre, Northwood, Middlesex HA6 2RN

Telephone Helpline: **020 3826 2555**

Website: www.ljmc.org

a patient's guide

Now that you have started your chemotherapy

Please bring this with you every time you attend for treatment

Patient Information Series PI 76



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East and North Hertfordshire **NHS**
NHS Trust



Mount Vernon Cancer Centre Contacts

If at any time during your course of chemotherapy you become unwell you must contact one of the numbers below:

Chemotherapy Suite020 3826 2236
[Mon - Fri, 8am - 6pm]

Marie Curie Day Unit:020 3826 2176
[Mon - Fri, 8am - 8pm]

**24 hour Acute Oncology Service
Mount Vernon Cancer Centre: 07825 028855**

Questions about appointment times or non-urgent queries?

Please contact your consultant's secretary through the main switchboard on 020 3826 2020.

Your consultant is: _____

Consent

It is a legal requirement to have a signed Consent Form from you before the start of your treatment.

If you have already been given one of these forms, please bring the completed form with you when you come for your first appointment.

If you have not been given a form, this will be discussed with you at your first appointment.

Identification

Please note that it is a legal requirement for the staff to check your name and details against your treatment sheet and your hospital name band each time you attend for treatment.

You must wear your name band at all times whilst in hospital.

If you normally pay for NHS prescriptions

People undergoing treatment for cancer do not have to pay NHS prescription charges if they have a valid medical exemption certificate.

Apply for an exemption certificate by collecting an application form from your GP.

This leaflet has been produced by professionals, patients and carers from Mount Vernon Cancer Centre who have expertise and experience in the topics covered by this publication. All our publications are reviewed and updated regularly. Details of the references used to write this information are available from the Information Team at the Lynda Jackson Macmillan Centre (LJMC).

Session number:

Starting date:

Fill in here the dates, starting with day 1 of session 2 of your chemotherapy

Side-effects as they happen to you																		
Best days																		
Worst days																		

Please remember to bring this booklet with you to your next appointment

What can I do to help myself while having chemotherapy

- Drink plenty of fluids
- Maintain a balanced diet (little and often)
- Carry on having as normal a lifestyle as possible, including light exercise
- Maintain good mouth care
- Avoid prolonged exposure to the sun
- Keep a medical thermometer in your home.
If you have a temperature of 38°C or above (or 37.5°C for more than 1 hour), call one of the contact numbers at the end of this booklet
- Call if you feel unwell (even if you have no increase in temperature) or have questions and concerns (see the contacts list on page 2)
- Keep your ALERT card in your wallet and show it to any health care professional that you may need to see, including your GP and dentist.
- Remember to make your next appointment with the nurse/receptionist before you leave.
- If you need medication to take home, check that you have it with you.
- Keep a record of any side-effects in the diary at the back of this booklet

Session number:

Starting date:

Fill in here the dates, starting with day 1 of session 2 of your chemotherapy

Side-effects as they happen to you																						
Best days																						
Worst days																						

Please remember to bring this booklet with you to your next appointment

Ondansetron Available as tablets, liquid, suppository or injection	Take twice each day to prevent the feeling of sickness.	Can cause constipation. If you have not had a bowel movement for 1- 2 days, start Senna, see pages 14-17. If this does not work contact your doctor/nurse.
Aprepitant (Emend®) Available as capsules	One 125mg capsule is taken at least one hour before chemo and then one 80mg capsule each day for two days after chemotherapy.	If you have not taken this capsule before arriving, alert the staff as you will need your capsule at least 1 hour before your treatment starts. Aprepitant is only used for patients whose chemotherapy causes severe nausea.
Domperidone (Motilium®) Available as tablets, liquid, suppository or injection	Take 30 minutes before meals as directed. Not normally taken for more than one week.	These drugs work by helping to move food faster through your stomach. This helps to prevent feeling and being sick. Domperidone also comes in a suppository. This is useful if you feel too sick to swallow tablets.
Cyclizine Available as tablets or injection	Tablets are usually taken three times a day only when needed.	They may make you drowsy. You should not drive a car or operate machinery when you are drowsy.
Lorazepam Available as tablets	Your doctor will ask you to put half a tablet under the tongue the night before and/or on the morning of treatment.	This is usually taken with other types of medicines to minimise feeling and being sick. They may make you drowsy. You should not drive a car or operate machinery when you feel drowsy.

If you have any queries about using any of these drugs please talk to the Mount Vernon Hospital pharmacist on tel: 020 3826 2505
Monday – Friday, 9am – 5pm.

How do you feel during your chemotherapy? - your personal record

Fill out a chart each day during each session of your treatment. Then bring this booklet with you when you return for your next treatment. It will help the team treating you to ease your side-effects.

This is an example of how to fill in your personal chart.

Session number: **1**

Starting date: **21st November**

Side-effects as they happen to you	21 Nov	22 Nov	23 Nov	24 Nov	25 Nov	26 Nov	27 Nov	28 Nov	29 Nov	30 Nov	1 Dec	2 Dec	3 Dec	4 Dec
Nausea (feeling sick)		✓	✓	✓						✓				
Tiredness														
Constipation					✓	✓								
Best days							✓	✓	✓			✓	✓	✓
Worst days			✓	✓	✓	✓								

- When drinking, try taking sips slowly. Some patients find sipping a fizzy drink such as soda, dry ginger ale or ginger tea can help
- Try getting some fresh air before meals to distract you from the thought of food
- Avoid tight or restrictive clothing
- Try rinsing your mouth with fizzy water between meals
- Suck ice cubes
- Try to sit down and relax, but avoid lying down straight after eating

Can complementary therapies help?

Acupressure bands (available from chemists) can help to control feelings of sickness. These apply pressure to specific parts of the body, usually the wrist.

Complementary therapy and relaxation sessions may also help. Please ask in the LJMC for more details or see leaflet PI 16 A Patient's Guide to Complementary Therapies at Mount Vernon Cancer Centre.

Further information about feeling and being sick

- Controlling nausea and vomiting (anti-emetic therapy) – Macmillan Factsheet www.macmillan.org.uk
- Types of anti-sickness drugs; How you take anti-sickness drugs; Side effects of anti-sickness drugs – Cancer Research UK leaflets www.cancerresearchuk.org

These leaflets are also available from the LJMC.

If you would like further advice, please contact the Mount Vernon Cancer Centre Dietitian, Tel: 020 3826 2125.

What can I do if I am constipated?

These are the medicines I have been sent home with...

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If these are not helping, please contact the 24 hour Acute Oncology Service for advice on other medications listed in the tables below.

Drink plenty each day and try to get some light exercise when you are able. Even a 10 minute walk can help your bowels to function.

Common medications for constipation

Drug	How they work	General advice and common side-effects
Stimulant Laxatives such as Senna (Senokot®) tablets and liquid, Glycerin suppositories, Docusate capsules, Bisacodyl tablets	Increase the activity of the bowel. Docusate is a stimulant and stool softener	For both stimulant laxatives and stool softeners: Tablets and liquids are usually taken at night with a glass of water. Suppositories are inserted deep into the rectum. Wash hands well before and after inserting the suppository. Remove the suppository from the protective film and moisten with water before inserting it into the rectum. Do not swallow the suppository. Senna usually acts in 8 – 12 hours Docusate usually acts within 1 – 2 days.
Stool Softeners such as Liquid Paraffin	Provide moisture to the stool	

Common mouthwashes

Drug	General advice	How the drug is given
Chlorhexidine Mouthwash (Corsodyl®) (pink colour)	Use four times a day - after each meal and at bedtime.	Swish 10mls and spit. This is not to be swallowed.
Difflam (green colour)	Use four times a day - 30 minutes before meals and at bedtime to help your mouth feel more comfortable.	Swish and spit. This is not to be swallowed. Difflam makes your mouth feel numb and less painful. Take care with hot food and drinks as your mouth may not feel they are too hot due to it being numbed.
Dispersible Aspirin tablets	Disperse the aspirin in a small amount of warm water. Use four times a day - 30 minutes before meals and at bedtime.	Swish or gargle and spit. Do not swallow. The aspirin/water mixture makes your mouth feel less painful.
Raspberry mucilage with dispersible Aspirin tablets (prescribed only by hospital team)	Mix 10ml of mucilage with one 300mg dispersible Aspirin tablet - use four times a day.	Swish and spit. If the mucilage is used alone it can be swallowed. The mixture makes your mouth feel less painful.
Oxetacaine and antacid mouthwash (prescribed only by hospital team)	use 5-10 ml four times a day	Swish. This can be swallowed. Take care with hot food and drinks as mouth may feel numb.

If you have any queries about using any of these drugs please talk to the Mount Vernon Hospital pharmacist on tel: 020 3826 2505 Monday – Friday, 9am – 5pm.

What can I do if my mouth is sore?

These are the pain relief medicines and mouth washes that I have been sent home with...

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If these are not helping, please contact the 24 hour Acute Oncology Service for advice on other medications listed in the table on the next page.

If you are taking Capecitabine tablets and develop painful mouth ulcers or swelling in your mouth, stop taking Capecitabine straight away and contact the cancer centre (see page 2).

Some chemotherapy drugs can make your mouth and throat sore. You may experience:

- redness or soreness of the gums or mouth
- bleeding gums
- white patches on the tongue or inside the mouth
- mouth ulcers

This may cause chewing and swallowing to become more difficult. If this happens and solid foods become difficult to swallow, you may need to change their consistency or texture by having a soft or blended diet.

Keeping your mouth clean is very important. If possible, brush your teeth twice daily, floss daily and rinse after each meal to remove debris and to reduce the risk of infection. You may use mouthwash, but avoid those which contain alcohol. Your local pharmacist will be able to advise you.

If you experience a sore mouth, try to avoid eating spicy, very hot or cold food or acidic food such as citrus fruits. Smoking and alcohol can also increase the soreness.

Osmotic laxatives such as Lactulose syrup, Macrogols (Movicol®, Laxido®)	These draw water into the bowel to soften the stool. These may take 48 hours or more to act.	Where necessary, the required amount of granules should be mixed with about half a glass of water or follow the instructions given to you. Stir well and drink it straight away.
Bulk forming laxatives such as Ispaghula (Fybogel® granules), Sterculia (Normacol® granules)	These are fibre supplements that increase the fibre in your diet helping your bowels work more efficiently. Full effect may take some days to develop.	The amount of granules or powder needed should be mixed with about half a glass of water or follow the instructions given to you. Stir well and drink it straight away, preferably after meals. These products should not be taken just before going to bed. You must remember to drink plenty of fluid while taking fibre supplements to avoid obstruction (blockage).
Codanthramer capsules/syrup	A combined stimulant laxative and stool softener. This medication takes 6 - 12 hours to work, so works well when taken at bedtime.	Urine may appear red or pink after taking this medication. After opening your bowels, clean the area well as irritation, redness or discolouring of the skin around the back passage may occur since the medicine is present in the urine and stools.

If you have any queries about using any of these drugs please talk to the Mount Vernon Hospital pharmacist on tel: 020 3826 2505
 Monday – Friday, 9am – 5pm.

Helpful tips for managing constipation

This information is a guide to help you deal with your constipation until you can talk to your doctor. It does not replace medical advice.

Managing your diet

It is important for everybody to eat fibre in their diet. If you have constipation you may benefit from eating more fibre. The following tips may also help:

1. Eat a balanced diet

Make sure that you eat more fibre each day than usual. Fibre is the name given to parts of plant foods that we cannot completely digest. Eating fibre relieves and prevents constipation. If you are not used to eating fibre, then introduce it gradually.

Foods which are high in fibre include the following:

- Wholegrain breakfast cereals
- Wholemeal bread and flour
- Brown rice
- Wholemeal pasta
- Fresh fruit and vegetables with their skins
- Beans and nuts
- Dried fruit such as figs, prunes, apricots or dates

If you have a very poor appetite, have difficulty chewing or swallowing or have been asked to follow a low residue diet, increasing the fibre in your diet may not be correct for you. Please ask your medical team or ask for a referral to the dietitian.

If this does not help, or the constipation lasts more than three or four days and you are having abdominal pain, then tell your doctor.

3. Eat foods which may help your symptoms by making your stools firmer

These include:

- chicken (without the skin on)
- chicken soup
- fish
- eggs
- rice and pasta
- potatoes (but without skins)
- bananas
- white bread
- cooked fruit (particularly stewed apple)
- low-fibre breakfast cereals such as cornflakes
- dry crackers

Try having drinks at 'room' temperature

If you have diarrhoea, this may put you off eating. It may help if you eat smaller amounts of food more often, rather than trying to eat large meals.

4. Drink plenty of fluids

When you have the symptoms of diarrhoea, you lose fluids. It is important that these are replaced so you don't get dehydrated. Drink as often as you can, even if it is only small amounts. Avoid alcoholic drinks. The best types of fluids to have include:

- water
- herbal teas
- clear soups
- Any soft drinks (except 'diet' products). If fizzy, let them go flat.

Electrolyte sachets can also be bought from a pharmacy. These help to replace minerals lost through diarrhoea. Please ask your pharmacist for information about when to take these.

Helpful tips for managing diarrhoea

This information is a guide to help you deal with the symptoms of diarrhoea until you can talk to your doctor. It does not replace medical advice. **If your symptoms persist you must inform your doctor.**

Managing your diet

It is important for everybody to eat fibre in their diet but if you have any symptoms of diarrhoea, eating fibre will make them worse.

1. Reduce the amount of fibre you eat each day

High fibre foods may make your symptoms worse and you should eat less of it than usual. You will need to check with your doctor or dietitian how long you should do this for.

High fibre foods to avoid include:

- wholegrain breakfast cereals
- wholemeal bread and flour
- brown rice
- wholemeal pasta
- fresh fruit and vegetables with their skins
- beans and nuts
- dried fruit such as figs, prunes, apricots or dates

2. Be careful about eating other foods which may make your symptoms worse, so eat less of them.

These include:

- spicy foods
- rich, greasy, fried foods
- foods containing caffeine (coffee and chocolate)
- dairy products (milk, butter, yogurt, cheese, cream)
- very cold or very hot drinks
- products containing sorbitol (sugar-free mints or gum)

2. Drink plenty of fluids

Make sure you drink plenty of fluids. You should aim to drink at least 8 - 10 glasses each day. Avoid alcohol.

3. Try some natural remedies

You may want to try taking natural remedies such as syrup of figs and prune juice which may help.

4. Try some exercise

It is important to do some gentle exercise such as walking each day.

If you cannot walk by yourself then ask a friend, carer or relative to go with you.

5. Further information if you have constipation

- Controlling the symptoms of cancer (Macmillan Cancer Support (MCS) booklet)
- Healthy eating and cancer (MCS booklet)

These are available from the Lynda Jackson Macmillan Centre or from Macmillan Cancer Support at www.Macmillan.org.uk

What can I do if I am having diarrhoea?

These are the anti-diarrhoeal medicines I have been sent home with...

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- Drink plenty each day

If you have diarrhoea that is not helped by your medication please contact your health care team - see page 2.

If you have **not** been sent home with medication for managing diarrhoea, please contact the 24 hour Acute Oncology Service for advice. They will decide if the diarrhoea is a side effect of your treatment and advise you how to manage it. Do not take any over-the-counter medication for diarrhoea until you have spoken with your health care team.

If you are taking Capecitabine tablets and have 4 loose bowel movements per day more than usual or diarrhoea at night, stop taking Capecitabine straight away and contact the cancer centre - see page 2.

Common anti-diarrhoeal drugs

Drug	General advice	How the drug is given
Loperamide (also called Imodium®)	This is used to treat sudden, short-lived attacks and long-lasting diarrhoea in adults. It works by slowing down gut movement and making the stools more solid and less frequent. If you already use loperamide for a chronic condition, please discuss your dose with your doctor or nurse.	When diarrhoea starts, you will usually take 2 capsules to begin with and then one after each episode of diarrhoea. Never take more than 8 capsules in any 24 hour period, unless your doctor or nurse has said that this is safe for you.
Codeine phosphate	This belongs to a group of medicines known as opioid pain killers. These are used to relieve pain, suppress cough and treat diarrhoea. Do not take the tablets for longer than is needed.	The usual dose for adults is one or two 30mg tablets, three to four times a day. No more than 8 tablets must be taken in 24 hours. These may make you feel drowsy and light headed. If they do, you should not drive or operate machinery.

If you have any queries about using any of these drugs please talk to the Mount Vernon Hospital pharmacist on tel: 020 3826 2505
Monday – Friday, 9am – 5pm.