

Xeloda regimen



(Capecitabine treatment)



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Introduction

Together with your consultant, you have decided to start treatment with cytostatics (chemotherapy). In your case, the treatment consists of taking Xeloda (chemotherapy tablets). This treatment involves taking a course of drugs that inhibit cell division for a longer period of time.

You are receiving a lot of information, and it is not easy to take in everything at once. That is why this information has been written down so that you can reread everything at home.

Treatment with Xeloda

The oncologist or oncology nurse will discuss the advantages and disadvantages of treatment with chemotherapy tablets with you and will write out a prescription for the Xeloda. You can collect these tablets with the prescription from the pharmacy at our hospital. The oncology nurse will discuss the most common side effects of the treatment, the consequences for everyday life and the logistics of the treatment with you. The oncology nurse will also discuss with you what help, if any, could be offered in the home situation.

Frequently asked questions about Xeloda

- What should I do if I realise that I have forgotten the last dose?

Take the tablets as soon as you remember. If this is shortly before the next dose, do not take the missed dose but follow the normal dosing schedule. You can always consult the treating physician or the oncology nurse if in doubt.

- What should I do if I have taken a double dose?
Contact your treating physician or oncology nurse immediately.

Common side effects of chemotherapy

If you experience any side effects, please inform the nurse at the next treatment. Possibly something can be done about it. There are a number of reasons to call the doctor/oncology nurse or the hospital immediately. See the form 'Reasons to call the oncology nurse/doctor.'

Diarrhoea

If you suffer from watery stool four to six times a day (or more often) or if you have to go to the toilet to defecate at night, this is diarrhoea.

Contact the oncology nurses, your GP or A&E immediately.

Irritation or inflammation in the mouth

The treatment can damage your oral mucosa. This can make it difficult for you to swallow, talk, eat and drink. Common complaints are: pain, dry mouth, change in sense of taste, and a white or red discolouration in your mouth. It is often possible to limit these unpleasant complaints to a minimum and to prevent an infection with good oral hygiene. Below you will find practical tips for people with their own teeth and for people with dentures.

Oral care tips for people with their own teeth:

- Brush your teeth two to four times a day with a soft electric or normal toothbrush and fluoride toothpaste. Brush your tongue as well. Rinse your toothbrush well after use and put it away with the brush standing up (not in a case).
- Lubricate dry lips with Vaseline from a tube (Vaseline sticks are not hygienic)
- Rinse your mouth with water for one minute, two to four times a day. This will remove bacteria and food residues from your mouth. Rinse your mouth between brushes.
- Only use toothpicks/toothbrushes or dental floss if you are used to using them so that you do not damage your gums.

Oral care tips for people with dentures:

- Clean your dentures two to four times a day with a hard denture brush, water and unscented soap. If you prefer not to use soap, buy Ecosym at your chemist or pharmacy.
- Rinse your denture brush well after use and put it away with the brush standing up.
- Rinse your mouth with water for one minute, two to four times a day. This will remove bacteria and food residues from your mouth. Rinse your mouth between brushing.
- Lubricate dry lips with Vaseline from a tube (Vaseline sticks are not hygienic)
- Put your dentures in a tray of tap water overnight. Rinse the tray daily.
- As long as you have no pain in your mouth, you can wear your dentures during the day. Take your dentures out at night and rinse well before putting them back in.

Hand/feet reactions

In a hand/foot reaction, the hands and/or feet become discoloured. They may be numb, painful, swollen, and red. In dark-skinned people, hands and feet may appear black. They can also peel, and cracks can form. These complaints usually arise on around the third or fourth treatment.

The following advice can prevent hand/foot complaints and can provide relief:

- Lubricate the hands and/or feet with a thick hand cream at least four times a day, preferably from a jar.
- Try to avoid tight shoes. Use gel or soft insoles.
- Try to put as little pressure on the feet as possible if you have painful feet.

If you have hand/foot complaints, report these complaints to your treating physician or oncology nurse.

Heart problems

You may experience chest pain radiating to the jaw and arm although this is rare. If you do experience this, contact A&E at the hospital immediately (also in the evening or at night).

Nausea and vomiting

Nausea almost never occurs during treatment with Xeloda.

To prevent nausea, you can do the following:

- Eat small meals regularly, for example, six to eight times a day. An empty stomach can make you feel sick.
- Don't eat if you really don't feel like eating. You can make up for this between the treatments.
- Avoid strenuous exercise right before a meal.
- Make sure you drink a lot during the treatment so that the additional waste products can leave the body through your urine.
- Drink at least two litres of fluid daily. Not drinking enough can cause nausea and a bad taste in the mouth.

If you are nauseous, you can do the following:

- Eat at times when you are less nauseous, during the day or also at night when you are awake.
- Match the size of the meal to your appetite. A large plateful of food is often discouraging.
- Eat foods you like.
- If you have vomited, let your stomach slowly get used to solid food (e.g. by eating a rusk).
- Trust your medicines. You can often eat even if your stomach says otherwise. Sometimes nausea can be 'eaten away'.

Complaints of fatigue and fitness problems

Many cancer patients suffer from fatigue. This is due to the drugs or the actual cancer. Nausea and not eating enough can also lead to fatigue. You may have less energy during the treatment and therefore be more emotional. It is important to take your fatigue into account in your daily life. Try to find a new daily rhythm that you can stick to. We cannot provide medicine for fatigue.

We can give you the following advice, however:

- Spread your energy throughout the day.
- Arrange regular rest periods.
- Let those around you know that you are suffering from fatigue; talk about it so that it becomes clear and visible to others.
- Ask others to take over tasks from you so that you can devote your energy to important or pleasant things.
- Ensure enough distraction to forget the fatigue for a while.
- Eat and drink enough, and have a healthy and varied diet.

In order to maintain your fitness, we recommend that you exercise regularly from the start of the treatment. You can do that yourself, but you can also participate in special training programmes.

Fertility problems

The treatment may reduce your fertility or lead to infertility. If this is an important matter for you, please discuss it with your treating physician. For men, it is possible to freeze semen before they start the treatment (a financial contribution is requested for this). You should urgently avoid pregnancy during treatment and for at least six months afterwards. Ask your treating physician or nurse specialist for advice if you wish to have children. The treatment can lead to abnormalities in the unborn child.

Sexual problems because of the chemotherapy, you may feel less interested in having sex, or you may experience sex as less pleasant. You may also need more tenderness and cuddling during this period. Attention for each other, touching each other and caressing and holding each other can be very important during this period.

The treatment sometimes has a direct effect on the genitals. In women, the vagina may become drier. You can then use a lubricant during sex, Sensilube or body gliss (available at the chemist's), for example, but there are even more options. Ask the treating physician or nursing specialist about this. Men may sometimes find it more difficult to get an erection during treatment. Sperm production may also decrease or stop; the semen may temporarily look more watery.

Menstrual complaints

The course of treatment may change the course of your period. Depending on the treatment, this varies from heavier menstruation to missing a period or the complete absence of menstruation. After the treatment, there is a good chance that your periods will stop for a longer period of time or completely. This can be accompanied by menopausal symptoms, such as hot flashes, night sweats, fatigue, agitation and despair.

Questions?



If you have any questions about this leaflet with the Xeloda regimen, you can contact the oncology nurse on working days during office hours on telephone number: 780 0493.



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