

For the Patient: GUPCABA

Palliative Therapy for Metastatic Castration Resistant Prostate Cancer Using Cabazitaxel (JEVTANA®) and predniSONE

GU = **G**enito**U**rinary P = Prostate CABA = CABAzitaxel

ABOUT THIS MEDICATION

What are these drugs used for?

Cabazitaxel in combination with prednisone are used to treat prostate cancer that has spread to other parts of the body in patients who have had prior cancer treatment with DOCEtaxel.

How do these drugs work?

Cabazitaxel is an intravenous drug treatment given as therapy for metastatic prostate cancer. This treatment may improve your overall survival and help reduce your symptoms.

TREATMENT SUMMARY

How are these drugs given?

- Cabazitaxel is given directly into the vein (IV) and prednisone is a tablet taken by mouth.
- You will receive cabazitaxel at the clinic by a chemotherapy nurse on the first day of treatment. Each cabazitaxel treatment will take about 1 hour. You will receive this medication every 21 days. This 21 day period is called a "cycle". The cycles are repeated up to maximum of 10 cycles, but may be changed depending on how the chemotherapy affects you.
- You will need to take prednisone every day during your treatment with cabazitaxel. A pharmacist will give you prednisone tablets to take home with you.
- You will take prednisone 10 mg daily (usually 2 x 5 mg tablets at once or one 5 mg tablet twice a day). You will need to take the tablets with food to avoid any stomach upset.

What will happen when I get my drugs?

A blood test is done each cycle, on or before the first day of each treatment cycle. The dose and timing of your treatment may be changed based on your blood tests and/or other side effects.

BC Cancer Protocol Summary (Patient Version) GUPCABA

Developed: 1 August 2020 Revised:

SIDE EFFECTS AND WHAT TO DO ABOUT THEM

Your doctor will review the risks of treatment and possible side effects with you before starting treatment.

Side effects for cabazitaxel are listed in the following table in the order in which they may occur. Tips to help manage the side effects are included.

SIDE EFFECTS	MANAGEMENT
Allergic reactions may occur. Signs of an allergic reaction may include rash, itching, dizziness, swelling, breathing problems, abdominal or back pain. This can occur immediately or several hours after receiving cabazitaxel and usually only with the first or second dose.	Tell your nurse if this happens while you are receiving cabazitaxel or contact your oncologist <i>immediately</i> if this happens after you leave the clinic.
Pain or tenderness may occur where the needle was placed.	Apply cool compresses or soak in cool water for 15-20 minutes several times a day.
Nausea and vomiting may occur after your treatment. Most people have little or no nausea.	You may be given a prescription for antinausea drug(s) to take before your chemotherapy treatment and/or at home. It is easier to prevent nausea than treat it once it has occurred, so follow directions closely.
	 Drink plenty of fluids. Eat and drink often in small amounts. Try the ideas in Food Choices to Help Control Nausea.*
Fever may sometimes occur shortly after treatment with cabazitaxel. Fever should last no longer than 24 hours.	 Take acetaminophen (e.g., TYLENOL®) every 4-6 hours, to a maximum of 4 g (4000 mg) per day. Fever (over 100°F or 38°C by an oral thermometer) which occurs more than a few days after treatment may be a sign of an infection. Report this to your doctor <i>immediately</i>.
Diarrhea may sometimes occur.	 If diarrhea is a problem: Drink plenty of fluids. Eat and drink often in small amounts. Avoid high fibre foods as outlined in Food Ideas to Help with Diarrhea During Chemotherapy.*

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SIDE EFFECTS	MANAGEMENT
Constipation may sometimes occur.	Exercise if you can.
	Drink plenty of fluids.
	Try ideas in Suggestions for Dealing with Constipation.*
Your white blood cells may decrease 8-	To help prevent infection:
11 days after your treatment. They usually return to normal 15-21 days after your last	 Wash your hands often and always after using the bathroom.
treatment. White blood cells protect your body by fighting bacteria (germs) that	Avoid crowds and people who are sick.
cause infection. When they are low, you are at greater risk of having an infection.	 Call your doctor <i>immediately</i> at the first sign of an infection such as fever (over 100°F or 38°C by an oral thermometer), chills, cough, or burning when you pass urine.
Your platelets may decrease 8-11 days	To help prevent bleeding problems:
after your treatment. They usually return	Try not to bruise, cut, or burn yourself.
to normal 21 days after your last treatment. Platelets help to make your blood clot when you hurt yourself. You	 Clean your nose by blowing gently. Do not pick your nose.
may bruise or bleed more easily than	Avoid constipation.
usual.	 Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene.
	Some medications such as ASA (e.g., ASPIRIN®) or ibuprofen (e.g., ADVIL®) may increase your risk of bleeding.
	Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart).
	For minor pain, try acetaminophen (e.g., TYLENOL®) first, to a maximum of 4 g (4000 mg) per day, but occasional use of ibuprofen may be acceptable.
Headache may rarely occur.	Take acetaminophen (e.g., TYLENOL®) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day.
Muscle or joint pain may sometimes occur.	Take acetaminophen (e.g., TYLENOL®) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day.

SIDE EFFECTS	MANAGEMENT
Tiredness and lack of energy may sometimes occur.	Do not drive a car or operate machinery if you are feeling tired.
	 Try the ideas in Your Bank to Energy Savings: Helping People with Cancer Handle Fatigue.*
Hair loss sometimes occurs with cabazitaxel. Hair will grow back once you stop treatment with cabazitaxel. Colour and texture may change.	If hair loss is a problem, refer to For the Patient: Hair Loss Due to Chemotherapy.*
Numbness or tingling of the fingers or toes may rarely occur. This will slowly return to normal once your treatments are over. This may take several months.	 Be careful when handling items that are sharp, hot, or cold. Tell your doctor at your next visit, especially if you have trouble with buttons, writing, or picking up small objects.

^{*}Please ask your chemotherapy nurse or pharmacist for a copy.

Side effects for prednisone are listed in the table below:

SIDE EFFECTS	MANAGEMENT
Heartburn or nausea may occur. There may be an increased risk of stomach problems such as bleeding ulcers especially if you have had stomach problems before.	 Take your prednisone after eating. Take antacids one hour before or two hours after prednisone. Antacids can reduce the amount of prednisone absorbed when taken at the same time. Some medications such as ASA (e.g., ASPIRIN®) or ibuprofen (e.g., ADVIL®) may increase your risk of stomach problems. Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart). For minor pain, try acetaminophen (e.g., TYLENOL®) first, but occasional use of ibuprofen may be acceptable.
Increased appetite and weight gain may occur. With long-term use, your face and shoulders may become rounded even without weight gain. This will return to normal once you stop taking prednisone.	Eat healthy, well balanced meals.
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SIDE EFFECTS	MANAGEMENT
Swelling of hands, feet or lower legs may occur if your body retains extra fluid especially with long-term use.	Elevate your feet when sitting.Avoid tight clothing.Avoid foods with high salt or sodium.
Your body's ability to handle illness or injury is weakened by prednisone. This will return to normal after you stop taking prednisone.	 Check with your doctor if you have an infection, illness or injury. You may need extra steroids to help you get better.
High blood pressure may occur with long-term use.	Check your blood pressure regularly.Avoid foods with high salt or sodium.
Bone loss (osteoporosis) may occur with long-term use.	Discuss the risk of bone loss with your doctor.
Sugar control may be affected in diabetic patients. Some people may become diabetic when treated with prednisone.	Check your blood sugar regularly if you are diabetic.

INSTUCTIONS FOR THE PATIENT:

SEE YOUR DOCTOR OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an infection such as fever (over 100°F or 38°C by an oral thermometer), shaking chills; severe sore throat, productive cough (coughing up thick or green sputum); cloudy or foul smelling urine; painful, tender, or swollen red skin wounds or sores.
- Signs of **bleeding problems** such as black, tarry stools; blood in urine; pinpoint red spots on skin; extensive bruising.
- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heartbeat, face swelling, or breathing problems.
- Signs of **heart problems** such as fast or uneven heartbeat.

SEE YOUR DOCTOR AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Signs of **anemia** such as unusual tiredness or weakness.
- Signs of **heart problems** such as shortness of breath or difficulty breathing, swelling of feet or lower legs.
- Signs of **liver problems** such as yellow eyes or skin, white or clay-coloured stools.
- Signs of kidney problems such as lower back or side pain, swelling of feet or lower legs.
- Signs of **bladder problems** such as changes in urination, painful burning sensation, presence of blood, or abdominal pain.

at telephone number
described above but worry you, or if any symptoms are severe, contact
If you experience symptoms or changes in your body that have not beer