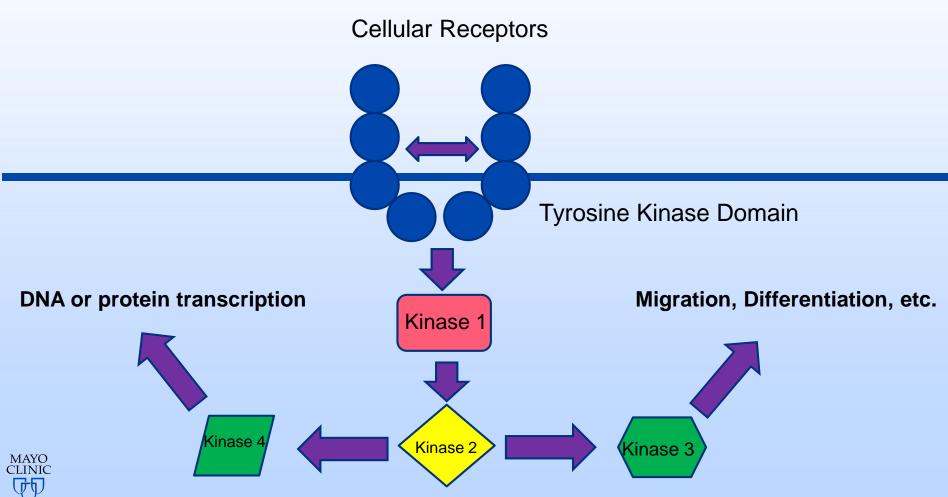


Management of Drug Side Effects

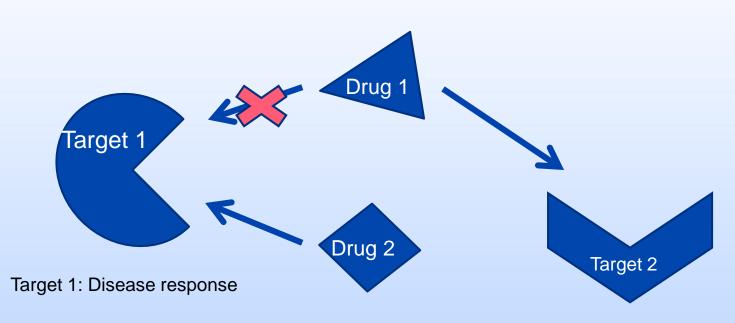
Eric Yancey, Pharm.D Instructor in Pharmacy, Mayo Clinic School of Medicine

Gist Day of Learning 3/10/18

General Oncology-Pharmacology



Pharmacology: Drug Side Effects



Target 2: QTc changes, constipation, etc.





Imatinib (Gleevec®)

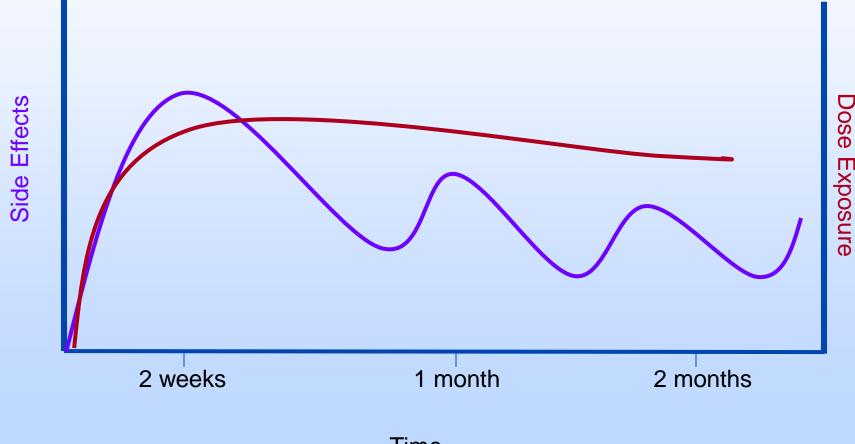
Side Effects

- Fatigue
- Anemia
- Nausea or vomiting
- Diarrhea
- Edema/fluid retention
- Cramps
- Endocrine

- Rash/skin problems
- Joint pain
- Eyes
- Sensitive to sunlight
- Liver toxicity
- Myelotoxicity (blood counts)
- Neurotoxicity

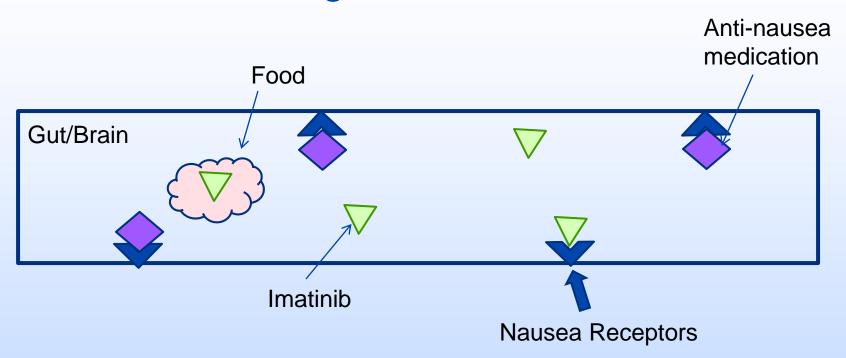


Side Effect Lineage





Nausea/Vomiting

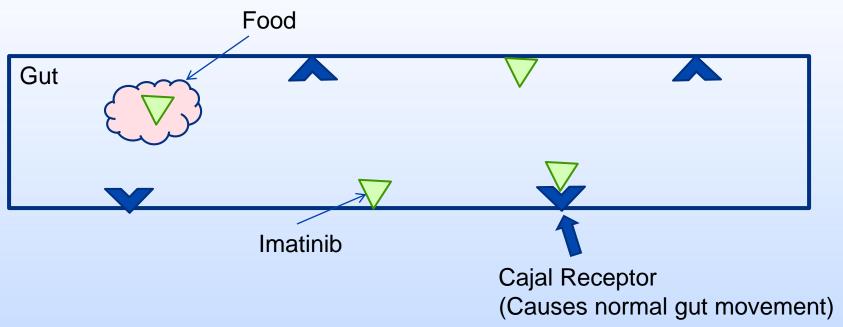


Pro-Tips:

- Onset: Can happen upon initiation
- Take medication with food and large glass of water
- Take anti-nausea medication (ondansetron/prochlorperazine)
 - Nausea around dose: Take medication 30min prior to dose
 - Nausea throughout day: As needed, scheduled, or different medication



Diarrhea



Pro-Tips:

- Onset: Can happen upon initiation
- Take Medication with food and large glass of water
- Antidiarrheal medications



Diarrhea

Signs that you have diarrhea	Be sure to call Mayo Clinic Cancer Center right away if you have any of these signs
 More stools per day than you had before starting chemotherapy Softer, looser, or more watery stool Stomach pain or feeling weak More cramping and/or gas 	 Fever (a temperature of 100.5 degrees Fahrenheit or higher) Flu-like symptoms Chills, Sweating, Feeling Hot Severe stomach pain or cramps

What to Drink	What to Eat
 Drink at least 8 to 10 large glasses of fluid a day (water, Gatorade, Pedialyte, clear broth) Drink a little at a time, continuously throughout the day Limit fluids at mealtimes to 4 to 6 ounces Avoid milk or dairy products, alcohol, coffee and very hot or very cold fluids 	 Eat small meals frequently Follow the BRAT diet (Bananas, Rice, Applesauce, Toast) Avoid fatty or fried foods, spicy foods, high-fiber foods, raw fruits and vegetables, beans, chocolate



Diarrhea

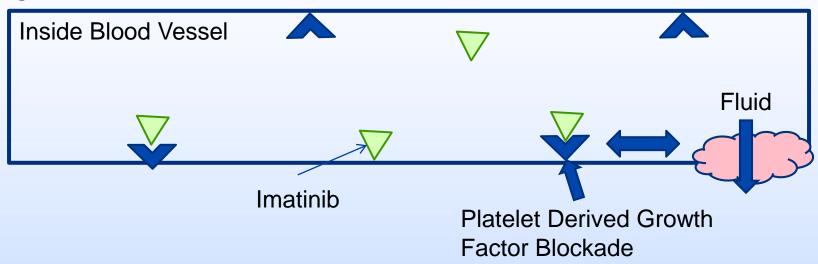
Taking Medicine for your diarrhea Imodium A-D[©] (Loperamide) Continued Diarrhea First Episode of Diarrhea Take 2 caplets (4mg) with first bowel Take 1 caplet (2mg) every 2 hours movement of diarrhea Then take 1 caplet (2mg) every 4 hours or with each unformed stool Stop taking loperamide if you do not have a bowel movement for 12 hours. Stop taking loperamide if you do not have a bowel movement for 12 hours. If diarrhea continues (more than 4 If diarrhea continues (more than 4 bowel movements in a 24 hour time bowel movements in a 24 hour time frame), please call the Mayo Clinic frame), see directions for continued cancer center. diarrhea

Mayo Clinic Cancer Center: 480-342-4800 or 480-301-8000 (after hours)



Swelling

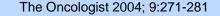
Skin



- Edema is typically mild, but up to 50% of people could get swelling
- Found in lower extremities/under eyes→ morning more common
- At Risk: Women, >65 years of age, cardiovascular/renal issues
- Timing: >400mg/day: ~ 1 month; ≤ 400 mg/day: ~ 2 months

Pro Tips:

- Ice Pack, topical 1% hydrocortisone or 0.25% phenylephrine (eyes)
- Water Pills (Furosemide), Decrease salt (eyes/feet)
- Be judicious with time on your feet/ prop up feet





Infective Agents Rash Skin Inside Blood Vessel Rash **Imatinib** C-Kit receptor on skin cells

- Rash can vary in presentation (red/swollen bumps, dry skin, etc.): contact provider
- Location: forearms, trunk, and face (less common)
- At Risk: High doses, women

Pro Tips:

- Heavy Creams, antihistamines
- Steroids (if creams unresponsive)
- Dose adjustments



Cramping

- Risk: 25-50% of people can experience cramps
 - Typically mild in presentation
- Location: Thighs, calves, feet, or hands
- Presentation: The cramps should not change pattern, frequency, or severity (if so contact provider). Have consistent triggers
- <u>Cause</u>: Exertion, night-time/sleep, low calcium/magnesium
- <u>Treatment</u>: Tonic water (quinine), calcium/magnesium supplementation, sports drinks, medications (NSAID, muscle relaxants)



Eyes

- Periorbital swelling (see above)
- Changes in visual acuity:
 - Epiphora (tearing)
 - Cause: Lacrimal duct blockage, overproduction of tears
 - Management: Timing of dose, antihistamine drops
 - Dry eyes:
 - Management: Artificial tears

Bottom Line: If not improving, contact provider.



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Sunitinib (Sutent ®)

&

Regorafenib (Stivarga ®)

Side Effects

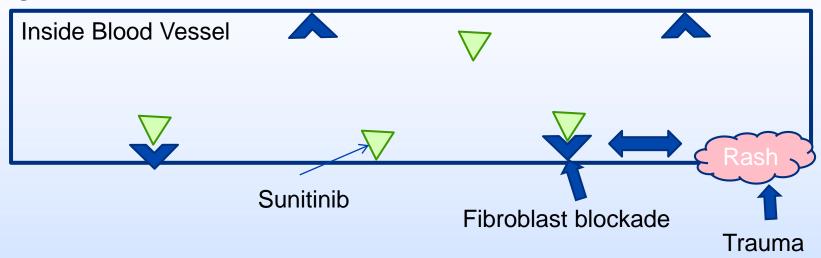
- Fatigue
- Nausea or vomiting
- Diarrhea
- Sore Mouth
- Rash/skin problems
- Hypertension
- Voice

- Myelotoxicity (blood counts)
 - Neutropenia
 - Anemia
 - Thrombocytopenia
- Liver toxicity
- Cardio-toxicity
- Kidney toxicity



Rash/Skin Problems

Skin



- Presentation: Pain/redness on palms and soles→ lesions
- Location: Heals of feet or joints in hands
- Timing: 2-4 weeks after initiation

Pro Tips:

- Avoid excess hot water
- Avoid excessive trauma/rigorous exercise in first month
- Avoid tight fitting shoes



Rash/Skin Problems

Prophylaxis

- Creams with urea
- Prevention measures

Grade 1: Minimal skin changes with out pain

- Prescription strength urea +/- steroid creams
- Prevention measure
- Follow up in 2 weeks

Grade 2: Skin changes (blisters, cracks, etc) with pain

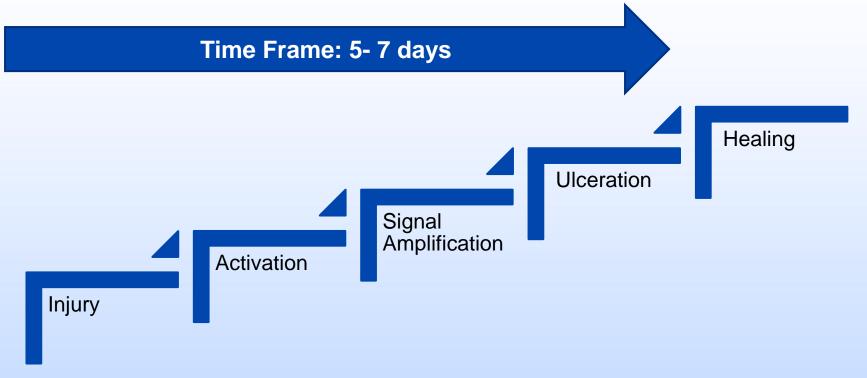
- Prescription strength urea + steroid creams twice a day
- Prevention measures
- +/- pain medications
- Follow up in 2 weeks

Grade 3: Severe skin changes (blisters, cracks, etc) with pain

- Prescription steroid creams twice a day
- Prevention measures
- + pain medications
- Follow up in 2 weeks; hold medication



Sore Mouth: Pathophysiology



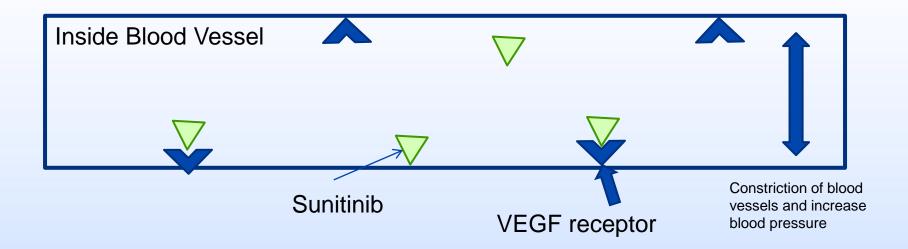


Sore Mouth

- Pro Tips:
 - Prevention:
 - Oral Care
 - Soft tooth brush
 - Saline and/or sodium bicarbonate mouth rinses
 - Treatment:
 - Avoid spicy/acidic/abrasive foods
 - Prescriptions



Hypertension



- Timing: Early, within 1-6 weeks
- Risk Factors: Pre-existing hypertension, age >60 years, BMI >25 kg/m2
- Effect is based on dosing

Pro Tips:

- Monitor blood pressure daily especially in people underlying blood pressure/cardio issues
- Contact provider if blood pressure is consistently ≥130/80 or rapidly increasing blood pressure
 Cancer. 2015 Jan;121(2):311-9



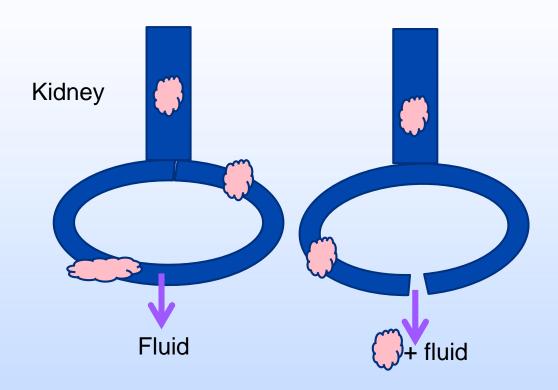
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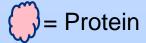


Kidney/Liver/Heart Toxicity



- Pro tips:
 - Kidney: Monitor for changes in urine quality
 - Heart: Discuss cardiac medical history
 - Liver: Labs







Questions & Discussion