

Treatment FLAG-IDA

An information guide



Treatment FLAG-IDA

This leaflet is offered as a guide to you and your family.

The possible benefits of treatment vary; for some people chemotherapy may reduce the risk of the cancer coming back, for others it may control the cancer and its symptoms.

Chemotherapy is the most commonly prescribed anti-cancer treatment but other types of treatment are also used. Your doctor will explain to you whether you will receive chemotherapy or another type of treatment, or a combination of both.

Your doctor or nurse will be happy to answer any questions you have about your treatment.

Your treatment

Your doctor or nurse clinician has prescribed for you a treatment called FLAG-IDA.

The treatment is part of the induction therapy for AML.

You will receive Cycle 1 of the treatment in hospital and stay in until your blood counts recover. This means you will be in hospital for about 4 weeks, but this may vary from person to person.

You will then have a small period of time at home and come back to hospital to start Cycle 2.

Your treatment includes:

Cycle 1

- G-CSF (white blood cell growth factor) given by injection under the skin in the abdomen or leg for 7 days (days 1 to 7)
- Fludarabine given via an infusion (drip) over 30 minutes, once a day for 5 days (days 2 to 6)
- Ara-C (cytarabine) given via an infusion (drip) over 4 hours, once a day (4 hours after the fludarabine) for 5 days (days 2 to 6)
- Idarubicin given via an infusion (drip) over 1 hour once a day for 3 days (days 4 to 6).

Cycle 2 will be given the same as cycle 1.

This treatment can have serious or possibly life-threatening side effects. It is very important that you report side effects straight away. Don't delay, if you feel unwell, please ring F11 Day Case/F11 Inpatient Ward (out of hours).

Increased risk of serious infection

You are vulnerable to infection while you are having chemotherapy, minor infections can become life threatening in a matter of hours if left untreated.

Symptoms of infection include fever, shivering, sweats, sore throat, diarrhoea, discomfort when you pass urine, cough or breathless. Whilst at home we recommend that you use a digital thermometer so you can check your temperature which will be provided for you on discharge.

If you feel unwell or have a temperature of 37.5°C or above please contact the F11 24 hour chemotherapy hotline number **0161 656 1166**. **Do not leave a message** – make sure you speak to someone. **Call immediately** – any delay could be harmful.

Possible side effects

Chemotherapy can cause many different side effects. Some are more likely to occur than others. Everyone is different and not everyone gets all the side effects.

Most side effects are usually temporary, but in some rare cases they can be life-threatening. It is important to tell your hospital doctor or nurse about any side effects so they can be monitored and, where possible, treated.

Common side effects

Idarubicin because of its red colour may discolour your urine red or pink for the first few times following treatment. This is perfectly normal and nothing to worry about.

Bruising or bleeding

This treatment can reduce the production of platelets which help the blood clot.

Let your doctor know if you have any unexplained bruising or bleeding, such as nosebleeds, bloodspots or rashes on the skin, or bleeding gums. You may need a platelet transfusion.

Anaemia (low number of red blood cells)

While having this treatment you may become anaemic.

This may make you feel tired and breathless. Let your doctor or nurse know if these symptoms are a problem. You may need a blood transfusion.

You will have a routine blood test every day while you are in hospital to monitor the effects of the chemotherapy, but please tell your nurse if you experience any of the symptoms listed above.

Eye irritation

This is a known side effect of the Ara-C at the dose given in this treatment. We will give you eye drops to try to prevent this, but please let your nurse or doctor know if your eyes feel uncomfortable.

Nausea and vomiting (sickness)

The severity of this varies from person to person.

Anti-sickness medication will be given along with your chemotherapy to prevent this. If you continue to feel or be sick, tell your nurse because your anti-sickness medication may need to be changed or increased.

Hair loss

Hair loss is usually total. The hair falls out gradually 10 to 14 days following your first course of treatment. The time scale varies from person to person.

Please remember that this is a temporary side effect and your hair will grow back when your treatment is completed.

If you would like an appointment with the wig service, this can be arranged for you. Please ask a member of staff.

Lethargy

Some chemotherapy may make you feel tired and lacking in energy. It can be frustrating when you feel unable to cope with routine tasks. If you do feel tired, take rest when necessary. Gentle exercise such as walking can be beneficial.

Uncommon side effects

- G-CSF can sometimes cause an aching sensation or pain in the bones. This can usually be controlled with a mild painkiller and will only last while having the injections.
- Ara-C can sometimes cause a syndrome that can result in some or all of the following: fever, weakness and aching in your muscles and bones, a rash and pain in the chest. This will not affect everyone and will disappear soon after the Ara-C infusions stop.
- Fludarabine can occasionally cause some feelings of agitation, confusion or visual disturbances. These are very rare but tell your nurse or doctor about anything unusual.
- Extravasation is when chemotherapy leaks outside the vein. If you develop redness, soreness or pain at the injection site at any time please let us know straightaway.

Diarrhoea

If this becomes a problem during or after your treatment please tell your nurse or doctor as this may be a sign of infection.

Sore mouth

Your mouth may become sore or dry, or you may notice small mouth ulcers during this treatment.

Drinking plenty of fluids and cleaning your teeth regularly and gently with a soft toothbrush can help to reduce the risk of this happening. We can prescribe a mouthwash for you to use during treatment. You can dilute this with water if your mouth is sore. Ask your doctor or nurse for further advice.

Occasionally during treatment you may experience a strange taste sometimes described as metallic or bitter. A strongly flavoured sweet or mint will help to disguise this.

Rare side effects

Irregular heart beats

Occasionally this can happen as a result of the Idarubicin. It is quite rare if your heart is healthy and is usually reversible. Please make sure you tell a doctor if your heart beat feels different from normal or you have pains in the chest.

Transfusion-Associated graft-versus-host disease (TA-GvHD)

Fludarabine causes a deficiency in the immune system, so when you have a transfusion of blood products you are at higher risk of developing TA-GvHD.

TA-GvHD is a rare complication caused by the white blood cells in the transfused blood product. These white cells recognise you as 'foreign' and cause a severe rejection reaction.

We can prevent this by giving you irradiated blood products. We will give you more information about TA-GvHD and irradiated blood products in a separate leaflet.

Also, we will give you a card to keep with you that informs staff you need irradiated blood and platelets. Never be afraid to check when you are having a transfusion that it has been irradiated.

Skin changes

Sometimes as a result of the chemotherapy, your skin may appear darker in colour or lightly tanned, especially around the joints. This is known as hyperpigmentation. The skin will return to normal when treatment is finished.

Some chemotherapy can make your skin more sensitive to the sun than usual. Sit in the shade, avoid too much sun and use a sunblock cream. Asian and African-Caribbean people may develop noticeable light patches on their skin.

Serious and potentially life threatening side effects

In a small proportion of patients chemotherapy can result in very severe side effects which may rarely result in death. The team caring for you will discuss the risk of these side effects with you.

Sex, contraception & fertility

Protecting your partner and contraception:

We recommend that you or your partner use a condom during sexual intercourse while you are having the course of chemotherapy.

Chemotherapy is dangerous to unborn babies and this will also protect you and your partner from any chemotherapy drugs that may be present in semen and in the vagina. If you suspect that you may be pregnant please tell your doctor immediately.

Fertility:

This chemotherapy may affect your ability to have children. Your doctor or nurse should have discussed this with you. If not, please ask them before you start treatment.

Late side effects

Some side effects may become evident only after a number of years. In reaching any decision with you about treatment, the potential benefit you receive from treatment will be weighed against the risks of serious long term side effects to the heart, lungs, kidneys and bone marrow.

With some drugs there is also a small but definite risk of developing another cancer. If any of these problems specifically applies to you, the doctor will discuss these with you and note this on your consent form.

Urgent contact number

F11 24hr chemotherapy hotline on **0161 656 1166**

Useful contacts

F11 Day case reception: 0161 778 5527/5515 (8am – 4pm)

F11 Day case nurses station: 0161 778 5584/5586 (8am – 6pm)

F11 Inpatient nurses station: 0161 778 5514/5519 (24hrs)

Macmillan Haematology Clinical Nurse Specialist Team:

Telephone: 0161 778 5297

Monday - Friday 9:00am - 5:00pm

Your consultant is

Your hospital no. is

Notes:

If English is not your first language and you need help, please contact the Interpretation and Translation Service

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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Dacă engleza nu este prima ta limbă și ai nevoie de ajutor, te rugăm să contactezi Serviciul de interpretare și traducere

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إذا لم تكن الإنجليزية هي لغتك الأولى وتحتاج إلى مساعدة ، فيرجى الاتصال بخدمة الترجمة الشفوية والتحريرية

☎ : 0161 627 8770

@ : interpretation@pat.nhs.uk

To improve our care environment for Patients, Visitors and Staff, **Northern Care Alliance NHS Group** is Smoke Free including buildings, grounds & car parks.

For advice on stopping smoking contact the Specialist Stop Smoking Service on 01706 517 522

For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897


For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service

The Northern Care Alliance NHS Group (NCA) is one of the largest NHS organisations in the country, employing 17,000 staff and providing a range of hospital and community healthcare services to around 1 million people across Salford, Oldham, Bury, Rochdale and surrounding areas. Our Care Organisations are responsible for providing our services, delivering safe, high quality and reliable care to the local communities they serve.

The NCA brings together Salford Royal NHS Foundation Trust and the hospitals and community services of The Royal Oldham Hospital, Fairfield General Hospital in Bury, and Rochdale Infirmary (currently part of The Pennine Acute Hospitals NHS Trust).

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