5-FU & XELODA: Side Effects vs. Symptoms

Some patients are unable to metabolize 5-FU or Xeloda (capecitabine) as expected. During treatment, prolonged or enhanced exposure due to mutations in the enzymes responsible for normal metabolism of 5-FU or Xeloda can result in early-onset severe toxicity or death.

While it is common for side effects to occur to a mild or moderate degree with 5-FU or Xeloda, if you find that you are having a moderate to severe reaction on your first or second round of chemotherapy you should contact your healthcare provider immediately. This checklist will help you determine whether you are experiencing a side effect of the treatment or a symptom of toxicity.

SIDE EFFECTS

During your first or second administration of 5-FU or 14 day cycle of Xeloda, it is common to have mild/moderate nausea and/or diarrhea.

After your first or second administration, it is common to experience:

COMMON

- Mild to moderate diarrhea
- Mucositis or stomatitis (mouth sores)
- Anemia (low red blood cells)
- ✓ Neutropenia (low white blood cells)
- ✓ Thrombocytopenia (low platelets)
- Mild to moderate nausea and vomiting
- ✓ Hand and foot syndrome (capecitabine)
- Sensitivity to light

RARE

- ✓ Hair thinning or loss
- Nail changes
- ✓ Darkening of the skin

TREATMENTS

Talk to your doctor about ways to reduce the effects of these side effects.

- Supportive care for common side effects
- Treating individual symptoms

SYMPTOMS OF EARLY-ONSET SEVERE TOXICITY

These can be symptoms of life-threatening toxicity especially if they occur during the first or second round of treatment. TALK TO YOUR HEALTH CARE PROVIDER IMMEDIATELY if you think are experiencing these symptoms as it is critical that you receive treatment as soon as possible.

These symptoms can result in septic shock or organ failure.

- ✓ Diarrhea more than 7 times what is normal for you and/or incontinence
- ✓ Mucositis- oral and/or anal that interferes with eating, drinking, swallowing or daily activities
- ✓ Nausea to the point where you are unable to eat or drink
- ✓ Vomiting more than than 6 times
- ✓ Bleeding (hemorrhage), including black tarry stools or "coffee ground" vomit
- Severe hand and foot syndrome, including pain, blisters, bleeding and peeling that interferes with daily activities
- ✓ Cardiac arrhythmias (irregular heart beats), chest pain or heart attack, acute pulmonary edema, congestive heart failure, cardiac arrest
- ✓ Neurologic cerebellar syndrome (uncoordination), dizziness, queasiness, disorientation, seizures, coma

TREATMENTS

- Supportive care for life threatening toxicities
- Uridine triacetate, which must be given within 96 hours of your last dose of
 5-FU or Xeloda and will reduce or prevent further toxicity from developing.

Many patients are able to receive additional cycles of 5-FU or Xeloda despite having had early-onset severe toxicity. Please discuss treatment options with your doctor.