

INTRAVENOUS CANCER TREATMENT EDUCATION



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THP

Name of the regimen and cancer drugs

Your care team may refer to your treatment as THP. This regimen consists of 3 different anti-cancer therapies.

- T: Docetaxel (DOH see TAK sil): Taxotere®
- H: Trastuzumab (tras TU zoo mab): Herceptin®, Ogivri® (trastuzumab-dkst), Kanjinti® (trastuzumab-anns), Trazimera® (trastuzumab-qyyp), Ontruzant® (trastuzumab-dttb), and Herzuma® (trastuzumab-pkrb)
- P: Pertuzumab (per TU zoo mab): Perjeta®

Common uses

This regimen is most commonly used to treat human epidermal growth factor receptor 2 (HER2) overexpressing breast cancer, but may be used for other treatments.

Treatment schedule

Your treatment will be given into your vein through an intravenous (IV) line. This may be into a short, flexible temporary catheter in your arm, or through a central venous catheter. A central venous catheter, or central line is a long, flexible IV tube that empties into a very large vein next to the heart. Talk with your care team to see which will be best for you and your treatment.

Each treatment is repeated every 21 days. This is known as one cycle. Your treatment may be given for a set number of cycles, or it will keep going until the drug, or drugs, stop working or you have side effects which stop you from continuing treatment.

- ☐ Docetaxel IV given on day 1
- ☐ Trastuzumab IV given on day 1
- ☐ Pertuzumab IV given on day 1

Drug	DAY	1	2	3	4	5	6	7	8	9	...	21	Cycle 2 Day 1
Docetaxel													
Trastuzumab													
Pertuzumab													

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Other medications

Other medications may be ordered for you to prevent or treat certain side effects. These include:

	Instructions:
Dexamethasone	In addition to being used for anti-nausea, dexamethasone is also used to prevent fluid retention (edema) and allergic reactions. You should take this medication regardless of how you feel on the prescribed days.
Growth factors	Growth factors, like filgrastim, pegfilgrastim, and others, are medications used to treat neutropenia and prevent infections. Neutropenia is a condition where there are lower-than-normal white blood cells caused by some type of chemotherapy. Growth factors help the bone marrow to make more white blood cells. <hr/> <hr/> <hr/> <hr/>
Anti-nausea and other medications	You will receive medications to prevent nausea just before your cancer treatment. You may also get prescriptions for other medications to take at home, as below: <hr/> <hr/> <hr/> <hr/>

Possible drug interactions

- ☐ THP may interact with other drugs you are taking. Please inform your care providers of all prescription medicine, over-the-counter medications, vitamins, and herbal products that you take.
- ☐ Talk with your care provider or pharmacist before taking new medications, supplements, or receiving any vaccines.

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Common Side Effects

Common side effects that have been known to happen in patients receiving THP are listed in the left side of this table. In some instances, the side effects may be reported less often but are still important to discuss. This table does not list all the known side effects for this therapy, only the ones that are experienced most often. Not every patient experiences every known side effect of a drug; even if you are taking the same drug as another patient, you may experience different side effects. Options to help manage any side effects that do occur are included on the right side of this table. These should be discussed with your care provider. If you experience any side effect you cannot manage or that is not listed here, contact your care provider.

Possible Side Effect	Management
Decreased white blood cells (WBCs) and increased risk for infection	<p>Your WBCs should be monitored by a simple blood test. When your WBCs are low, you are at a greater risk of having an infection. Take the following precautions to protect yourself from infection:</p> <ul style="list-style-type: none"> • Wash your hands often, especially before eating and after using the bathroom. • Avoid crowds and people with fevers, flu, or other infection. • Bathe often for good personal hygiene. <p>Contact your care team if you experience any signs or symptoms of an infection such as:</p> <ul style="list-style-type: none"> • Fever (temperature more than 100.4°F or 38°C) • Chills • Sore throat • Burning when peeing • Tiredness that is worse than normal • A sore that becomes red, is draining, or does not heal <p>Check with your care team before taking any medicine for a fever or chills.</p>
Diarrhea	<p>Monitor how many bowel movements you have each day.</p> <ul style="list-style-type: none"> • Drink 8-10 (8-ounce) glasses of water or fluid each day unless your care team has asked you to limit your fluid intake. • Eat small, frequent meals throughout the day rather than a few large meals. • Eat bland, low-fiber foods (such as bananas, applesauce, potatoes, chicken, rice, and toast). • Avoid high fiber foods, such as raw vegetables and fruits and whole grains. • Avoid foods that cause gas, such as broccoli and beans. • Avoid foods with lactose, such as yogurt and milk. • Avoid spicy, fried, and greasy foods. <p>Contact your care team if:</p> <ul style="list-style-type: none"> • The number of bowel movements you have in a day increases by 4 or more. • You feel dizzy or lightheaded. <p>Your care team may recommend an over-the-counter medication or prescribe something to help manage your symptoms.</p>

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Possible Side Effect	Management
Hair loss (alopecia)	<ul style="list-style-type: none"> • Hair will likely grow back after treatment is completed, although the color and/or texture may be different. • It may take 3 to 6 months after therapy is completed to resume normal hair growth. • Some people choose to wear scarves, caps, or wigs. A short haircut prior to treatment may help with stress of hair loss. • Partial or complete hair loss is likely, usually 1-2 weeks after start of therapy. This hair loss can be all body hair. • Be sure to keep your head covered to protect it from the sun during the summer and cold during the winter. • If not covering your scalp during the summer months, be sure to use sunscreen when spending time outdoors.
Nausea or vomiting	<ul style="list-style-type: none"> • Take all medications as prescribed to help prevent and lessen symptoms of nausea and vomiting. • Eat and drink slowly. • Drink 8-10 (8-ounce) glasses of water and/or fluid (soup or broth) each day unless your care team has instructed you to limit your fluid intake. • Eat small, frequent meals throughout the day rather than a few large meals. • Eat bland foods; avoid spicy, fried, and greasy foods. • Avoid intense exercise immediately after eating. • Don't lay down right away after eating. • Wear loose fitting clothing for comfort. • Avoid strong odors. Consider getting fresh air and try deep breathing.
Fatigue	<ul style="list-style-type: none"> • You may be more tired than usual or have less energy • Stay as active as possible, but know it is okay to rest as needed • Try to do some type of moderate activity every day • Conserve your energy. Plan your activities and do them at a time of day when you feel a bit more energetic • Follow a healthy diet and stay hydrated • Accept help from family and friends • Find healthy ways to manage stress, such as meditation, journaling, yoga, and guided imagery • Develop good sleeping habits, limit napping during the day to help you sleep better at night • Avoid operating heavy machinery if you feel too tired <p>Contact your care team if you experience extreme fatigue that prevents you from doing your normal daily activities.</p>

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Possible Side Effect	Management
Rash or itchy skin	<ul style="list-style-type: none"> • Keep your skin moisturized with creams and moisturizing lotions to decrease the risk of rash or itchiness and wear loose fitting clothing. • Avoid using perfumes and cologne as these products may increase rash symptoms. • Avoid being in the heat for long periods of time. • Your provider may recommend an over-the-counter antihistamine or a topical cream. • Sunlight can make symptoms worse. • Avoid sun exposure as much as possible to decrease the risk of sunburn. The highest exposure to UV (ultra-violet) radiation occurs between the hours of 10am and 4pm. • Wear long-sleeved clothing, with UV protection if possible. • Wear broad-brimmed hats. • Apply broad-spectrum sunscreen (UVA/UVB) with at least SPF 30 as often as directed on the bottle. • Use lip balm with at least SPF 30. • Avoid tanning beds. <p>If your rash or itching continues to worsen, contact your care team.</p>
Numbness or tingling in hands and feet	<p>Report changes in your sense of touch, such as a burning feeling, pain on the skin or weakness.</p>
Mouth irritation or sores	<p>Practice good mouth care.</p> <ul style="list-style-type: none"> • Rinse your mouth after meals and at bedtime, and more frequently if you develop sores in your mouth. • Brush your teeth with a soft toothbrush or cotton swab after meals. • Use a mild non-alcohol mouth rinse at least 4 times a day (after eating and at bedtime). One example is a mixture of 1/8 teaspoon of salt and 1/4 teaspoon of baking soda in 8 ounces of warm (not hot) water. • Avoid acidic, hot or spicy foods and beverages, and rough foods that might irritate the mouth. • If you have sores in your mouth, avoid using tobacco products, alcohol, and mouthwashes that contain alcohol. <p>Call your care team if you experience pain or sores in your mouth or throat.</p>
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Possible Side Effect	Management
Nail changes	<ul style="list-style-type: none"> Nails on fingers and toes may look swollen and reddened and may grow ridges Skin/Nail changes: report any rashes, dryness or scaling to care provider, use mild soaps and rinse well, avoid hot water, use alcohol free oil-based moisturizers, report any darkening or peeling skin or any changes to the nail Usually this change starts at the cuticle and may affect the skin around the nail Wear gloves when cleaning or doing dishes, or working in the garden Keep nails trimmed and hands clean Biting, chewing, or picking at your nails can increase the risk of getting an infection Talk to your care team if you notice any changes in your nails
Fluid retention or swelling (edema)	<ul style="list-style-type: none"> Do not stand for long periods of time Keep your legs elevated when sitting or lying down Try to not eat salty foods, which can increase swelling Avoid tight-fitting clothing and shoes Weigh yourself daily Take any medications as prescribed to decrease fluid retention <p>Contact your care team if you notice:</p> <ul style="list-style-type: none"> Swelling in the hands, feet, or legs You are short of breath You have gained 5 pounds or more in one week
Muscle or joint pain or weakness	<ul style="list-style-type: none"> Keep a diary of your pain, including when and where the pain happens, what it feels like, and how long it lasts Stay as active as possible, but know that it is okay to rest as needed, too Tell your care team if pain limits what you can do <p>If the pain or weakness bothers you, ask your provider what you may use to help with this discomfort. Take only pain medication that has been prescribed or recommended by your care team.</p>

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Rare but serious side effects

Tell your care provider if you experience any symptoms of these problems:

- ☐ This treatment may affect your heart's ability to pump blood. Tell your healthcare provider right away if you experience new or worsening shortness of breath, chest pain, irregular heartbeat, or swelling of your hands, ankles, or legs.
- ☐ Infusion reaction: These medications can rarely cause an infusion reaction. During your treatment, let the nurse know right away if any of these symptoms happen: chills or shaking, dizziness, fever, itchiness or rash, flushing, difficulty breathing, wheezing, sudden back pain, or feeling faint.
- ☐ This treatment may result in serious and fatal lung toxicity. If you start to experience shortness of breath, fatigue, breathlessness, or discomfort/worsening of symptoms while lying on your back, please immediately contact your prescriber.
- ☐ Docetaxel may irritate your veins as it is infused. Notify your nurse right away if you notice any pain, aching, burning, itching, swelling, or redness at the site of your IV.
- ☐ Docetaxel may be harmful to your liver. Speak to your care team to know when you need to have blood tests done to monitor your liver function. If you get this side effect, your doctor may change your dose or stop treatment for some time.
- ☐ Docetaxel may cause eye pain, blurred vision, tearing, and light sensitivity. You may receive eye treatments to prevent this side effect from occurring and to treat this side effect if it occurs.
- ☐ This treatment may cause harm to the fetus if administered to pregnant women. Please contact your healthcare professional if you are or suspect that you are pregnant, as this may result in an alternative treatment plan.

If you experience ANY new, worsening, or uncontrolled side effects, call your care team immediately.

(INSTITUTIONAL CONTACT INFO)

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Handling body fluids and waste

Some of the drugs you receive may be present in urine, stool, sweat, or vomit for many days after treatment. Many cancer drugs are toxic, your bodily waste may also be toxic and can be dangerous to come into contact with. Once you have started THP, follow the instructions below for at least two days after your treatment. This is to keep you, your loved ones, and the environment as safe as possible.

- ☐ Pregnant women should avoid touching anything that may be soiled with body fluids from the patient.
- ☐ Toilet and septic systems
 - You may use the same toilet, septic tank, and/or sewer that you usually use. If you have a low-flow toilet, close the lid and flush twice to ensure that all waste has been discarded.
- ☐ If the toilet or toilet seat becomes soiled with urine, stool, or vomit, clean the surface after every use before other people use the toilet.
- ☐ Wash hands with soap and water after using the toilet for at least 20 seconds.
- ☐ If you need a bedpan, be sure your caregiver knows to wear gloves to assist with cleanup and to wash the bedpan with soap and water every day.
- ☐ If you do not have good control of bladder or bowels, use a disposable pad with a plastic back, a diaper, or a sheet to absorb body waste.
- ☐ Wash any skin that has been exposed to body waste with soap and water.
- ☐ Linens or clothing that are soiled with body fluids or body waste should be washed separately from other linens and clothing. If you do not have a washer, place the soiled linens in a plastic bag until they can be washed.
- ☐ Wash hands with soap and water after touching linens or clothing that may be soiled with body fluids.

Intimacy, sexual activity, contraception, and fertility

This treatment may cause changes that can affect intimacy and sexuality, including desire and body image. Maintaining physical closeness and/or intimacy with loved ones can be continued during treatment. Holding hands, hugging, and kissing can be done safely. It is recommended that you talk to your care team about any restrictions or questions you may have.

Some treatments can influence the ability to have children, also known as fertility. If you're interested in preserving fertility, talk to your care team before treatment. Ask your healthcare provider to determine when it is safe to become pregnant after your treatment. Patients of reproductive ability should not become pregnant or get their partners pregnant while receiving THP. Some of the drugs you receive may be present in semen and vaginal secretion for many days after treatment. You should use barrier devices, such as condoms, during sexual activity to limit exposure to body fluids.

- ☐ Talk to your care team about birth control. Not all options may be right for your treatment or cancer. Effective contraception could include one or more of the following: barrier methods (e.g. condoms), hormone methods (e.g. birth control pills), or surgery.
- ☐ Tell your care team if you become pregnant or plan to breastfeed.

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Additional resources

Product website:

Trastuzumab: <https://www.herceptin.com>

Pertuzumab: <https://www.perjeta.com>

Prescribing information:

Docetaxel: https://www.accessdata.fda.gov/drugsatfda_docs/label/2012/201525s002lbl.pdf

Trastuzumab: https://www.accessdata.fda.gov/drugsatfda_docs/label/2017/103792s5337lbl.pdf

Pertuzumab: https://www.accessdata.fda.gov/drugsatfda_docs/label/2012/125409lbl.pdf

Additional instructions

Updated – August 28, 2022

Important notice: The Association of Community Cancer Centers (ACCC), Hematology/Oncology Pharmacy Association (HOPA), National Community Oncology Dispensing Association, Inc. (NCODA), and Oncology Nursing Society (ONS) have collaborated in gathering information for and developing this patient education guide. This guide represents a brief summary of the therapy derived from information provided by the drug manufacturer and other resources. This guide does not cover all existing information related to the possible uses, directions, doses, precautions, warnings, interactions, adverse effects, or risks associated with this therapy and should not substitute for the advice of a qualified healthcare professional. Provision of this guide is for informational purposes only and does not constitute or imply endorsement, recommendation, or favoring of this therapy by ACCC, HOPA, NCODA, or ONS, who assume no liability for and cannot ensure the accuracy of the information presented. The collaborators are not making any representations with respect to the medications whatsoever, and any and all decisions, with respect to such medications, are at the sole risk of the individual receiving therapy. All decisions related to receiving this therapy should be made with the guidance and under the direction of a qualified healthcare professional.

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