

Chemotherapy: Chinese

(Traditional)

化療

本資訊主要介紹化療。

所有帶下劃線的辭彙在本文最後所附的辭彙表中均有說明。

許多罹患癌症的人士都接受過化療作為治療的一部份。

有些人也會進行其他治療,例如標靶治療、<u>放療</u>或<u>手術</u>。醫生會和您商討您的治療方法。我們還有關於這些治療的中文繁體版本。

若您有任何疑問,可以詢問您正在其中接受治療的醫院的醫生、護士或藥劑師。

如果您有任何疑問或想找人談談,您可於週一至週五上午 9 時至晚上 8 時,致電麥克米倫癌症援助機構(Macmillan Cancer Support)熱線: **0808 808 00 00**。 我們有口譯員,所以您可以使用您的語言與我們溝通。當您致電我們時,請以英文告訴我們您所需要的語言(說「釵尼斯」)。

我們提供更多關於不同類型癌症、治療和癌症患者生活的中文繁體版資訊。請瀏覽 macmillan.org.uk/translations 或致電 0808 808 00 00。

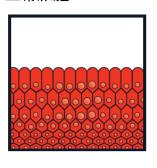
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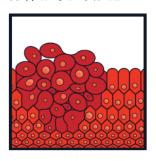
甚麽是癌症?

癌症源自於我們體內的<u>細胞</u>。<u>細胞</u>是構成人體器官和組織的微小構建塊。通常,這些細胞以可控的方式分裂並生成新的細胞。這就是我們身體如何成長、癒合和修復的方式。有時,細胞分裂出錯會使細胞變得異常。異常細胞持續不斷地分裂,生成越來越多的異常細胞。這些細胞形成的腫塊叫做腫瘤。

正常細胞



形成腫塊的細胞



不是所有的腫塊都是癌症。非癌症型腫塊稱為<u>良性腫瘤</u>,不會擴散到身體的其他部位。癌症型腫塊稱為惡性腫瘤,可以在身體的其他部位生長。

癌細胞有時會脫離原發性癌症,透過血液或<u>淋巴系統</u>傳播到身體的其他部位。癌細胞 擴散到身體的其他部位並長成腫瘤,被稱為繼發性癌症。

甚麼是化療?

化療藥物會破壞癌細胞。藥物通過血液輸送到身體各處,破壞癌細胞,使它們死亡。 健康細胞也會受損,但它們通常會自行修復。

在治療期間, 您可能會使用一種或多種藥物。

何時使用化療?

化療可以單獨進行,也可以與其他類型的治療結合,如標靶治療、<u>手術</u>或<u>放療</u>。它可被採用:

- 作為特定癌症類型的主要治療方式
- 在其他治療前使癌症縮小
- 配合其他治療同時進行
- 在其他治療後防止癌症復發
- 當癌症不能治愈時,帮助一些人緩解病情或延長壽命

化療有時也用於治療非癌症的病症。

進行化療

您通常會以一個療程的形式進行化療,每個療程結束後會有幾天不用化療的休息日, 這稱為一個治療**週期**。您通常需要接受幾個週期的化療。您的治療週期數目將取決於 所患癌症的類型,腫瘤科醫生會告知您所需的治療週期數目。

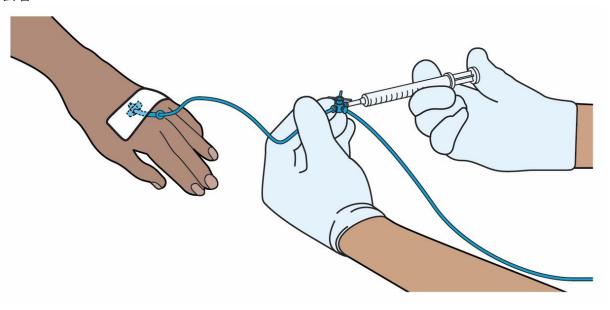
化療藥物可透過不同方式給藥。給藥方式包含:

- 靜脈注射
- 藥錠或膠囊
- 皮下注射
- 肌肉注射
- 注射至脊椎周邊液體
- 注射至特定區域,如膀胱
- 乳膏(針對某些皮膚癌)。

進行靜脈化療

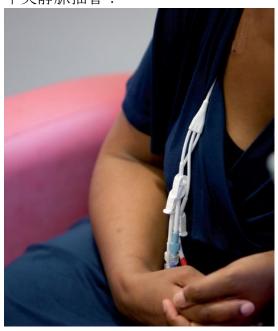
大多數化療藥物是通過靜脈注射的,通常會通過稱為套管的小導管注入。護士會將套管插入您手背或手臂的靜脈中,然後將套管與含有化療藥物的液體袋或注射器相連,而套管會在您回家前取出。

套管:



化療也能通過手臂或胸部的導管進行,在您手臂上的導管稱為<u>體側中央靜脈導管</u> (PICC line)。而您胸前的導管稱為<u>中央靜脈插管</u>。導管會在整個治療過程中留在相應位置。如有需要,護士會告知您相關事宜。

中央靜脈插管:



體側中央靜脈導管:



許多人會擔心化療很痛苦,或是他們會在化療時有不同的感受。靜脈化療應該不會痛的,因此若您感到疼痛,請告知您的護士。

有時, 可以使用便攜泵在家中進行化療。

藥錠化療

化療藥錠可以在家中服用,只有特定類型的化療是以藥錠形式進行。請謹記,藥錠仍有可能產生副作用。

瞭解您的治療

在治療前, 您的醫生、護士或藥劑師會向您解釋:

- 為甚麼需要治療
- 治療頻率是甚麽
- 可能的副作用
- 治療後可能會有的感受

在瞭解進行治療的原因以及您可能會有的感受前,您不應接受任何治療。您會被要求簽署一份表格,表示您同意接受放射治療並瞭解可能的副作用。這稱為同意書。

屆時,最好有一位會說您的語言和英語的人與您同行。醫院可能會有口譯員,但如有 需要,請提前告知。

許多人會擔心接受化療。向醫生、護士或藥劑師諮詢任何有關治療的問題有助減輕您的擔憂。

治療之前的檢查

開始治療之前您可能需要接受某些檢查。這有助於醫生確認您的身體狀況足夠好,能 承受治療。檢查通常包含血液檢驗,也可能會進行尿檢或者心臟檢查。有時候,您可 能需要進行 X 光檢查或掃描,以及測量您的身高體重。女性可能也會需要驗孕。

在每次治療前,您可能需要進行血液檢查。血液檢驗可能會被安排在您接受治療的當天,或者一兩天前。您的醫生或護士會查看您的血液檢驗結果,並詢問上一次治療後您感覺如何。

我將在何處接受治療?

您通常會在門診或醫院病房接受治療。有時候,您可以在家中接受治療。您可以和您的醫生、護士或藥劑師商量有關於接受治療的地點,最重要的是確保接受治療的地點是最安全的。您可能需要出門接受治療。若您在前往醫院或交通費用方面需要幫助,請告知您的護士。

治療需要多長時間?

您可以作為「日間病患」進行靜脈化療。這意味著您可以不需要過夜,治療後可以直接回家。治療可能需要半個小時到幾小時。有些人可能需要短時間住院。

您的療程通常會持續幾個月, 這將取決於您所患的癌症類型。

治療方案變更

醫生將透過測試查看治療方案在您身上的效果。有時,為了讓您的身體有時間恢復,您的治療可能會被延後或者變更。您的醫生會就這方面與您溝通。

副作用

化療藥物可能會引發令您不適的<u>副作用</u>,因為化療藥物會對體內的健康細胞產生影響。治療結束後,有些副作用會逐漸消失,但是有些會持續更長時間。醫生、護士或藥劑師會告知您所有可能出現的副作用,

而不同藥物會引發不同的副作用。有些人會出現很少的副作用,但有些人卻會有很多。

我們將在此對最為常見的副作用進行描述。您不大可能出現所有這些副作用。若您出現了清單中沒有提到的副作用,或者您對副作用有任何疑問,請詢問您的醫生、護士或藥劑師。

護士會給您一些電話號碼,讓您在感到不適或需要建議時致電醫院,您可以在白天或者晚上的任何時間撥打。將這些號碼保存在您的手機上或記在安全的地方。

感染

化療會減少您血液中的<u>白細胞</u>數量,這稱為嗜中性白血球減少癥,這病症會增加您受感染的可能性。

遇到下列情況時, 請立即使用您留存的電話號碼聯絡醫院:

- 您的體溫超過 37.5°C (99.5°F)
- 您突然感到不適,即使體溫正常
- 您有受感染的症狀,如:
 - o 感覺發熱或發冷
 - o 感覺發抖
 - 。 喉嚨痛
 - o 咳嗽
 - o 腹瀉
 - o 大量排尿。

您的白血球數量通常會在下一次治療之前恢復正常水準。在接受下一次化療前,您需要進行血液檢驗。如果您的白血球數量依然很低,您的醫生可能會將您的治療延後一小段時間。

有時候,您可能會接受一種名為 G-CSF 的注射藥物來幫助您的骨髓製造更多的白細胞。

貧血

化療會導致您血液中的<u>紅血球</u>數量減少,這會導致您感到疲勞或呼吸不暢。如您有這樣的感覺,請告知醫生或護士。您可能需要額外補充紅血球(輸血)。

瘀傷和出血

化療會導致血液中的<u>血小板</u>數量減少,而血小板是幫助血液凝結的細胞。若您有瘀傷或出血,請告知您的醫生或護士。其中包括流鼻血、牙齦出血以及皮膚上的血斑點或皮疹。有些人需要額外補充血小板。

疲勞

感覺很疲倦是一種常見的副作用,在治療後期會變得愈發嚴重,在治療結束後會持續 一段時間,請盡可能多進行休息。透過溫和的運動(短途散步等)也會有所幫助。若 您感覺睏倦,切勿駕車或操作機械設備。

感覺噁心或想吐

您接受化療後也許會感覺到噁心。醫生可能會給您一些可幫助您舒緩不適的抗噁心藥。您要嚴格按照醫生、護士或藥劑師的囑咐服藥。若您仍然感覺到噁心,請盡快 聯絡醫院。他們會為您提供建議並將藥物更換成對您更有效的藥物。

便秘

化療會引起<u>便秘</u>,多進食流質食品與高纖維食品,同時進行一些溫和的運動對減輕便 秘有所幫助。若依然便秘,您可能需要服用一些瀉藥。醫生會給您開具瀉藥。

腹瀉

化療也會引起<u>腹瀉</u>。醫生或護士會告知您,在治療過程中有可能會出現腹瀉。他們也會告訴您,當您出現這種狀況時,需要何時與醫院取得聯絡。有些藥物可以幫助緩解腹瀉。如果出現腹瀉,應飲用大量液體。

口腔潰瘍

您的口腔可能會疼痛或乾燥,或者您可能會注意到小的潰瘍。大量進食流質食品,並用軟毛牙刷清潔牙齒會有所幫助。

儘量避免進食過燙或辛辣的食物,這些食物會刺激您的口腔。若覺得口腔疼痛,請告知醫生或護士。他們會檢查是否感染,並可能處方漱口水或藥物來幫您緩解不適。

食欲不振

有些人會食欲不振,這種情況可能持續幾天或更長時間。若覺得自己吃不夠或體重減輕,請告知醫生或護士,他們會推薦一些方法來增加您的食欲並保持健康體重。

口味變化

您可能會發現東西吃起來味道不一樣了。有些人可能會覺得嘴裡有奇怪的味道。吃點不同風味的無糖甜食或薄荷糖可能會有幫助。治療結束後通常會恢復到正常的味覺。

對神經的影響

有些化療藥物會損害身體部份神經,並導致出現麻木、刺痛或疼痛等癥狀。通常是手 指或腳趾會出現這種感覺。若出現此種情況,請告知醫生。治療結束後,通常就會有 所改善。對有些人而言,持續時間會長些。

掉髮

很多人覺得這是令人沮喪的副作用。並非所有化療藥物都會導致掉髮。有些藥物會讓 您掉一些頭髮,而其他藥物可能會讓頭髮掉光。這種情況也包括身體其他部份的毛

髮。醫生或護士會向您解釋可能會發生的事情,他們也會就如何照管好頭髮和頭皮給出建議。

通常是在開始治療後2到3週開始掉髮。有時治療幾天內也會發生這種情況。結束治療幾個月後,頭髮通常會再長出來。您也可以查詢一下有關於戴假髮的事宜。

有些人會使用所謂的頭皮冷卻物質或「冷帽」來緩解脫髮,這在治療期間用以降低頭 皮溫度。並不是所有人都能適合食用頭皮冷卻法,您可以諮詢護士此種方法對您是否 有用。

重要的是,如果您感覺不適或出現任何嚴重副作用,即使本資訊中並未提及,您都應該立即讓您的醫生知道。

其他重要資訊

血塊

癌症和化療都會增加出現血塊的機會率。血液凝塊會引發疼痛、發紅、腫脹、呼吸急促和胸痛。若您出現任何這些症狀,請立即與醫生聯絡。血液凝塊比較嚴重,但您的醫生可以使用藥物來應對。您的醫生或護士可以給您提供更多的資訊。

其他藥物

化療時服用某些藥物可能會影響治療或有害健康,這包括在商店或藥劑師那所購買的藥物。請告知您的醫生您正在服用的任何藥物,包括維他命、草藥和輔助療法。

生育能力

治療可能會影響您懷孕或孕育後代的能力,若您擔心這一點,可在治療前與醫生或護士進行溝通。

避孕

治療期間醫生會建議您不要懷孕或孕育後代,因為化療可能會傷害還在成長發育中的嬰兒。在您治療期間採取避孕措施非常重要。

性生活

若您在接受化療後的幾天內發生性行為,請使用避孕套,以保護您的伴侶免受化療藥物的影響。若您擔心這一點,可以與醫生或護士溝通。

母乳餵養

治療期間請勿餵母乳。這是因為嬰兒會藉由母乳攝入化療藥物。

醫療和牙科治療

若您因為癌症以外的原因需要去醫院,請務必要告知醫生和護士您正在接受化療。您 應該告訴他們您的腫瘤科醫生的名字,以便他們向改名醫生尋求建議。

若您需要牙科治療,可以與醫生或護士進行溝通。務必要告知牙科醫生您正在接受化療。

旅行

若您打算在治療期間去國外旅行,可以與醫生或護士進行溝通。您可能無法使用某些疫苗,他們還會替您檢查您乘坐飛機是否安全。

記住在太陽底下活動時要格外小心,一些化療藥物可能使您的皮膚更容易灼傷。

化療期間的工作

化療期間您可能需要暫停工作, 部份人因為經濟的原因可能需要繼續工作。醫生或護士可以給您提供建議, 並告訴您可用獲得哪些援助。我們可以提供有關於工作和癌症的資訊, 若您無法工作, 我們可以提供有關申請救濟金的資訊。

麥克米倫(Macmillan)如何給予幫助

麥克米倫(Macmillan) 致力於幫助您和您的家人。您可透過下列方式獲得援助:

- **麥克米倫(Macmillan)援助熱線 (0808 808 00 00)**。我們有口譯員,所以您可以使用您的語言與我們溝通。您只需用英語告訴我們您希望使用甚麼語言即可。我們可以回答有關醫療的問題、提供有關資金援助的資訊或與您討論您的感受。我們的電話接聽時間是週一至週五上午 9 時至晚上 8 時。
- **麥克米倫(Macmillan)網站 (macmillan.org.uk)**。我們的網站有很多有關癌症和癌症病患生活的英文資訊。欲瞭解其他語言的更多資訊,請瀏覽 macmillan.org.uk/translations。
- 資訊中心。您可透過資訊中心向癌症援助專家諮詢並獲得書面資訊。瀏覽 macmillan.org.uk/informationcentres 尋找離您最近的諮詢中心或致電我們。您的醫院可能設有資訊中心。
- **當地援助小組** 瀏覽 macmillan.org.uk/supportgroups 尋找離您最近的當地援助小組或致電我們。
- 麥克米倫(Macmillan)網路社群 前往 macmillan.org.uk/community,您可以與處境相似的人溝通。

辭彙表

單詞 (繁體中文)	In English	英文發音 (英文單 詞的譯音)	意思
良性腫瘤	Benign	貝寧	體內的一腫塊,不是癌症,不 會擴散到身體的其他部位。
細胞	Cells	塞爾斯	構成身體器官和組織的微小結構單元。

中央靜脈插管	Central line	森翠爾·賴	一根插入您胸部靜脈的細導 管,用於化療,一端留在身體 外。
便秘	Constipation	康司替配向	排便困難或痛苦。也可能排便 沒有往常頻繁,或大便較硬, 成塊狀。
治癒	Cured	酷瑞的	當體內沒有癌細胞時。
腹瀉	Diarrhoea	帶耳瑞亞	大便較軟或成水狀。您可能需 要比平時更頻繁或非常急需如 廁。也可能伴有腹痛。
淋巴系統	Lymphatic system	淋發替可・西司特	整個身體的血管和腺體網路, 幫助對抗感染。
惡性腫瘤	Malignant	馬力格能特	身體的一個腫塊,是癌症,會 擴散到身體的各個部位。
體側中央靜脈導管:	PICC line	批挨西西·賴	一根插入您手臂靜脈的細導 管,用於化療,一端留在身體 外。
血小板	Platelets	佩來特司	幫助血液凝結的細胞。
放療	Radiotherapy	雷迪歐特拉皮	使用高能 x 射線殺死癌細胞的 癌症治療方法。
紅血球	Red blood cells	瑞德・布勒德・塞 爾斯	血液中攜帶氧氣到身體內各個部位的細胞。
副作用	Side effects	塞的・額費可特司	癌症治療中的不良影響,如掉 髮、疼痛、噁心或疲勞。治療 結束後,大多數副作用會消 失。
手術治療	Surgery	舌折瑞	進行手術。
腫瘤	Tumour	兔模爾	以異常方式生長的細胞群。異 常細胞不斷繁殖並形成腫塊。
白血球	White blood cells	歪特·布勒德·塞 爾斯	血液中對抗感染的細胞。

更多繁體中文版資訊

關於以下主題的更多繁體中文資訊:

癌症類型

- 乳癌
- 大腸癌
- 肺癌
- 前列腺癌

治療

- 化療
- 放療
- 手術治療

應對癌症

- 若您被診斷患有癌症-快速指南
- 申請福利救濟
- 飲食問題與癌症
- 生命的終點
- 經濟援助一福利救濟金
- 經濟援助一財務協助
- 健康飲食
- 疲憊 (疲勞) 與癌症
- 癌症治療的副作用
- 您可以做些甚麼來幫助自己

欲查看該資訊,請前往 macmillan.org.uk/translations

以繁體中文與我們溝通

您可撥打麥克米倫免費電話 **0808 808 00 00** 透過口譯員用您的母語與我們交談。您可以同我們討論您的憂慮和醫療問題。您只需用英語告訴我們您希望使用甚麼語言即可。

我們的辦公時間是週一至週五上午9時至晚上8時。

參考文獻與致謝

所有這些資料均由麥克米倫癌症援助機構的資訊編製團隊撰寫和編輯。

本概況表中的資訊是基於麥克米倫手冊**《瞭解化療》**內容的。我們可以將宣傳冊發送給您,但完整手冊只有英語版本。

該內容已由相關專家審核,並獲得我們的首席醫學編輯、麥克米倫顧問腫瘤學醫師 Tim Iveson 博士的批准。

特別感謝藥劑師 Catherine Loughran, 臨床護理專家 Claire Haslop, 化療臨床護理專家 Jenny King, ,麥克米倫資深血液學臨床護理專家 Natalie Singer, 臨床腫瘤學家 Robin Jones, 麥克米倫化療護士顧問 Wendy Anderson。

同時感謝審閱本資訊的癌症病患。

我們所有的資料都依據可獲得的最佳證據。關於我們所用資源的更多資訊,請透過bookletfeedback@macmillan.org.uk 聯絡我們。



內容審閱日期:2018年9月

計劃下次審閱:2020年

我們盡最大努力確保我們提供的資訊準確無誤,但其並不能反映最新的醫學研究情況,因為這是不斷變化的。如果您擔心您的健康狀況,則應諮詢您的醫生。麥克米倫(Macmillan)對由於此資訊或第三方資訊(如我們所連結到的網站上的資訊)的任何不準確所造成的任何損失或損害不承擔任何責任。

我們希望這些資訊對您有用。如果您有任何問題,我們可透過您的語言在電話中提供資訊和支援。我們的服務是免費的。您只需致電: **0808 808 00 00** (週一至週五,上午9時至晚上8時),並以英語說出您選定的語言。

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MAC12464_Chinese (Traditional)



Chemotherapy: English

Chemotherapy

This information is about chemotherapy.

Any words that are underlined are explained in the word list at the end.

Many people with cancer will have chemotherapy as part of their treatment.

Some people also have other treatments such as targeted therapies, <u>radiotherapy</u> or <u>surgery</u>. The doctors at the hospital will talk to you about your treatment. We also have information in [language] about these treatments.

If you have any questions, ask your doctor, nurse or pharmacist at the hospital where you are having your treatment.

If you have any questions or want someone to talk to, you can call Macmillan Cancer Support on **0808 808 00 00**, Monday to Friday, 9am to 8pm. We have interpreters, so you can speak to us in your own language. When you call us, please tell us in English which language you need (say "xxxxx").

We have more information in [language] about different types of cancer, treatments and living with cancer. Visit **macmillan.org.uk/translations** or call us on **0808 808 00 00**.

In this fact sheet:

- What is cancer?
- What is chemotherapy?
- When is chemotherapy used?
- Having chemotherapy
- Understanding your treatment
- Tests before treatment
- Where will you have treatment?
- How long does treatment take?
- Changes to your treatment plan
- Side effects
- Other important information
- How Macmillan can help
- Glossary
- More information in [language]

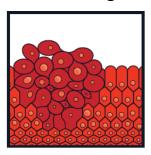
What is cancer?

Cancer starts in the <u>cells</u> in our body. <u>Cells</u> are the tiny building blocks that make up the organs and tissues of our body. Usually, these cells divide to make new cells in a controlled way. This is how our bodies grow, heal and repair. Sometimes, this goes wrong and the cell becomes abnormal. The abnormal cell keeps dividing and making more and more abnormal cells. These cells form a lump called a tumour.

Normal cells



Cells forming a tumour



Not all lumps are cancer. A lump that is not cancer is called <u>benign</u>. It cannot spread to anywhere else in the body. A lump that is cancer is called <u>malignant</u>. It can grow into other areas of the body.

Cancer cells sometimes break away from the first cancer and travel through the blood or <u>lymphatic system</u> to other parts of the body. Cancer cells that spread and develop into a tumour somewhere else in the body are called a secondary cancer.

What is chemotherapy?

Chemotherapy drugs destroy cancer cells. The drugs are carried around the body in the blood. The drugs damage cancer cells so that they die. Healthy cells can also be damaged but they will usually repair themselves.

You may have one or more drugs during your treatment.

When is chemotherapy used?

Chemotherapy can be used on its own or with other types of treatment such as targeted therapies, <u>surgery</u> or <u>radiotherapy</u>. It can be given:

- as the main treatment for certain types of cancer
- before other treatments, to make the cancer smaller
- at the same time as other treatments
- after other treatments, to try to stop the cancer coming back
- to help someone feel better or live longer, if the cancer cannot be cured.

Chemotherapy is also sometimes used to treat conditions that are not cancer.

Having chemotherapy

You will usually have your chemotherapy as a course of treatment sessions. Each session is followed by some rest days when you have no chemotherapy. This is called a **cycle** of treatment. You will usually have a few cycles of chemotherapy. How many you have depends on what type of cancer you have. Your cancer doctor will talk to you about how many cycles you need.

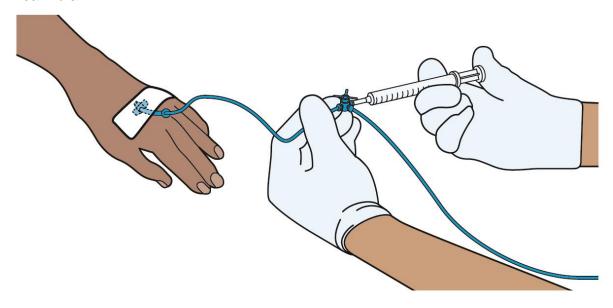
Chemotherapy drugs can be given in different ways. They can be given:

- into a vein
- as tablets or capsules
- by injection under the skin
- by injection into a muscle
- by injection into the fluid around the spine
- into an area such as the bladder
- as a cream for some skin cancers.

Having chemotherapy into a vein

Most chemotherapy drugs are given into a vein. They are usually given through a small tube called a cannula. The nurse will put the cannula into a vein in your hand or arm. The nurse will then connect the cannula to either a fluid bag or a syringe with chemotherapy inside. The cannula will be taken out before you go home.

A cannula:



Chemotherapy can also be given through a tube in your arm or chest. A line in your arm is called a <u>PICC line</u>. A line in your chest is called a <u>central line</u>. The line stays in during your treatment. Your nurse will talk to you about this if you need one.

A central line:



A PICC line:



Many people worry that chemotherapy will be painful, or that they will feel different when it is being given. Having chemotherapy into a vein should not be painful, so tell your nurse straight away if it hurts.

Sometimes, a portable pump can be used to give chemotherapy at home.

Having chemotherapy as tablets

Chemotherapy tablets can be taken at home. Only some types of chemotherapy are tablets. It is important to remember that they can still have side effects.

Understanding your treatment

Before you have treatment, your doctor, nurse or pharmacist will explain:

- · why you need it
- how often you will have it
- the possible side effects
- how you may feel after the treatment.

No treatment should be given unless you understand why you are having it and how you may feel. You will be asked to sign a form to show that you agree to the treatment and understand its possible side effects. This is called a consent form.

It is a good idea to take someone with you who speaks [language] and English. The hospital may have interpreters, but try to ask for one in advance if you would like one.

Many people are worried at the thought of having chemotherapy. It can help to ask your doctor, nurse or pharmacist any questions you have about your treatment.

Tests before treatment

You may need some tests before starting your treatment. These help the doctors check that you are well enough to have your treatment. These usually include blood tests and maybe tests on your urine or heart. Sometimes, you may need to have x-rays or scans. You will also have your height and weight measured. Women may be asked to take a pregnancy test.

Before each treatment, you may have a blood test. This may be on the day of your treatment or a day or two before. Your doctor or nurse will check your blood results and ask you how you have felt since your last treatment.

Where will you have treatment?

You usually have treatment in a day unit or a hospital ward. Sometimes you can have it at home. You can talk to your doctor, nurse or pharmacist about where you will have treatment. It is important to make sure that this is the safest place for you to have it. You may need to travel for your treatment. Talk to your nurse if you need help getting to hospital or if you need help with the cost of travelling there.

How long does treatment take?

You can usually have chemotherapy into a vein as a 'day patient'. This means you do not need to stay overnight and you can go home after the treatment. Treatment may take from half an hour to a few hours. Some people may need to stay in hospital for a short time.

Your course of treatment will usually last for a few months. This will depend on what type of cancer you have.

Changes to your treatment plan

Your doctors use tests to check the effect of the treatment on your body. Sometimes your treatment may need to be delayed or changed to give your body time to recover. Your doctor will talk to you about this.

Side effects

Chemotherapy drugs can cause <u>side effects</u> that make you feel unwell. This is because they affect healthy cells in your body. Most side effects will improve after treatment ends, but some can last longer. Your doctor, nurse or pharmacist will talk to you about any side effects you may get.

Different drugs cause different side effects. Some people have very few side effects while others may have more.

We describe the most common side effects here. It is unlikely that you will get all of these. If you notice any side effects which are not listed here, or if you have any questions about side effects, ask your doctor, nurse or pharmacist.

Your nurse will give you telephone numbers so you can call the hospital if you feel unwell or need advice. You can call any time of the day or night. Save these numbers in your phone or keep them somewhere safe.

Infection

Chemotherapy can reduce the number of white blood cells in your blood. This is called neutropenia. This makes you more likely to get an infection.

Contact the hospital straight away on the contact number you've been given if:

- your temperature goes over 37.5°C (99.5°F)
- you suddenly feel unwell, even with a normal temperature
- you have symptoms of an infection, such as:
 - feeling hot or cold
 - feeling shaky
 - a sore throat
 - o a cough
 - diarrhoea
 - o needing to pee a lot.

Your white blood cells usually return to normal before your next treatment. You will have a blood test before having more chemotherapy. If your white blood cells are still low, your doctor may delay your treatment for a short time.

Sometimes you may have injections of a drug called G-CSF to help your bone marrow make more white blood cells.

Anaemia

Chemotherapy can reduce the number of <u>red blood cells</u> in your blood. This can make you feel tired and breathless. Tell your doctor or nurse if you feel like this. You may need to be given extra red blood cells (blood transfusion).

Bruising and bleeding

Chemotherapy can reduce the number of <u>platelets</u> in your blood. Platelets are cells that help the blood to clot. Tell your doctor or nurse if you have any bruising or bleeding. This includes nosebleeds, bleeding gums, blood spots or rashes on the skin. Some people may need to be given extra platelets.

Tiredness

Feeling very tired is a common side effect. It is often worse towards the end of treatment. It can last for some time after your treatment finishes. Try to get as much rest as you need. It helps to also do some gentle exercise such as short walks. If you feel sleepy, do not drive or operate machines.

Feeling sick or being sick

You might feel sick if you have chemotherapy. Your doctor may give you antisickness drugs (medicine) to help. Take them exactly as your doctor, nurse or pharmacist explains to you. If you still feel sick, contact the hospital as soon as possible. They can give you advice and change the medicine to one that works better for you.

Constipation

Chemotherapy can cause <u>constipation</u>. Drinking lots of fluids, eating foods with lots of fibre, and taking gentle exercise can help. If you still have constipation, you may need to take a medicine called a laxative. Your doctor can give these to you.

Diarrhoea

Chemotherapy can also cause <u>diarrhoea</u>. Your doctor or nurse will tell you if this might happen with your treatment. They will also tell you when you should contact the hospital if this happens. There are medicines that can help. It is important to drink plenty of fluids if you have diarrhoea.

Sore mouth

Your mouth may become sore or dry, or you may notice small ulcers. Drinking lots of fluids and cleaning your teeth gently with a soft toothbrush can help.

Try to avoid hot and spicy foods that can irritate your mouth. Tell your doctor or nurse if your mouth feels sore. They will check for infection and may give you a mouthwash or medicine to help.

Loss of appetite

Some people lose their appetite. This may last a few days or longer. If you think you are not eating enough, or if you are losing weight, talk to your doctor or nurse. They can suggest ways to increase your appetite and keep to a healthy weight.

Taste changes

You may notice that food tastes different. Some people get a strange taste in their mouth. Sucking on flavoured sugar-free sweets or mints may help. Normal taste usually comes back after treatment finishes.

Effects on the nerves

Some chemotherapy drugs can damage some nerves in the body. This can cause numbness, tingling or pain. This feeling usually starts in the fingers and toes. Tell your doctor or nurse if this happens. This usually improves after treatment has finished. For some people, it can last longer.

Hair loss

Many people find this side effect very upsetting. Not all chemotherapy drugs make your hair fall out. Some drugs make some hair fall out. Others can make all of your hair fall out. This can include other body hair too. Your doctor or nurse will explain what might happen. They can also give you advice on how to look after your hair and scalp.

If your hair falls out, it usually happens 2 to 3 weeks after starting treatment. Sometimes it can happen within a few days. Hair usually grows back over a few months once you' finish treatment. You can also ask about getting a wig or hairpiece.

Some people may be able to reduce hair loss by using something called scalp cooling or a cold cap. This lowers the temperature of your scalp during treatment. Not everyone can have scalp cooling, but you can ask your nurse whether it would be useful for you.

It's important to let your doctor know straight away if you feel unwell or have any severe side effects, even if they're not mentioned here.

Other important information

Blood clots

Both cancer and chemotherapy can increase the chance of developing a blood clot. A blood clot can cause pain, redness, swelling, breathlessness and chest pain. Contact your doctor straight away if you have any of these symptoms. A blood clot is serious but your doctor can treat it with drugs. Your doctor or nurse can give you more information.

Other medicines

Some medicines can affect chemotherapy or be harmful when you are having it. This includes medicines you can buy in a shop or chemist. Tell your cancer doctor about any drugs you are taking, including vitamins, herbal drugs and complementary therapies.

Fertility

Your treatment may affect your ability to get pregnant or father a child. If you are worried about this, talk to your doctor or nurse before treatment starts.

Contraception

Your doctor will advise you not to become pregnant or father a child during treatment. The chemotherapy may harm a developing baby. It is important to use contraception during your treatment.

Sex

If you have sex within the first couple of days of having chemotherapy, you need to use a condom. This is to protect your partner from the chemotherapy drugs. Talk to your doctor or nurse if you are worried about this.

Breastfeeding

You should not breastfeed during treatment. This is because chemotherapy could be passed to a baby through breast milk.

Medical and dental treatment

If you need to go into hospital for any reason other than cancer, always tell the doctors and nurses that you are having chemotherapy. Tell them the name of your cancer doctor so they can ask for advice.

Talk to your cancer doctor or nurse if you need dental treatment. Always tell your dentist you are having chemotherapy.

Travel

Talk to your doctor or nurse if you are planning to travel abroad during treatment. You may not be able to have certain vaccines. They will also check if it is safe for you to fly.

Remember to take extra care in the sun. Some chemotherapy drugs can make your skin more likely to burn.

Working during chemotherapy

You may need to take time off work during chemotherapy. Some people need to keep working for financial reasons. Your doctor or nurse can give you advice and tell you about support that is available. We have information about work and cancer and about claiming benefits if you cannot work.

How Macmillan can help

Macmillan is here to help you and your family. You can get support from:

- The Macmillan Support Line (0808 808 00 00). We have interpreters, so you can speak to us in your language. Just tell us, in English, the language you want to use. We can answer medical questions, give you information about financial support, or talk to you about your feelings. The phone line is open Monday to Friday, 9am to 8pm.
- The Macmillan website (macmillan.org.uk). Our site has lots of English information about cancer and living with cancer. There is more information in other languages at macmillan.org.uk/translations
- Information centres. At an information centre, you can talk to a cancer support specialist and get written information. Find your nearest centre at macmillan.org.uk/informationcentres or call us. Your hospital might have a centre.
- Local support groups Find a group near you at macmillan.org.uk/supportgroups or call us.
- Macmillan Online Community You can talk to other people in similar situations at macmillan.org.uk/community

Word list

Word (target language)	In English	How to say in English (transliteration of English word)	Meaning
	Benign		A lump in the body that is not cancer and cannot spread to anywhere else in the body.
	Cells		The tiny building blocks that make up the organs and tissues of our body.
	Central line		A thin tube that goes into a vein in your chest. It is used to give chemotherapy. One end stays outside the body.
	Constipation		When you find it difficult or painful to poo. You might not be going as often as usual, or your poo might be hard and

	lumpy.
Cured	When there are no cancer cells left in the body.
Diarrhoea	When you have soft or watery poo. You might need the toilet more than usual or very urgently. You may also have tummy pain.
Lymphatic system	A network of vessels and glands throughout the body that helps to fight infection.
Malignant	A lump in the body that is cancer and can spread around the body.
PICC line	A thin tube that goes into a vein in your arm. It is used to give chemotherapy. One end stays outside the body.
Platelets	Cells that help the blood to clot.
Radiotherapy	A cancer treatment that uses high-energy x-rays to kill cancer cells.
Red blood cells	Cells in our blood that carry oxygen around the body.
Side effects	Unwanted effects of cancer treatment. For example, hair loss, feeling sick or tiredness. Most side effects go away after treatment finishes.
Surgery	Having an operation.
Tumour	A group of cells that are growing in an abnormal way. The abnormal cells keep multiplying and form a lump.
White blood cells	Cells in our blood that fight infection.

More information in [language]

We have information in [language] about these topics:

Types of cancer	Coping with cancer	
Breast cancer	If you're diagnosed with cancer – A quick guide	
Large bowel cancerLung cancer	Claiming benefits	
Prostate cancer	Eating problems and cancer	
Treatments	End of life	
Treatments	Financial support – benefits	
 Chemotherapy 	Financial support – help with costs	
 Radiotherapy 	Healthy eating	
Surgery	Tiredness (fatigue) and cancer	
	Side effects of cancer treatment	
	What you can do to help yourself	

To see this information, go to macmillan.org.uk/translations

Speak to us in [language]

You can call Macmillan free on **0808 808 00 00** and speak to us in your own language through an interpreter. You can talk to us about your worries and medical questions. Just tell us, in English, the language you want to use.

We are open Monday to Friday, 9am to 8pm.

References and thanks

All of this information has been written and edited by Macmillan Cancer Support's Cancer Information Development team.

The information in this fact sheet is based on the Macmillan booklet **Understanding chemotherapy**. We can send you a copy, but the full booklet is only available in English.

This content has been reviewed by relevant experts and approved by our Chief Medical Editor, Dr Tim Iveson, Macmillan Consultant Medical Oncologist.

With thanks to Catherine Loughran, Pharmacist; Claire Haslop, Clinical Nurse Specialist; Jenny King, Chemotherapy Clinical Nurse Specialist; Natalie Singer, Macmillan Advanced Haematology Clinical Nurse Specialist; Robin Jones, Clinical Oncologist; Wendy Anderson, Macmillan Nurse Consultant Chemotherapy.

Thanks also to the people affected by cancer who reviewed this content.

All our information is based on the best evidence available. For more information about the sources we use, please contact us at bookletfeedback@macmillan.org.uk



Content reviewed: September

2018

Next planned review: 2020

We make every effort to ensure that the information we provide is accurate but it should not be relied upon to reflect the current state of medical research, which is constantly changing. If you are concerned about your health, you should consult your doctor. Macmillan cannot accept liability for any loss or damage resulting from any inaccuracy in this information or third-party information such as information on websites to which we link.

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