Treating Chemotherapy Complications

(NAPSA)—Enduring chemotherapy treatment for cancer is hard enough. Unfortunately, many patients are not prepared for the potential complications that may occur when receiving medications called anthracyclines.

Anthracyclines are a class of chemotherapy drugs that have been widely used in cancer for over 40 years. In fact, more than 500,000 doses of anthracyclines are administered intravenously every year. Anthracyclines are used to treat patients with many types of cancer, including the majority of patients with breast cancer.

Under rare circumstances, anthracyclines can leak out of the vein or central line into the patient's tissue—a serious complication known as extravasation. Anthracycline extravasations cause extreme damage to skin and tissue if left untreated.

Signs of an extravasation typically include burning, followed by pain and reddening of the skin. The skin blisters and develops into a thick, leathery scab, and the underlying tissue can also become damaged. In severe circumstances, surgery is required and nerve damage can contribute to long-term disability. Extravasations can delay chemotherapy, leading some patients to worry that their cancer may worsen.

While anthracycline extravasations are almost always preventable, patients receiving anthracycline treatment should talk to their medical team about extravasation risk factors. Your infusion nurse will be your greatest advocate in preventing anthracycline extravasation.

"If an anthracycline extravasation does occur, patients should speak to their medical team about Totect®," says Douglas Reintgen, M.D., surgical oncologist at Lakeland Regional Cancer Center in Lakeland, Fla. "If you or your loved one is scheduled to receive anthracycline therapy, you should confirm your hospital or infusion center has a Totect kit available. Totect is a treatment you always want to have available, but never want to use."

Totect is the only antidote approved by the U.S. Food and Drug Administration as an emergency treatment kit for anthracycline extravasation. For more information, visit www.totect.com.

Contraindications: *None known Warnings: Pregnancy Category D Precautions: Totect® is a cytotoxic drug. When administered to patients receiving anthracycline containing cytotoxic therapy, additive cytotoxicity may occur. Treatment with Totect® is associated with leukopenia, neutropenia and thrombocytopenia. Hematological monitoring should be performed. Reversible elevations of liver enzymes may occur with dexrazoxane. Patients with Moderate or Severe Renal Insufficiency: Greater exposure to dexrazoxane may occur in patients with compromised renal function. The Totect® dose should be reduced by 50% in patients with creatinine clearance values <40mL/min. Dimethyl sulfoxide (DMSO) should not be used in patients who are receiving dexrazoxane to treat anthracycline-induced extravasation. Laboratory Tests: Blood counts and liver enzymes should be monitored. Adverse Reactions: Dexrazoxane has been studied previously as a cytotoxic agent. Adverse reactions of nausea/vomiting, diarrhea, stomatitis, bone marrow suppression (neutropenia, thrombocytopenia), altered liver function (increased AST/ALT), and infusion site burning have been observed. These adverse reactions have been reversible.*