

COMMON SIDE EFFECTS OF MULTIPLE MYELOMA TREATMENTS

TIPS FOR MANAGEMENT



MMRFSM
Multiple Myeloma
Research Foundation

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TIPS FOR MANAGING SOME COMMON SIDE EFFECTS OF MULTIPLE MYELOMA TREATMENT

The treatment of multiple myeloma is sometimes associated with side effects. These side effects vary according to specific treatments and to how much discomfort they cause. Most side effects are mild, but some can be moderate or severe and occasionally, a side effect may cause other serious problems, so it is important to inform your doctor or nurse of all side effects. It is also important to know that not everyone has the same side effects and that different people can be affected by the same side effects in different ways. Whether or not you experience a side effect depends on many factors, including your age, your overall health, and your treatment dose/schedule.

Many side effects can now be prevented, and prevention is much more effective than trying to control the side effects once they begin to occur. Sometimes, the best way to manage a side effect is to stop treatment with the drug or reduce the dose until the side effect resolves.

This brochure gives you tips on how to prevent or manage some of the most common side effects of treatment for multiple myeloma. Be sure to talk to your doctor or another member of your health care team if you have any signs or symptoms of side effects so that you can feel as comfortable as possible during treatment.

**TO LEARN MORE ABOUT
TREATMENT SIDE EFFECTS
AND OTHER ASPECTS OF
MULTIPLE MYELOMA,
VISIT THE MULTIPLE MYELOMA
RESEARCH FOUNDATION AT
WWW.MULTIPLEMYELOMA.ORG.**

Side Effect: Peripheral Neuropathy

Nerve damage that causes numbness and pain in the hands and feet

You are at greatest risk if you have been treated with:

- Velcade, alone or in combination with another drug
- Thalomid (especially when used in combination with dexamethasone or certain chemotherapy drugs, such as doxorubicin)

What your healthcare provider may do:

- Prescribe a drug to alleviate pain and other symptoms (some examples: gabapentin [Neurontin], pregabalin [Lyrica], duloxetine [Cymbalta], or amitriptyline [Elavil])
- Tell you to take a combination of vitamins (such as multi B vitamins, folic acid, and vitamin E)
- Tell you to take a combination of amino acids
- Tell you to use a moisturizing cream containing cocoa butter, spearmint, and menthol on the affected area
- Tell you to take magnesium or potassium supplements to alleviate cramping

What you can do:

- Walk and take part in other activities
- Do stretching and strengthening exercises every day
- Avoid tight shoes and socks with elastic
- Take safety precautions (the decreased sensation may increase the risk of injury)
- Avoid extreme hot and cold temperatures
- Massage area twice daily

Side Effect: Deep Vein Thrombosis (DVT)

Blood clot, usually in the lower leg

You are at greatest risk if you have been treated with:

- Revlimid, alone or in combination with another drug
- Thalomid, alone or with another drug

Or, if you:

- Have a personal history or family history of blood clots
- Have had recent surgery
- Have had prolonged bed rest or inactivity
- Take estrogen
- Are older
- Are overweight
- Are smokers

What your healthcare provider may do:

- Prescribe a blood thinner, also known as an anticoagulant, to prevent blood clots from forming (some examples of blood thinners: aspirin, Coumadin [warfarin], or heparin)
- Tell you to wear compression stockings

What you can do:

- Avoid long periods of immobility or inactivity
- Walk or move around as often as possible throughout the day
- If on an airplane, do foot exercises often and walk whenever possible

Call your doctor immediately if you have one or more of these signs of DVT:

- Warm, painful, or tender area
- Reddened or discolored area
- Hardened area
- Swollen area on leg or arm
- Difficulty breathing or pain in the chest

Side Effect: Thrombocytopenia

Low number of platelets, the blood cells that help blood to clot

You are at greatest risk if you have been treated with:

- Revlimid, alone or in combination with another drug
- Velcade, alone or in combination with another drug
- Melphalan, alone or in combination with another drug
- Cytosan
- Doxil

What your healthcare provider may do:

Treat you with a platelet transfusion, if thrombocytopenia causes bleeding

What you can do:

- Avoid activities that may cause bruising
- Tell your doctor or nurse if you have a rash, many black and blue marks, or a nosebleed

Side Effect: Neutropenia

Low number of neutrophils, a type of white blood cell that helps fight infection

You are at greatest risk if you have been treated with:

- Revlimid, alone or in combination with another drug
- Velcade, alone or in combination with another drug
- Melphalan, alone or in combination with another drug
- Cytosan
- Doxil
- High-dose chemotherapy and stem cell transplantation

What your healthcare provider may do:

- Treat you with a colony-stimulating factor (G-CSF, Neupogen), which helps stimulate the growth of neutrophils
- Prescribe an antibiotic to treat infection caused by the neutropenia

What you can do:

Take steps to prevent infection—wash your hands frequently, avoid people and situations that increase the risk of infection, and take precautions to avoid injuries

Call your doctor immediately if you have signs of infection, which include:

- Fever (oral temperature over 100.5°F), OR chills, OR sweating
- Flu-like symptoms (body aches, general fatigue) with or without fever
- Cough, shortness of breath, painful breathing
- Sore throat or sores in your mouth
- Redness, pain, or swelling on any area of your skin
- Pus or drainage from any open cut or sore
- Pain or burning with urination

Side Effect: Anemia

Low number of red blood cells

You are at greatest risk if you have been treated with:

- Velcade, alone or in combination with another drug
- Melphalan, alone or in combination with another drug
- Cytosan
- Doxil
- Thalomid, alone or in combination with another drug

What your healthcare provider may do:

- Treat you with erythropoietin (Procrit or EPO), a drug that stimulates the growth of red cells
- Tell you to take an iron supplement or folic acid supplement
- Treat you with a blood transfusion

What you can do:

Eat foods high in iron (examples: green, leafy vegetables; dried fruit; seafood, chicken, and beef; eggs; and nuts)

Call your doctor immediately if you have one or more of these signs of anemia:

- Dizziness
- Shortness of breath or difficulty breathing
- Rapid heartbeat, heart palpitations, or chest pain

Side Effect: Constipation

You are at greatest risk if you have been treated with:

- Revlimid, alone or in combination with another drug
- Velcade, alone or in combination with another drug
- Melphalan and prednisone
- Thalomid, alone or in combination with another drug
- Dexamethasone

What your healthcare provider may do:

- Tell you to take a stool softener regularly as soon as treatment starts (as prevention)
- Tell you to start a daily bowel regimen (stool softeners plus laxatives)

What you can do:

- Drink at least 8 glasses of water or other fluids throughout the day
- Eat foods high in fiber (some examples: fresh fruits and vegetables, whole grains)
- Walk, exercise, or be as active as possible
- Take your bowel regimen medications every day, not just when you feel constipated
- Tell your doctor or nurse if you have not had a normal bowel movement after 3 days

Side Effect: Nausea and/or Vomiting

You are at greatest risk if you have been treated with:

- Velcade, alone or in combination with another drug
- Melphalan and prednisone
- Cytosan
- Doxil

What your healthcare provider may do:

Prescribe an antiemetic (a drug that prevents nausea and vomiting)

What you can do:

- Take a prescribed antiemetic regularly as advised by your doctor (not only when you feel nauseated or after you have vomited)
- Eat several small meals, rather than 3 big meals, throughout the day
- Drink at least 8 glasses of fluids in small amounts throughout the day
- Avoid unpleasant odors (they can trigger nausea)
- Rest after eating, but don't lie flat
- Try relaxation techniques, such as muscle relaxation, deep breathing, or guided imagery

Call your doctor immediately if you:

- Have more than 3 episodes of vomiting per hour for at least 3 hours
- Notice blood in the material vomited
- Notice a coffee grounds appearance of the material vomited
- Are unable to take more than 8 cups of fluid or ice chips in 24 hours or are unable to take any solid foods for more than 2 days
- Cannot keep your medications down
- Become weak or dizzy

Side Effect: Diarrhea

You are at greatest risk if you have been treated with:

- Revlimid, alone or in combination with another drug
- Dexamethasone
- Velcade, alone or in combination with another drug
- Melphalan and prednisone
- High-dose chemotherapy and stem cell transplantation

What your healthcare provider may do:

- Prescribe an antidiarrheal medication or tell you to take an over-the-counter drug for diarrhea
- Tell you to take a fiber supplement

What you can do:

- Drink at least 8 glasses of fluid each day
- Avoid beverages with alcohol or caffeine
- Eat bland, low-fiber foods
- Eat easily digestible foods that are high in protein and potassium (some examples: eggs, baked potatoes, cooked cereals, bananas, pasta, apricots, crackers, smooth peanut butter)
- Eat 5-6 small meals rather than 3 large meals throughout the day
- Avoid foods that are very high in fat
- Avoid foods that can irritate the digestive tract (some examples: milk products, chocolate, dried fruits, beans, popcorn, spicy food)
- Add nutmeg to foods (it slows down the movement of materials through the intestines)

Call your doctor immediately if you:

- Have 6 or more loose bowel movements per day for more than 2 days in a row
- Notice blood in the stool, around the anal area, on the toilet paper, or in the toilet bowl
- Cannot urinate for at least 12 hours
- Have signs of a fever
- Lose 5 pounds or more after the diarrhea starts
- Have a swollen and/or painful abdomen
- Feel dizzy or lightheaded when moving to a standing position



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