







7 + 3 AND GO

Name of the regimen and cancer drugs

Your care team may refer to your treatment as 7 + 3 and GO. 7 + 3 and GO consists of 3 different anti-cancer therapies:

- 7: Cytarabine (sye-TARE-a-been): Cytosar™
- 3: Daunorubicin (daw-noe-ROO-bi-sin): Cerubidine™
- GO: Gemtuzumab ozogamicin (gem-TOO-zoo-mab oh-zog-a-MY-sin): Mylotarg™

Common uses

This regimen is most commonly used for acute myeloid leukemia (AML) but may be used for other diagnoses.

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.

This treatment is called induction therapy. This regimen is often administered while admitted to the hospital as an inpatient.

- ☐ Cytarabine IV daily given on days 1 7
- □ Daunorubicin IV daily given on days 1 3
- Gemtuzumab ozogamicin IV daily given on days 1, 4, and 7

Drug	Day 1	2	3	4	5	6	7	8	 14
Cytarabine									
Daunorubicin									
Gemtuzumab ozogamicin									

Other medications

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

	Instructions:
Anti-nausea 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:









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Other medications (continued)

	Instructions:
Medications to prevent side effects	You will receive your medications to prevent side effects just before your cancer treatment. You may get prescriptions for other medications to take at home, as below:
Medications to prevent allergic reactions	You will receive medications to prevent infusion related reactions prior to starting your cancer treatment.
Infection prevention	There is a risk of serious infections during treatment. You may receive medications to prevent infection in the hospital, and may also get prescriptions for medications to take at home for infection prevention, as below:
Blood product transfusions	You may receive blood transfusions while you are getting treatment for your cancer. These products are given to replace blood cells or blood products lost during the course of your cancer treatment. Your physician will decide if transfusions are needed based on certain laboratory results, such as hemoglobin, hematocrit, or platelets. If you have personal or religious beliefs that prohibit the receipt of blood product transfusions, please let your care team know before treatment begins.

Possible drug interactions

- 7 + 3 and GO 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 7 + 3 and GO 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	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. 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. Contact your care team if you experience any signs or symptoms of an infection such as: 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. Check with your care team before taking any medicine for a fever or chills.
Decreased platelet count and increased risk of bleeding	Your platelets should be monitored by a simple blood test. When they are low, you may bruise or bleed more easily than usual. Use caution to avoid bruises, cuts, or burns Blow your nose gently and do not pick your nose Brush your teeth gently with a soft toothbrush and maintain good oral hygiene When shaving use an electric razor instead of razor blades Use a nail file instead of a nail clippers Call your care team if you have bleeding that won't stop. Examples include: A bloody nose that bleeds for more than 5 minutes despite pressure A cut that continues to ooze despite pressure Gums that bleed a lot when you floss or brush
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Possible Side Effect	Management
Decreased platelet count and increased	Seek medical help right away if you have any severe headaches, blood in your urine or stool, coughing up blood, or bleeding that you cannot stop or lasts a long time.
risk of bleeding (continued)	You may need to take a break or "hold" your medication for medical or dental procedures. Talk to your care team or dentist before any scheduled procedures.
Decreased hemoglobin, part of the red blood cells that carry iron and oxygen	Your hemoglobin should be checked by a simple blood test. When your hemoglobin is low, you may notice that you get tired or fatigued more easily. Try to get 7 to 8 hours of sleep per night Avoid operating heavy machinery if you feel too tired Find a balance between "work" and "rest" Stay as active as possible, but know that it is okay to rest as needed, too You might notice that you are more pale than usual Let your care team know right away if you have: Shortness of breath Dizziness Fast or abnormal heartbeat
Nausea or vomiting	 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. Let your care team know if you have nausea or vomiting. Your care team may prescribe medication to help with the symptoms.
Changes in liver function	Your liver function will be checked regularly by a simple blood test. Contact your care team if you notice any of the following: • Yellowing of the skin or whites of your eyes • Dark or brown urine • Bleeding or bruising
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Possible Side Effect	Management
Diarrhea (loose and/ or urgent bowel movements)	 Monitor how many bowel movements you have each day. 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. Contact your care team if: The number of bowel movements you have in a day increases by 4 or more. You feel dizzy or lightheaded. Your care team may recommend an over-the-counter medication or prescribe something to help
	manage your symptoms.
Constipation	 Keep track of how many bowel movements you have each day. Drink 8-10 (8-ounce) glasses of water or fluid each day unless your care team has asked you to limit your fluid intake. Stay active and exercise, if possible. Eat foods high in fiber like raw fruits and vegetables. Contact your care team if you have not had a bowel movement in 3 or more days. Your care team may recommend over-the-counter medications to help with constipation. A daily stool softener such as docusate (Colace®) and/or laxative such as senna (Senakot®) may be helpful. If these do not help within 48 hours, tell your care team.
Hair loss (alopecia)	 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.
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Possible Side Effect	Management
Changes in electrolytes and other laboratory values • Low potassium levels • Low phosphorus levels • Low sodium levels	 Changes in some lab values may occur and will be monitored by a simple blood test. You may not feel any symptoms if the changes are mild and they usually are not a sign of a serious problem More severe changes may occur which can be a sign of a serious problem Notify your care team if you have any of the following: Shortness of breath Chest discomfort Weakness or fatigue New aches and pains Headaches Dizziness Swelling of your legs or feet Red or brown colored urine

Rare	e but serious side effects
	Daunorubicin is a vesicant. If it leaks outside of the IV, it can cause severe damage to your skin. Notify your nurse right away if you feel any pain, aching, burning, itching, swelling, or redness at the site of your IV.
	Daunorubicin can make your heart work harder to pump blood to the rest of your body. Notify your care team if you experience shortness of breath or chest pain.
	Gemtuzumab ozogamicin may be harmful to your liver and may cause a rare but serious condition called veno-occlusive disease. 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.
	Gemtuzumab ozogamicin may cause changes to the electrical activity of your heart. Tell your care team right away if you feel faint, lightheaded, or dizzy, or if you feel your heart beating irregularly or fast, while taking Gemtuzumab ozogamicin.
	Gemtuzumab ozogamicin 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, throat irritation, cough, congestion, sudden back pain, or feeling faint.
	You may be at a higher risk of bleeding with this regimen. Be sure to seek medical attention right away if you have any major bleeding, experience an injury or trauma. Also be sure to check for any signs of bleeding in your stool.
	This regimen increases your risk of severe and life-threatening infections. Contact your doctor If you are experiencing any signs or symptoms of an infection including fever and chills, cough, shortness of breath, or fatigue, or if you have any suspicion that you are infected.
	This regimen may cause a condition called tumor lysis syndrome when starting treatment. This results from the rapid destruction of cancer cells in the body during the initial cycles of treatment. Your care team may do blood tests to check for this side effect.
	A secondary cancer can rarely occur months or years after treatment. Your care team will check your blood cell counts even

(INSTITUTIONAL CONTACT INFO)

after treatment is done to monitor for this side effect.

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



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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 7 + 3 and GO, 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. Close the lid and flush to ensure all waste has been discarded. If you have a low-flow toilet, close the lid and flush twice. If the toilet or toilet seat is soiled with urine, stool, or vomit, clean the surface after every use before other people use the toilet.
		If the toilet or toilet seat becomes soiled with urine, stool, or vomit, clean the surface after every use before other people use the toliet.
		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.
t	ima	acy, sexual activity, contraception, and fertility
	phy	s treatment may cause changes that can affect intimacy and sexuality, including desire and body image. Maintaining visical closeness and/or intimacy with loved ones can be continued during treatment. Holding hands, hugging, and kissing be done safely. It is recommended that you talk to your care team about any restrictions or questions you may have.
	Sor	me treatments can influence the ability to have children, also known as fertility. If you're interested in preserving fertility, talk

□ 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.

use barrier devices, such as condoms, during sexual activity to limit exposure to body fluids.

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 7 + 3 and GO. Some of the drugs you receive may be present in semen and vaginal secretion for many days after treatment. You should

Tell your care team if you become pregnant or plan to breastfeed.









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Additional resources

Product website:

Gemtuzumab ozogamicin (Mylotarg): https://mylotarg.pfizerpro.com/support-your-patient/access-patient-support

Prescribing information:

Cytarabine: https://www.accessdata.fda.gov/drugsatfda_docs/label/2020/071868s032lbl.pdf

Daunorubicin: https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=29fe455e-f177-4b0e-99fb-

60a53016db72

Gemtuzumab ozogamicin: https://labeling.pfizer.com/ShowLabeling.aspx?id=9548

Additional instructions

Updated – June 18, 2023

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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