







ALBUMIN-BOUND PACLITAXEL AND GEMCITABINE

Name of the regimen and cancer drugs

Your care team may refer to your treatment as nab-paclitaxel/gemcitabine

- Albumin-bound Paclitaxel (al-BYOO-min bownd PA-klih-TAK-sil): Abraxane o May also be referred to as nab-paclitaxel (NAB PA-klih-TAK-sil)
- Gemcitabine (jem-SY-tuh-been): Gemzar

Common uses

This regimen is most commonly used for pancreatic cancer, 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.

Each albumin-bound paclitaxel and gemcitabine treatment is repeated every 28 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 stops working or you have side effects which stop you from continuing treatment.

- ☐ Albumin-bound paclitaxel IV given on Day 1, 8 and 15
- ☐ Gemcitabine IV given on Day 1, 8 and 15

Drug	Cycle 1	Day 1	2	3	4	5	6	7	8	9	 15	 Cycle 2 Day 1
Albumin-bound paclitaxel												
Gemcitabine												

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 treatment. You may get prescriptions for other medications to take at home, as below:









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Possible drug interactions

- Albumin-bound paclitaxel and gemcitabine 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.
- ☐ Grapefruit or grapefruit juice may interact with albumin-bound paclitaxel. Avoid eating or drinking these during your treatment

Common Side Effects

Common side effects that have been known to happen in patients receiving albumin-bound paclitaxel and gemcitabine 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.
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Possible Side Effect	Management						
	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 nail clippers 						
Decreased platelet count and increased	Call your care team if you have bleeding that won't stop. Examples include:						
risk of bleeding	 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 						
	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.						
	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.						
	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.						
Decreased hemoglobin, part of the red blood cells that	 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 						
carry iron and oxygen	Let your care team know right away if you have:						
	 Shortness of breath Dizziness Fast or abnormal heartbeat 						
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Possible Side Effect	Management
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.
Fatigue	 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 Contact your care team if you experience extreme fatigue that prevents you from doing your normal daily activities
Numbness or tingling in hands and feet	Report changes in your sense of touch, such as a burning feeling, pain on the skin or weakness. Notify your care team as soon as these symptoms develop. Early intervention can limit and resolve these symptoms, but if not addressed these symptoms can become permanent.
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Possible Side Effect	Management							
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. 							
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 Talk with your care team if you believe you have diarrhea. They may recommend an over-the-counter medication or prescribe something to help keep it under control.							
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Possible Side Effect	Management						
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						
Rash or itchy skin	 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 If your rash or itching continues to worsen, contact your care team. 						
Muscle or joint pain or weakness	 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 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. 						
Fluid retention or swelling (edema)	 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 Contact your care team if you notice: Swelling in the hands, feet, or legs You are short of breath You have gained 5 pounds or more in one week 						









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Rare but serious side effects

Tell	your care provider if you experience any symptoms of these problems:
	Albumin bound paclitaxel 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.
	Albumin-bound paclitaxel and gemcitabine 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.
	Severe allergic reactions are a rare but serious side effect of albumin-bound paclitaxel and gemcitabine. Seek medical attention right away if you notice difficulty breathing, swelling of the mouth or tongue, or a serious rash.
	These products may result in serious and fatal lung toxicity. When taking albumin-bound paclitaxel and gemcitabine, 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.
	Albumin-bound paclitaxel may be harmful to your eyes. Be sure to inform your care team of any issue you have with your vision or pain in your eyes. Your provider may stop treatment with albumin-bound paclitaxel if your eyes are affected.
	Albumin-bound paclitaxel and gemcitabine 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. A condition called reversible posterior leukoencephalopathy syndrome can occur while taking gemcitabine. Call your care team right away if you have headaches, seizures, confusion or changes in vision.
	Gemcitabine may increase your sensitivity to radiation therapy or cause skin rash in places previously treated with radiation. Tell your doctor about your medication and radiation history and let your doctor know if you develop a skin rash.
	Gemcitabine is associated with rare cases of hemolytic uremic syndrome which occurs when small clots form in the blood vessels from damage or inflammation and block the blood flow to the kidneys, preventing them from working correctly. Call your healthcare team if you have bleeding, feel dizzy or short of breath or have swelling and you are not urinating your normal amount.
	A condition called capillary leak syndrome has occurred in patient treated with gemcitabine and results in fluid moving from the blood vessels out to surrounding tissues. Notify your healthcare provider if you experience excessive thirst and weight gain.
If you	ı 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 albumin-bound paclitaxel and gemcitabine, 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.

		umin-bound paclitaxel and gemcitabine, follow the instructions below for at least two days after your treatment. This is to ep 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 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.
In	tima	acy, sexual activity, contraception, and fertility
	phy	s treatment may cause changes that can affect intimacy and sexuality, including desire and body image. Maintaining sical 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.
	to y trea bou	me treatments can influence the ability to have children, also known as fertility. If you're interested in preserving fertility, talk your care team before treatment. Ask your healthcare provider to determine when it is safe to become pregnant after your atment. Patients of reproductive ability should not become pregnant or get their partners pregnant while receiving albuminund paclitaxel and gemcitabine. Some of the drugs you receive may be present in semen and vaginal secretion for many after treatment. You should use barrier devices, such as condoms, during sexual activity to limit exposure to body fluids.
ı	С	alk to your care team about birth control. Not all options may be right for your treatment or cancer. Effective contraception ould include one or more of the following: barrier methods (e.g. condoms), hormone methods (e.g. birth control pills), or urgery.
I	□ T	ell your care team if you become pregnant or plan to breastfeed.









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Additional resources

Product website: https://www.abraxanepro.com/

Prescribing information:

Albumin-bound paclitaxel: https://www.accessdata.fda.gov/drugsatfda_docs/label/2020/021660s047lbl.pdf

Gemcitabine: https://www.accessdata.fda.gov/drugsatfda_docs/label/2014/020509s077lbl.pdf

Additional instructions

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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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