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Page 8HOW CHEMOTHERAPY IS GIVEN Depending on the type of cancer and where it is found, chemotherapy medications can be given different ways, including:Injections or shots in the muscleInjected or shot under the skinIn into an arteryIn into a vein (intravenous, or IV)Pills taken by the mouthShooting the liquid around the spinal cord or brainWhen chemotherapy is given over a long period of time, a thin catheter can be placed in a large catheter near the vein of the heart. This is called a central line. The catheter is placed during a minor operation. There are many types of catheters, including:Central venous catheterCentral venous catheter with portPerkutant inserted central catheter (PICC) A central line can remain in the body for a long time. It must be rinsed weekly to monthly to prevent blood clots from forming inside the central line. Various chemotherapy medications can be given simultaneously or in succession. Radiotherapy can be obtained before, after or during chemotherapy. Chemotherapy is most often given in cycles. These cycles can last 1 day, several days, or a few weeks or more. There will usually be a rest period when no chemotherapy is given between each cycle. A rest period can last for days, weeks or months. This allows the body and blood to count to recover before the next dose. Often chemotherapy is given at a special clinic or in the hospital. Some people are able to get chemotherapy in their home. If home chemotherapy is given, home nurses will help with the medication and IVs. The person receiving chemotherapy and their family members will receive special training. DIFFERENT TYPES OF CHEMOTHERAPY The different types of chemotherapy include: Standard chemotherapy, which works by killing cancer cells and some normal cells. Targeted treatment and immunotherapy zero specific targets (molecules) in or on cancer cells. SIDE EFFECTS OF CHEMOTHERAPY Because these drugs travel through the bloodstream to the whole body, chemotherapy is described as a body-wide treatment. As a result, chemotherapy can damage or kill some normal cells. These include bone marrow cells, hair follicles and cells of the mucous membrane of the mouth and digestive tract. When this injury occurs, there may be side effects. Some people who receive chemotherapy:Side effects of chemotherapy depend on many things, including the type of cancer and what drugs are used. Each person reacts differently to these drugs. Some newer chemotherapy medications that better target cancer cells can cause fewer or different side effects. Your healthcare professional will explain what you can do at home to prevent or treat side effects. These measures include: Be careful with pets and other animals to avoid catching infections from themSeating enough calories and protein to keep the weight upForedre bleeding, and what to do if bleeding occursSeating and drinking safeWash your hands frequently with soap and water You must have follow-up visits with the provider during and after chemotherapy. Blood tests and imaging tests, such as X-rays, MRI, CT or PET scans, will be made to:Monitor how well the chemotherapy worksWatch for damage to the heart, lungs, kidneys, blood and other parts of the body Blood clots are a normal body process. It is also called coagulation. When you get a cut or injury, the body sends blood cells called platelets plus other special proteins to the site of the injury and forms a blood clot. This type of blood clot looks like a lump of dried blood and some call it a scab. Unless the cut or damage is very large, the blood clot will plug up the area where the damage has occurred. This helps to stop the bleeding so that you do not lose too much blood. Such blood clots are normal, stay in place as you heal, and then they will fall off or dissolve over time when they are no longer needed. Types of blood clots sometimes are different types of blood clots named by where they start or parts of the body they affect. Thrombi (single) or thrombi (more than one) Thromboembolism: The name of a thrombus that has broken loose and stuck in another blood vessel, or in another part of the body such as the lungs or legs. Deep vein thrombosis (or DVT). A blood clot in a deep vein, usually in the leg, and other times in the arm or other deep veins. Pulmonary embolism (PE): A blood clot that has started elsewhere but breaks loose and gets stuck in the lungs. This is a serious, life-threatening condition. Venous thromboembolism (VTE): A word used to describe both DVT and PE Disseminated intravascular coagulation (DIC): a usually rare but serious condition that is a complication of some cancers, causing severe bleeding and severe coagulation at the same time. DIC is life-threatening and should be treated immediately. Patients with cancer have a higher developing venous thromboembolism (VTE). Blood clots can be life-threatening, should be taken seriously, and should be treated immediately. Blood clots in people with cancer Cancer itself may increase the risk of getting blood clots. Cancer is known to be a risk factor for having a deep vein thrombosis (DVT). Some experts suggest that this is due to tissue damage some cancers can cause that can trigger the blood clotting process. Any person with cancer can develop a blood clot. But certain types of cancer (such as lung cancer or pancreatic cancer) , types of treatment, and other conditions and medications can increase the risk of blood clots. Having metastatic cancer (cancer that has spread from where it began to other areas of the body) increases the risk of having blood clots. Other medical conditions have a higher risk of blood clots. If you already have a disorder that increases your risk, having cancer will further increase your risk. Some disorders that already have a risk of blood clots include factor V Leiden thrombophilia, abnormally high levels of certain coagulation proteins, abnormally low levels of proteins that prevent blood clots, and certain types of gene changes. In rare cases, cancer can be accidentally diagnosed during testing when a person has a blood clot. Blood clots from medications or treatments There are some non-cancer medications that have a higher risk of blood clots, or that have a side effect that can cause blood clots. Some vitamins, minerals, and supplements can increase the risk of blood clots, too. It is very important to talk to your doctor about all the medications, vitamins, minerals, and supplements you are taking so that the risks can be discussed. Medications given to treat cancers known to be associated with blood clots, or have side effects that contribute to blood clots are: Platinum, such as cisplatin Vascular endothelial growth factor (VEGF) inhibitors, such as bevacizumab VEGF tyrosine kinase receptor inhibitors, such as sorafenib or sunitinib L-asparaginase Tdomidide Lenalidomide Tamoxifen Other risk factors for blood clots in addition to cancer and other health conditions, other things may put you at risk of getting blood clots , for example: Older age (older than 65 puts you at greater risk) Being pregnant Smoking Sitting or lying in bed for long periods or being in bed more than 3 days in a row Taking oral contraceptives or other hormone therapy To be overweight Having surgery, especially orthopedic surgery, abdominal or pelvic surgery Having a family history of blood clotting to have a central venous catheter in place To have a blood transfusion or take red blood cell stimulants for some types of anemia Having an infection. Symptoms of blood clots: what to look for Sometimes a blood clot has no symptoms, but it is important to get help as soon as you have any of the symptoms listed here, because some blood clots can be dangerous and become life-threatening: Sudden chest pain Suddenly or arm pain Swelling of the leg or arm Rapid heart rate Shortness of breath A feeling of overwhelming fear or doom Sweat or fever Cough up blood. Finding and managing blood clots blood clots can be found after a patient reports symptoms suggesting blood clots. Other times, blood clots are found accidentally when looking for other things. In patients without cancer, calculating the chance of getting blood clots, and having a special blood test (called a D-Dimer test) can often be enough to exclude the presence of a blood clot. In cancer patients, the use of these tests alone may not be so accurate and useful. Your health team will get the information needed to determine if you need one or more of them, plus more tests, such as: What can be done with a blood clot? You and your doctor will decide what is the best treatment for your blood clot. Some of the treatments that you could have include one or more of the following. Medications that help stop the blood from clotting more than normal (these medications are also called anticoagulants). Usually these are given intravenously (IV) drugs, but in some patients these can be taken by mouth. Because these drugs help prevent blood clots, they have side effects that can cause bleeding. You and your doctor will weigh the benefits of drugs against the risk of these side effects. Medications that can dissolve blood clots (given by IV) Filters that help stop a blood clot from entering the lungs or heart. These special filters are inserted into a large vein in the chest during a surgical procedure. Can a blood clot be prevented? If you have a higher risk of having a blood clot, have cancer, and start a certain type of cancer treatment, your doctor may give you medication to prevent blood clots. Sometimes your doctor will decide that the risk of bleeding episodes associated with drugs used to treat blood clots is worth the benefit of never getting a blood clot to begin with. If you have certain operations, you can get anticoagulation medications before, and for several weeks after surgery, to prevent blood clots. After the operation, you can also use a hose, a garment or a device that helps to compress the legs or another area of your body. Some experts recommend cancer patients are given preventive medications for blood clots when you are hospitalized or before, during, and for a few days after having surgery. For most patients, it is not necessary to take medications to prevent blood clots if you are not in the hospital. However, it is important to be checked for the risk of having a blood clot occasionally. Talk to your doctor about your risk and whether you need to take medication or use other treatments to prevent blood clots. It is also very important to notify the health care system if you think you have any of the symptoms associated with a blood clot. What the patient can do If you are about the risk of blood clots, if you have been told that you are at risk, or you are being treated for blood clots, here are some questions to ask your doctor. Does a blood clot put me at risk of having more in the future? Is this a life-threatening blood clot? What about the cancer or treatment requires me to go to medicine when I don't have a blood clot now? What activities should I avoid while on this medicine? How long do I need to be on this medicine? What other side effects can I expect from this medicine? It is best to stay away from anti-inflammatory medications, such as aspirin, naproxen or ibuprofen (Motrin®, Advil®, Naprosyn®, Aleve®, Midol®) and medications like those unless the cancer team tells you it is safe to use them. Contact your pharmacist if you are not sure if a medicine is an anti-inflammatory drug or if it contains one of them. Do not take any over-the-counter medications such as aspirin or ibuprofen without talking to your doctor first. These , together with medications for blood clots, can thin your blood and make you bleed easily. If you are given medicine to prevent or treat blood clots, it is important to take care not to harm yourself, because the ability of the blood to clot will be reduced. This means that even minor injuries can cause you to bleed more than you normally would. Some things you can do to prevent minor injuries include: Using an electric razor to shave, rather a straight razor Using a soft toothbrush and brushing gently to avoid making your gums bleed Do not use floss unless approved by your doctor Avoid blowing your nose vigorously, to avoid nosebleeds Avoid falls that can cause bruising, pick up loose throwing blankets to avoid tripping Eat a healthy diet that includes fiber to avoid constipation. If you are constipated, talk to the cancer team about using a stool softener. Do not use enemas or suppositories of any kind Keep your head evenly with or above the heart (lie flat or stay upright) Call for help right away if: You notice some symptoms of blood clots You have unusual bleeding Bleeding of any kind does not stop The sooner you get help, the more likely the treatment for blood clots or coagulation problem will be effective. Effective.

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