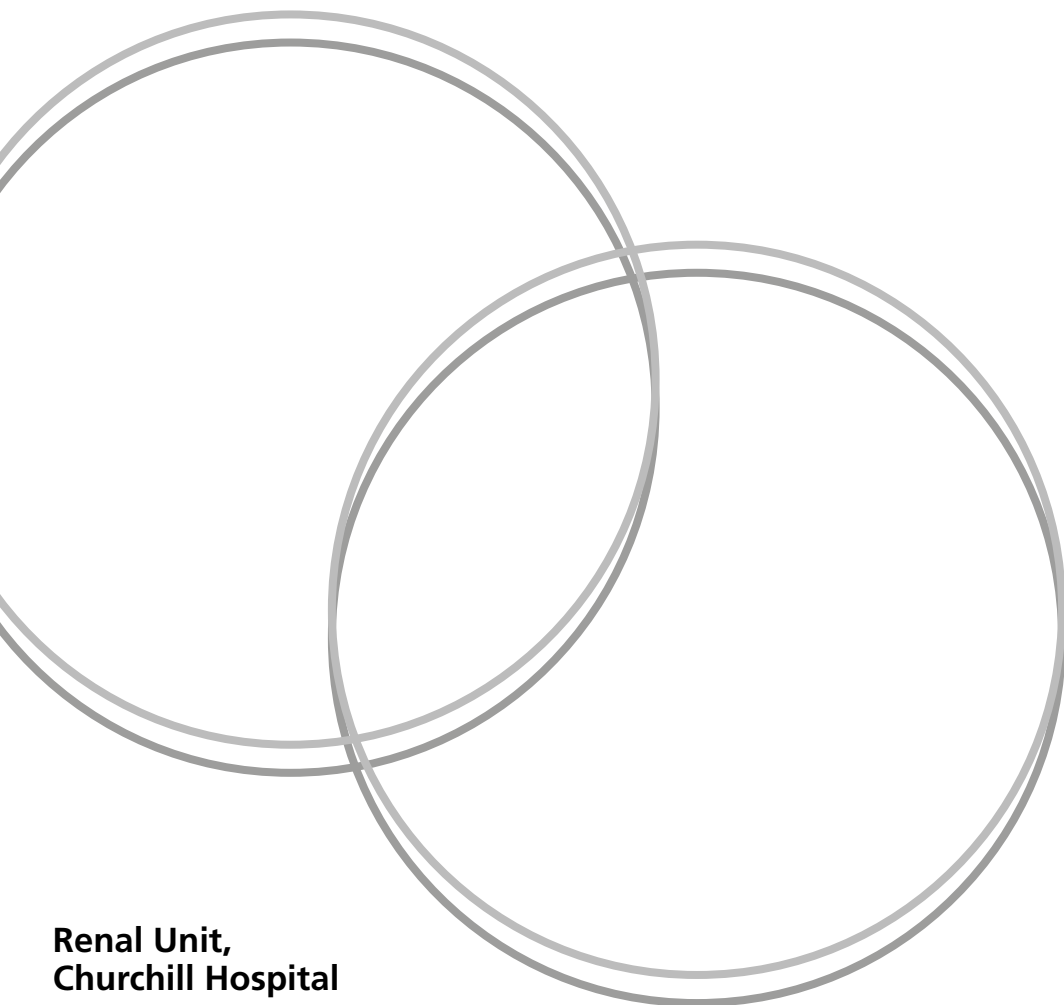




Oxford University Hospitals
NHS Foundation Trust

Cyclophosphamide treatment in the Oxford Kidney Unit

Information for patients



Renal Unit,
Churchill Hospital

You have been given this leaflet as your doctor has prescribed you cyclophosphamide to treat your kidney condition.

Why do I need take cyclophosphamide?

Cyclophosphamide is a medicine which dampens your immune system (an 'immunosuppressant'). In the Oxford Kidney Unit, cyclophosphamide is used to treat certain kidney conditions which are caused by an overactive immune system or 'autoimmune disease', such as:

- **vasculitis** (inflammation of the blood vessels)
- **systemic lupus erythematosus** (lupus) which is a condition that affects the immune system and can cause problems with your kidneys.

In other areas of the hospital, cyclophosphamide is also used to treat some cancers; it is sometimes called a chemotherapy drug. This does not mean you have cancer or are having chemotherapy. The dose prescribed for you will be at a much lower dose than if it was prescribed for cancer.

Your kidney doctor will give you information about your kidney condition, how this could affect you in the future and what the likely benefit of cyclophosphamide would be for you.

What are the risks and side effects of taking cyclophosphamide?

Common short-term side effects of cyclophosphamide include:

- low white blood cell count (this can increase your risk of developing infections)
- feeling sick and/or vomiting
- irritation of your bladder wall, which can cause blood in your urine, stinging when you pass urine and may make you want to urinate more frequently
- changes in taste
- headache
- tiredness.

Occasional side effects include:

- hair loss (hair usually grows back after stopping the drug)
- mouth ulcers
- low platelet count (this can cause unexplained bruising or bleeding that won't stop easily).

Cyclophosphamide can also cause:

- **Infertility** – you should discuss this further with your kidney doctor.
- **Damage to an unborn child** – you should not try for a baby while you are taking cyclophosphamide (whether you are a woman or a man) and for six months after stopping the treatment.
- **Cancer** – cyclophosphamide causes a small increase in the risk of bladder and some other cancers. Your kidney doctor will give you more information about this.

Cyclophosphamide is often prescribed along with steroid tablets. Steroids are an essential part of the treatment for many kidney conditions. They work by helping to reduce inflammation in the

kidneys. The length of time you need to take steroids for will depend on your kidney condition. If your kidney doctor prescribes you steroids, they will talk to you about why you need them and how long you will need to take them for. You will also be given separate information about the side effects and what to look out for when taking them.

Giving my consent (permission)

Before you start the treatment, your kidney doctor will explain the risks and benefits to you. If you decide to go ahead with the treatment, we will ask you to sign a consent form.

How will cyclophosphamide be given?

The two main ways of taking cyclophosphamide are:

- intravenous infusion
- tablets (usually taken once a day).

Cyclophosphamide is given as an infusion (liquid mixture) into a vein in your hand (intravenously). The dose of cyclophosphamide will depend on your age, body weight and your kidney function. It may also change depending on how you respond to the treatment.

Cyclophosphamide infusions are usually given every two to four weeks. You are likely to need a total of six infusions.

Before you come for each cyclophosphamide infusion you will need to have a blood test, to monitor your kidney and liver function as well as your white blood cell count (the cells which fight infection).

What happens on the day of the cyclophosphamide infusion?

You will need to come to the Renal Day Case Unit at the Churchill Hospital. On the day of the infusion, it may be better to have a small, light breakfast, as you may feel sick during the treatment. Please bring a list of your usual medications with you, including any over the counter medication or herbal remedies.

When you arrive you will be seen by a kidney doctor to check you are fit to go ahead with the treatment. They will examine you and check your recent medical history. When you are ready to have the treatment, a cannula (small plastic tube) will be inserted into a vein in your hand. The cyclophosphamide infusion is given through the cannula into your vein; this is sometimes called a 'drip'. This takes about an hour.

Before you have the cyclophosphamide you will be given an injection of a medicine called mesna, which helps to protect your bladder wall. We can also give you a tablet called ondansetron, which can help stop you from feeling sick.

Although the treatment only takes an hour, you are likely to be in the Renal Day Case Unit for three to four hours. This is so that the kidney doctor can assess you and explain the treatment; we can carry out any tests that are needed; and we can arrange any further medications or appointments you might need. A pharmacist will also go through all the medication changes with you to make sure you understand what medications you need to take. Please phone the Renal Day Case and ask if you can bring a friend or relative to stay with you to keep you company.

What happens after the cyclophosphamide infusion?

You will be given the following medicines to take home with you.

Ondansetron

You can take one tablet three times a day for the next three days if you feel sick after the infusion.

Mesna

You should take one tablet two hours after the cyclophosphamide infusion has finished and another tablet four hours after this.

It is really important that you drink plenty of fluids during the next 24 hours after your cyclophosphamide infusion. Your kidney doctor will tell you how much fluid to drink. Good hydration and emptying your bladder regularly (do not ignore the urge to pass urine) helps reduce side effects from cyclophosphamide and protects your bladder.

You do not need to take your temperature unless you feel hot, shivery and unwell. If it is between 37.5°C and 38°C, repeat the reading in four hours. If it remains the same, contact your GP or kidney doctor and tell them you are on cyclophosphamide medication and have a high temperature.

If your temperature is greater than 38°C contact the Renal Registrar On-call immediately, on the telephone number below:

Churchill Hospital switchboard – ask to speak to the Renal Registrar On-call 0300 304 7777 (24 hours)

Before you leave you will be given an appointment to have the next infusion.

What should I do with cyclophosphamide tablets?

The tablets will be dispensed from the hospital pharmacy. It will say on the packaging how many tablets you need to take each day.

Cyclophosphamide tablets should be taken in the morning, so that your body processes the treatment throughout the day.

Cyclophosphamide is best taken on an empty stomach, but can be taken with food if you find it makes you feel sick.

You will need weekly blood tests during your treatment, to monitor your white blood cell and platelets (blood count). This blood test can be done either at your GP surgery or at the Kidney Unit. Please plan with your kidney doctor where these blood tests will be done, so that they know where to look for the results.

Do I need to take anything else during the course of cyclophosphamide treatment?

Whether you are having cyclophosphamide as tablets or by infusion, there are some other medicines you will need to take to help protect against side effects. These include:

- **Co-trimoxazole**, take one tablet every day. This helps to protect against certain lung infections.
- **Omeprazole**, take one capsule every day. This helps to protect your stomach.
- **Adcal-D3**, take one tablet twice a day. This helps to protect your bones.

You should also continue your usual medications during the course of cyclophosphamide. Your kidney doctor will advise you if any changes to your usual medication are needed.

How will I know if the treatment has worked?

Your kidney doctor may not know how well the treatment has worked until you have completed the course. They will arrange to see you at a clinic appointment to discuss how effective the treatment has been.

Is there anything else I need to know?

Alcohol

There is no particular reason to avoid alcohol while on cyclophosphamide, but you should drink within the Department of Health's recommended limits.

Pregnancy and breastfeeding

Cyclophosphamide may cause birth defects when taken during pregnancy. It is important that you use a reliable form of contraception whilst taking cyclophosphamide. You should discuss with your kidney doctor before trying for a baby.

Women – you should not breastfeed if you are taking cyclophosphamide because the drug may pass into breast milk and could be harmful to your baby.

Woman should wait for a minimum of six months after finishing your cyclophosphamide treatment before trying to become pregnant.

Men – should also wait for at least six months after finishing your cyclophosphamide before trying to father a child as the treatment may affect your sperm health.

Immunisation

You should avoid immunisations with live vaccines (such as chickenpox (varicella), shingles or MMR vaccines) while receiving cyclophosphamide. If you are unsure whether the vaccine you wish to receive is safe and appropriate, please discuss this with your kidney doctor or renal pharmacist.

Contact details

Renal Day Case Unit

Churchill hospital

Tel: **01865 226 106**

8am to 6.30pm, Monday to Friday

(Please leave non-urgent messages on the answerphone)

Renal Outpatient

Churchill Hospital

Tel: **01865 225 355**

8am to 5pm, Monday to Friday

Renal Pharmacists

Churchill Hospital

Tel: **01865 226 105**

9am to 5pm, Monday to Friday

(Please leave a message on the answerphone)

Email: **orh-tr.oxfordrenalpharmacy@nhs.net**

Renal Ward

Churchill hospital

Tel: **01865 225 780**

24 hours, including weekends and bank holidays

Where can I get more information?

If you would like more information about cyclophosphamide, or if you have any concerns about your treatment, you should discuss this with your Kidney Doctor, the Renal Pharmacist or the Day Case Unit nurses.

Useful information is also available online:

Vasculitis UK

Information for people with vasculitis and their relatives.

Website: www.vasculitis.org.uk

UK National Kidney Federation

The UK National Kidney Federation is a national kidney charity run by patients with kidney problems and their carers, for kidney patients. It has more information about vasculitis.

Website: www.kidney.org.uk/vasculitis

NHS Choices

NHS website which provides information on specific conditions.

Website: www.nhs.uk/conditions/vasculitis

Website: www.nhs.uk/conditions/Lupus/Pages/Introduction.aspx

Oxford Kidney Unit

Useful information about the Oxford Kidney Unit for patients and their relatives.

Website: www.ouh.nhs.uk/oku

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
www.ouh.nhs.uk/information



Making a difference across our hospitals

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OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)

