Bothered Bowels, Sugar Spikes and Tingly Toes

BEING ON THE LOOKOUT FOR TREATMENT TOXICITIES

Disclosure

• No relationships with commercial interests

Mitigating Potential Bias

Not applicable

References

- BC Cancer Agency Cancer Drug Manual
 - Drug monographs
 - Patient education handouts

http://www.bccancer.bc.ca/healthprofessionals/professional-resources/cancerdrug-manual/drug-index

Myeloma Canada

www.myeloma.ca

Learning Objectives

- List the common toxicities patients encounter while receiving treatment for Multiple Myeloma
- Identify which toxicities are associated with each drug class and why
- Describe how these toxicities are experienced
- Gather some assessment tools for toxicity identification

Know Baseline Symptoms

Disease Related

- Calcium elevation
- Renal dysfunction
- Anemia
- Bone pain
- Fatigue
- Infection
- Peripheral Neuropathy

Treatment Related

- Myelosuppression
- Peripheral neuropathy
- Diarrhea/Bowel changes
- Fatigue
- Hyperglycemia
- Deep vein thrombosis
- Shingles

Patient Assessments

- Know the individuals' disease
 - presentation of disease
 - baseline
- Know the co-morbidities
- Know the treatment plan
- Know the bloodwork
- Know individual treatment toxicities



"Know Mr. CRAB"



- C = hypercalcemia
- R = renal insufficiency
- A = anemia
- B = bone lesions

Treatment Modalities

- (1) Radiation
- (2) Bisphosphonates
- (3) Steroids
- (4) Chemotherapy/Alkylating agents
- (5) Proteasome Inhibitors
- (6) Immune modulators
- (7) Monoclonal Antibodies



(1) Radiation Therapy

- KNOW if pt is experiencing bone pain at presentation
- Any fractures?
- LOCAL TREATMENT:
 - to damage myeloma cells
 - Pain control
 - Spinal cord compression
 - Solitary plasmacytoma
 - Post-surgical radiation

Radiation Treatment Toxicities

WHY? Causes double stranded breaks in DNA

- Confined to anatomic area of treatment
- Treatment variables affect tolerance
 - Radiation dermatitis
 - fatigue
- Usually single #s, 5-10#s





Being on the Lookout

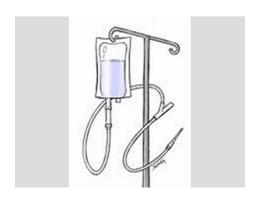


ASSESSMENT:

- Education: Late effects
- Pain control
- Acute flare/tissue swelling
- skin assessment

(2) Bisphosphonates

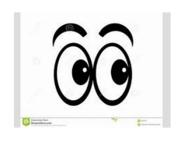
- Osteoclast and osteoblast dysregulation in Myeloma
- agents work by inhibiting osteoclastic activity
- Emergent use vs Therapeutic use
- Zoledronic acid
- Pamidronate



Bisphosphonate Treatment Toxicities

- Flu like illness:
 - Arthralgias
 - Fatigue
 - Fever
 - Nausea
- Nephrotoxicity
- Hypocalcemia
- Osteonecrosis of the jaw (ONJ)





Being on the Lookout

ASSESSMENT:

- Understand baseline + comorbidities
- Lab review: Cr, Ca+, Alb, Cr Clearance re: dose
- Baseline dental exam ideal
- "pain, loose teeth, numb or heavy jaw"



Oral Exam

- Look for open sores that don't heal
- Assess Oral hygiene
- Treat tooth or gum infections promptly
- Proper denture fit



Osteonecrosis of Jaw

(3) Systemic Glucocorticoids

- Have an antiinflammatory and an antimyeloma affect
- Steroids can be used alone or in combination
- Prednisone
- Dexamethasone

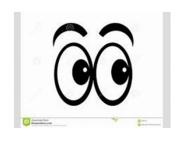
Steroid Treatment Toxicities

- WHY? many systemic effects on many organ systems. Result largely from increased expression of regulatory and antiinflammatory proteins
- Frequency and severity of side effects related to respective dose and duration of therapy

Steroid Treatment Toxicities

- Weight gain
- Skin thinning and purpura
- Mood changes
- Insomnia
- Hyperglycemia
- Heartburn
- Swelling/fluid retension
- Leg cramps
- Myopathy





Being on the Lookout

ASSESSMENT:

- Med review
- Patient education: hyperglycemia symptoms
- Monitor VS (BP) and weight
- Monitor bloodwork: glucose, lipids
- Activity level
- Discuss changes in mood
- Explore sleep hygiene



Date of Birth



Date of Completion:

Loss of interest in everyday things

☐ Meaning / Purpose of life

Spiritual:

□ Faith.



COMPREHENSIVE PROBLEM AND SYMPTOM SCREENING

Edmonton Symptom Assessment System (ESAS): Please circle the number that best describes: 1. No pain 2 3 5 7 8 9 10 Worst possible pain 6 2 Not tired 3 9 Worst possible tiredness 5 8 10 3 Not nauseated 3 5 8 9 Worst possible nausea Not depressed Worst possible depression 5. Not anxious 3 5 8 9 10 Worst possible anxiety 6. Not drowsy 3 5 8 9 Worst possible drowsiness 7. Best appetite Worst possible appetite 8. Best feeling of wellbeing Worst possible feeling of wellbeing 9. No shortness of breath 3 Worst possible shortness of breath 5 8 10. Other problem: 3 2. Canadian Problem Checklist: Please check all of the following items that have been a concern or problem for you in the past week including today: Emotional: Practical: Informational: □ Fears / Worries □ Work / School ☐ Understanding my illness and/or treatment □ Sadness □ Finances ☐ Talking with the health care team □ Frustration/Anger ☐ Getting to and from appointments ☐ Making treatment decisions Changes in appearance □ Accommodation ☐ Knowing about available resources ☐ Intimacy / Sexuality ☐ Child / Family / Elder care Quitting smoking □ Coping ☐ Medications ☐ Change in sense of self Physical: □ Concentration / Memory

□ Sleep

■ Weight

Swallowing

Constipation / Diarrhea

☐ Falling / Loss of balance

Name:

Additional Question:		
Have you smoked in the past six weeks?	☐ Yes	□ No

Social/Family:

Feeling alone

Feeling a burden to others

Relationship difficulties

☐ Worry about family / friends

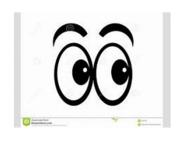
(4) Chemotherapy

- Reduce the number of plasma cells in the bone marrow and the proteins they produce
- cycles of alternating treatment and rest periods
- Usually given in combination with steroids
- Cyclophosphamide
- Melphalan



Chemotherapy Treatment Toxicities

- Myelosuppression
- Infection
- Mouth sores
- Gl disturbance
- Bowel changes
- Hemorrhagic cystitis
- Hair loss/thining



Being on the Lookout

ASSESSMENT:

- Monitor bloodwork: CBC, Cr, LFTs
- Rule out infection
- Weight prior to every cycle
- Urinary changes
- Hydration: aim for 2L/day
- Diet review: grapefruit juice + cyclo



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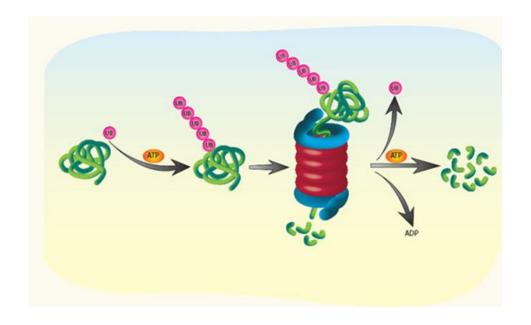
☐ Worry about family / friends

(5) Proteasome Inhibitors "Mibs"

- block the activity of proteasomes
- Bortezomib (SQ)
- Carfilzomib (IV)
- Ixazomib (PO)



Proteasome



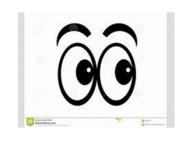
"Mibs" Treatment Toxicities

BORTEZOMIB

- Peripheral Neuropathy
- Fatigue
- Nausea
- Diarrhea
- Thrombocytopenia
- Hypotension
- Herpes Zoster Reactivation

CARFILZOMIB

- Fatigue
- Nausea
- Anemia/thrombocytopenia
- Dyspnea
- Diarrhea
- Fever
- Cardiac toxicity
- Herpes Zoster Reactivation



Being on the Lookout



ASSESSMENT:

- self-report PN Assessment Tool prior to each cycle
- Sensory changes: sensation, reflexes
- Motor changes: strength, Check gait
- check safety strategies
- Monitor bloodwork: CBC, Cr, LFTs, bilis
- Diet review: avoid green tea
- Skin check: rashes, Bortezomib injection site
- Antiviral prophylaxis



Herpes Zoster

A Word about Peripheral Neuropathy

- Multifactoral: disease/comorbidity/treatment
- Nerve cells are more sensitive
- Sensory nerves at increased risk
- Onset and resolution of symptoms variable
- "decreased sensation"
- "burning" or "tingling" in the hands and feet
- "dexterity changes"
- "feel imbalanced"



https://www.therapysocks.com/images/PNS600b.jpg



Neurotoxicity Assessment Tool

	Not at all	A little	Some what	Quite a bit	Very much
I have numbness or tingling in my hands		1	2	3	4
I have numbness or tingling in my feet		1	2	3	4
I feel discomfort in my hands	0	1	2	3	4
I feel discomfort in my feet	0	1	2	3	4
I have joint pain or muscle cramps		1	2	3	4
I feel weak all over		1	2	3	4
I have trouble hearing		1	2	3	4
I get a ringing or buzzing in my ears		1	2	3	4
I have trouble buttoning buttons		1	2	3	4
I have trouble feeling small objects		1	2	3	4
I have trouble walking		1	2	3	4

http://img.medscape.com/fullsize/migrated/574/717/colson.fig2.gif



Grading Peripheral Neuropathy

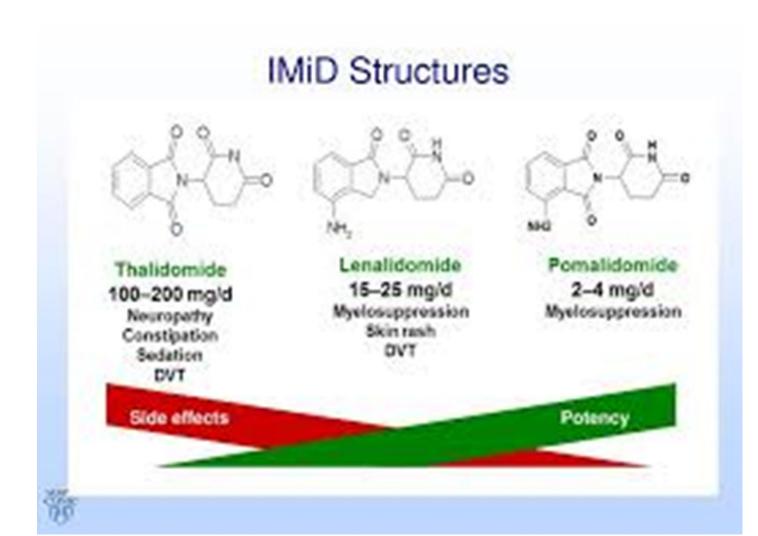
- Grade 1 paresthesia and/or loss of reflexes, without pain or loss of function
- Grade 1 with pain or Grade 2 interfering with function, but not with activities of daily living
- Grade 2 with pain or Grade 3 interfering with activities of daily living
- Grade 4 permanent sensory loss that interferes with function

http://www.bccancer.bc.ca/chemotherapy-protocols-site/Documents/Lymphoma-Myeloma/MYBORPRE Protocol 1Oct2016.pdf

(6) Immune Modulators

- -"IMIDs"
- Interfere with the underlying processes that promote the growth and reproduction of myeloma cells
- Impact the functioning of the immune system
- Thalidomide
- Lenalidomide
- Pomalidomide

IMiDs



Thalidomide - Teratogenecity



- 1. McBride WC: Thalidomide & Congenital Abnormalities. Lancet. 1961;11:1358
- 2. Lenz W: Thalidomide & Congenital Abnormalities. Lancet. 1962;1:45

IMiD Treatment Toxicities

LENALIDOMIDE

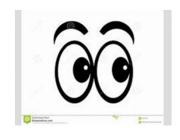
- Myelosuppression
- Skin rash
- DVT
- Bowel changes
- Fatigue
- Teratogenicity
- Hypothyroidism
- Hepatitis B Reactivation
- Secondary Malignancies

POMALIDOMIDE

- Myelosuppression
- Fatigue
- DVT

Venous Thromboembolism

- individual risk of developing a VTE
- appropriate thromboprophylaxis
- Risk Factors:
 - Obesity
 - Immobility
 - Recent surgery
 - Comorbidities (cardiac, diabetes, renal etc)



Being on the Lookout

ASSESSMENT:

- Understand risk category + contraception plan
- Monitor bloodwork: CBC, Cr, LFTs, TSH
- Rule out infection
- Bowel regimen
- Skin check
- VTE assessment



VTE Assessment

DVT:

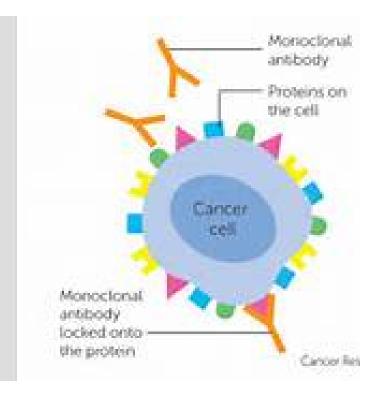
- Swelling
- Erythema
- Pain

Pulmonary Embolism:

- Chest pain
- SOB
- Tachycardia
- Hemoptysis

(7) Monoclonal Antibodies

- -"MABs"
- Glycoprotein specific
- Denosumab: RANKL
 - Inhibits osteoclast formation,Function + survival
- Daratumumab: CD38
 - inhibits cell growth and can lead to cell lysis



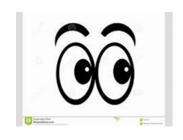
"Mabs" Treatment Toxicities

DENOSUMAB

- Flu like illness:
 - Arthralgias, Fatigue
 - Fever , nausea
- Osteonecrosis of the jaw (ONJ)
- Nephrotoxicity
- Hypocalcemia, anemia

DARATUMUMAB

- Severe infusion reaction
- Respiratory symptoms
- Myelosuppression
- Fatigue
- Pyrexia
- Infections
- Arthralgias/myalgias



Being on the Lookout

• ASSESSMENT:

- Ensure baseline T+S
- allergic response
- Comorbiditiy review (COPD)
- Med review: ensure antiviral prophylaxis



Infection

- Myeloma pts already at increased risk for infection
- WHY? Suppression of normal plasma cell function and therapy induced
- ASSESSMENT:
 - ROS
 - Episodes of fever/chills
 - Immunizations: yearly flu, pnuemococcal

Take Home Message

- Know Mr. CRAB!
- Remember prophylaxis:
 viral + dvt
- Safety paramount with IMIDs





Questions

