

Patient Care Services
300 Pasteur Drive
Stanford, CA 94305

Stanford V Chemotherapy- 8 or 12 week regimen Patient Education

You will receive a regimen called “Stanford V” for your Hodgkin’s lymphoma. This treatment includes 8 or 12 weeks of chemotherapy followed by radiation. Stanford V consists of 6 different chemotherapy drugs, all of which are given in your vein.

Prednisone, an oral steroid, is also part of Stanford V. You will take this drug every other day (at home) for the duration of your treatment.

Schedule of the IV(intravenous) chemotherapy drugs:

Week 1, 5, 9

Mechlorethamine (or Cytosin on weeks 1 & 5, if you are on a study)
Doxorubicin
Vinblastine

Weeks 2, 4, 6, 8, 10, 12

Vincristine
Bleomycin

Week 3, 7, 11

Doxorubicin
Vinblastine
Etoposide for 2 days

Key points about Stanford V

- **A calendar and a medication organizer is often helpful to sort out the different pills by day, time and week.**
- **Odd numbered weeks of treatment (weeks 1, 3, 5, 7, 9 & 11) can cause nausea. You will receive a prescription for anti-nausea medication to take at home. It is important to be proactive and take the medications when you start to feel queasy.**
- Weeks 3, 7, 11 you will have 2 days of treatment. On the first day labs are drawn, you’ll see your doctor and then go to the Infusion Treatment Area (ITA) for chemotherapy. On day 2, you return to the ITA for a one hour infusion of chemotherapy.

- **Even numbered weeks (2, 4, 6, 8, 10 & 12)** nausea is not as much an issue and you do not need to take any anti-nausea pills.
- The Bleomycin you receive on even numbered weeks can cause a fever. After receiving Bleomycin a fever up to 103° F for the first 48 hours can occur. This is the **ONLY** time it is ok to take Tylenol and not call us about a fever. Beyond the 48 hours post Bleomycin, a fever (of 100.4° F or more) is treated as a critical issue. See the FAQs below on when and how to contact us if you have a fever.
- Constipation is common with this regimen. Constipation is hard stool, stool that is hard to pass, or no bowel movements for more than 2 days. Minimally constipation causes discomfort and may increase nausea. Left untreated, constipation can progress and cause small tears in rectal tissue, infections, and bowel obstruction. It is important to take the stool softener (Docusate Sodium/Colace) 2 to 3 times a day, or as directed. You may increase or decrease the stool softener and any other over the counter laxatives you are taking (see chart below) according to how you are doing (e.g.: for excessively soft stool or diarrhea, you would decrease these medications). **UNDER NO CIRCUMSTANCES** should you use a suppository to treat constipation.
- The chart below details the drugs we typically prescribe during this treatment. Your take home medications may be a little different if you have allergies, pre-existing medications, etc.
- During your treatment with Stanford V you will have a PET/CT scan either after week 4 or week 6.
- You will see the Radiation Oncologist to plan your radiation treatment. This usually occurs in the last month of the chemo weeks.
- Once you complete your chemotherapy and radiation, we will see you every 3 months for one year, then gradually decrease visits until you are seen yearly (for life).

STANFORD V - HOME MEDICATIONS

Drug name(s)	How much, when & how	Why
*Prednisone	Dose based on ht. and wt. Take your prescribed dose orally <u>every other day</u> until instructed otherwise. Best taken with food in the morning.	This is part of the treatment for Hodgkin's disease and it is very important to take it as directed every other day. You will be instructed when and how to decrease your dose during the last 2 weeks of your treatment.
*Ranitidine (Zantac)	150 mg – 1 tablet orally take morning and evening	To prevent heartburn and stomach upset commonly associated with prednisone. If heartburn occurs while on this medication, inform your provider. You may need a different antacid.
Ondansetron (Zofran)	8 mg -1 tablet orally every 8 hours for 3 to 4 days <i>on ODD weeks of treatment.</i>	To prevent nausea.
Prochlorperazine (Compazine)	10 mg-1 tablet orally every 6 to 8 hours as needed for nausea, particularly <i>on ODD weeks of treatment</i>	To help with nausea if the Zofran is not effective. OK to take together.

Lorazepam (Ativan)	1mg-1 tablet orally every 4 to 6 hours as needed for nausea, anxiety or insomnia.	For nausea if the Zofran is not effective. Also helps with anxiety or insomnia on prednisone days.
*Trimethoprim/sulfamethoxazole (Septra DS)	160/800mg -1 tablet orally take every morning and evening on Saturday and Sunday only	To prevent a particular type of infection while you are on prednisone.
*Docusate Sodium (Colace)	250 mg-1 capsule orally 2 to 3 times a day. You will need to increase or decrease depending on bowel movement.	To prevent the constipation commonly experienced with this treatment. If 2 to 3 Colace capsules do not work, you will need to take other over the counter laxatives. Milk of Magnesium (1tablespoon 2 to 3 times per day), Miralax, Senna or Dulcolax. Avoid fiber supplements and do not use suppositories or enemas.

* These medications must be taken as prescribed throughout your chemotherapy treatment. The other medications (non *) while ok to take anytime, are most often needed on odd numbered weeks of treatment.

Other drugs you may receive:

Palonosetron (Aloxi) - This is a long acting anti-nausea drug. If this is prescribed, you will NOT take the drug Zofran listed above.

Metoclopramide (Reglan) - This drug can help with nausea and get your GI tract working. If this is prescribed, you will not take the drug Compazine listed above.

Other laxatives, sleep medications or other antacids may be indicated during your treatment. Let your provider know how you are tolerating your medications, if you are having new symptoms, or any other concerns. Be sure to provide us with a list of your current medications prior to starting chemotherapy treatment. Let us know if there are any changes in these medications during your treatment.

Frequently Asked Questions

Whom do I call if I have a problem?

Always call 650-498-6000.

For scheduling choose option 2

For clinical issues (i.e. fever) choose option 5.

This general number will get you to someone who can direct your call to the appropriate provider; Nurse Coordinator, triage nurse, Nurse Practitioner, Physician's Assistant or Physician. **If you have a clinical concern always use the Cancer Center Triage line.** DO NOT email or use other phone numbers you may have for these providers.

What number do I call (i.e. fever) after 5pm, on a holiday or weekends?

The same number above, describe your problem and ask for the “On Call Oncologist”

When should I call between appointments?

- Fever of 100.4° F or more. Do not wait to call. Call as soon as you know you have a fever. Fever can indicate serious infection. Your white blood cell counts may be low which decreases your ability to fight infection. Do not take Tylenol or Advil or other medications as they can mask a fever.
(When you receive the drug Bleomycin, you may get a fever up to 103° F within 48 hours of the treatment. Then, and only then, you can treat with Tylenol, fluids and rest. Any fever outside of the 48 hour window is reason to call.)
- Uncontrolled nausea or vomiting.
- Diarrhea (watery or loose stool more than 3 to 4 times a day).
- Constipation (hard or no stool for more than 1 to 2 days) Do Not use suppositories.
- New or uncontrolled pain.
- Swelling in arms or legs.
- Any sign of infection, with or without fever; persistent cough especially with sputum, red/warm/swollen skin, pain or burning with urination, or diarrhea.
(When you receive the drug Adriamycin, (red chemotherapy), your urine will be bright orange/red color later that day or evening. Urine color should return to yellow within 24 hours.

What food can I eat while receiving chemotherapy?

A regular balanced diet is best; no particular type of food is excluded and special diets, extreme changes in diet are not advised.

- Cooked vs Raw? Avoid raw meat, fish (sushi), and eggs. There is no evidence that you are more likely to get an infection by eating raw fruits and vegetables. It is best to wash all such foods thoroughly and avoid salad bars and buffets where many people may have touched the food.
- Sweet? Unless you are diabetic, moderate/normal amounts of sugar containing foods are fine. Moderate amount of sugar in diet has not been shown to result in a worse prognosis according to current evidence.
- Spicy? You may want to avoid spicy food as most lymphoma chemotherapy regimens include steroid drugs and these increase the risk for heartburn.
- Alcohol? Many patients do not feel like drinking during chemotherapy. There is no evidence that a glass of wine or beer will harm you. If you do drink, even occasionally, it is critical to let your provider know. You may be asked to avoid alcohol completely or limit your intake depending on your particular disease, treatment, or history.
- Caffeine? A moderate amount of caffeine (1 to 2 beverages/day) is ok. If you are taking prednisone, caffeine may enhance the stimulant effect and disrupt sleep.
- Avoid abrasive or rough food that is if you find your mouth is sensitive.

Can I have sex?

Unless your doctor tells you otherwise, it is generally considered safe to enjoy sexual activity during the time you are on chemotherapy with only a few exceptions.

Exceptions:

Avoid sex when your blood counts are low.

Avoid sexual activity that can lead to tearing of rectal or vaginal tissue. If you have vaginal dryness use a lubricant.

It is critical that you use birth control if you or your partner can get pregnant.

If you are a premenopausal woman and your periods stop during chemotherapy, you still need to use birth control as ovulation can be unpredictable. Please talk to your providers if you have questions or concerns about this issue.

Can I take supplements?

Taking a multivitamin is okay. Any additional vitamins (megadoses of particular vitamins, anti cold and flu formulas with high dose vitamin C, etc., herbal supplements, antioxidants, or herbs in any form) are NOT advised during treatment. This includes Chinese or Ayurvedic remedies, anything from a health food store recommended for cancer, or just regular herbs or vitamins you may take already. Many interact with chemotherapy in unpredictable ways. Use of supplements/ herbs could decrease the efficacy of chemotherapy you are taking to fight your cancer. Please let us know if you take supplements and herbal remedies. Once your chemotherapy is complete, you can safely resume supplement use.

Should I wear a mask, avoid children or crowds?

Unless your provider instructs you otherwise, you do not need to do any of these things. It is wise to avoid close contact with people who are actively sick. The most important thing for you and your family to do is wash your hands. Hand washing is the most important and most effective way to prevent infection. Soap and water or alcohol-based rub are both effective if used correctly. It is important to rub hands together vigorously (for 15 seconds or more, covering all hand surfaces) during hand washing and that hands are dried completely.

What else should I expect?

Miscellaneous things that might occur with your chemotherapy that are not medically worrisome but often are upsetting include:

Hair loss will depend on the chemotherapy you receive. Ask your provider if you will lose hair with your treatment.

You may notice subtle darkening of birth marks, dark patches on tongue, and darkening of nail beds. These changes are not serious and will fade after treatment.

If you experience heavy, irregular, or miss menstrual cycles, notify your provider. Patients often have heavier or longer menstrual cycles at the beginning of treatment. This may be followed by no menstrual cycles for a period of time. The cessation of menstrual cycle during chemotherapy is not an absolute indication of future fertility problems.

What side effects are most common while I am on treatment?

Common side effects of chemotherapy treatment for lymphoma are bone marrow suppression (decrease in platelet, white and red blood cells counts), hair loss, and nausea/vomiting.

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