

# Irinotecan: information for families

This information sheet explains what irinotecan is, how it is given and some of the possible side effects. Each person reacts differently to medicines, so your child will not necessarily suffer from every side effect mentioned. If you have any questions or concerns, please speak to your doctor, nurse or pharmacist.

Please read this in conjunction with any patient information leaflet provided by the manufacturer. However, please note that this information sheet explains about the use of irinotecan in children and young people so it may differ from the manufacturer's information.

# What is irinotecan?

Irinotecan is a chemotherapy medicine used for the treatment of certain types of cancer.

# How is it given?

It is given as an injection into a vein (intravenously or IV) through a cannula, central venous catheter or implantable port in hospital.

# What are the side effects?

#### Diarrhoea

Diarrhoea (runny poo), sometimes severe, can develop on the day your child has irinotecan or longer afterwards. The doctor will prescribe an anti-diarrhoeal medicine called loperamide which you will need to give exactly as explained. You should also follow general guidance for reducing the risk of diarrhoea and dehydration, such as making sure your child drinks plenty of fluids.

If your child continues to have diarrhoea or is not drinking fluids, you should watch for signs of dehydration, which include:

Extreme thirst

- Dry and hot skin
- Dry nappies for more than six hours
- Drowsiness
- Fainting
- Fast heartbeat

Dehydration can quickly become serious in children so contact your doctor or nurse immediately as your child may need to have fluids as an intravenous infusion (drop) or may need antibiotics.

## Acute cholinergic syndrome

Some people develop symptoms that are described as acute cholinergic syndrome. These can include tummy cramps, diarrhoea, sweating, runny nose, watery eyes, increased drooling, reduction in the size of the eye pupils and flushing. These symptoms can be controlled or prevented by an injection of a medicine called atropine.

## Nausea and vomiting

Anti-sickness drugs can be given to reduce or prevent these symptoms. Please tell your doctor



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or nurse if your child's sickness is not controlled or persists.

#### **Bone marrow suppression**

There will be a temporary reduction in how well your child's bone marrow works. This means that they may become anaemic, bruise or bleed more easily than usual and have a higher risk of infection.

Your child's blood count will be examined regularly to check how well the bone marrow is working. Please tell your doctor if your child seems unusually tired, has bruising or bleeding or any signs of infection, especially a high temperature.

#### Mouth sores and ulcers

You will be given advice about appropriate mouth care including a copy of the mouth care leaflet. If your child complains about having a sore mouth, please tell your doctor or nurse.

#### Loss of appetite

Your child may 'go off' food and their appetite may be reduced during treatment. The dietitian at the hospital will be able to suggest ways of making food more attractive to your child.

#### **Tiredness**

Your child may feel a bit more tired than usual. If you are concerned, please tell your doctor or nurse.

# **Changes in liver function**

Irinotecan can cause some mild changes to your child's liver function. This will return to normal when the treatment is finished. Blood tests may be taken to monitor your child's liver function.

#### **Hair loss**

Your child may lose all their hair, including their eyebrows and eyelashes, or they it may become thinner. This is temporary and the hair will grow back once the treatment has finished.

#### Less common side effects

Children may also develop other side effects although these are less common. Possible side effects include constipation, raised blood pressure and allergic reactions to the medicine.

## Interactions with other medicines

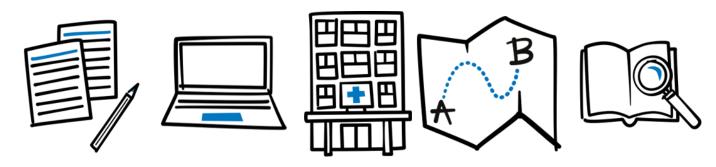
Some medicines can react with irinotecan altering how well it works. Always check with your doctor or pharmacist before giving your child any other medicine, including medicines on prescription from your family doctor (GP), medicines bought from a pharmacy (chemist) or any herbal or complementary medicines (for example St John's Wort).

## **Useful numbers**

- GOSH switchboard 020 7405 9200
- Pharmacy medicines information 020 7829 8608 (Monday to Friday from 9am to 5pm)

## **Disclaimer**

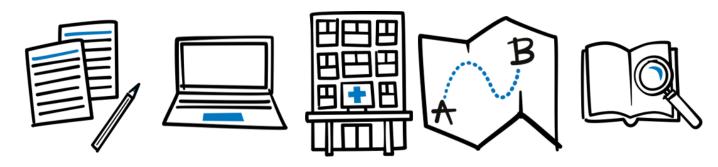
Please read this information sheet from GOSH alongside the patient information leaflet (PIL) provided by the manufacturer. If you do not have a copy of the manufacturer's patient information leaflet please talk to your



pharmacist. A few products do not have a marketing authorisation (licence) as a medicine and therefore there is no PIL.

For children in particular, there may be conflicts of information between the manufacturer's patient information leaflet (PIL) and guidance provided by GOSH and other healthcare providers. For example, some manufacturers may recommend, in the patient information leaflet, that a medicine is not given to children aged under 12 years. In most cases, this is because the manufacturer will recruit adults to clinical trials in the first instance and therefore the initial marketing authorisation (licence) only covers adults and older children.

For new medicines, the manufacturer then has to recruit children and newborns into trials (unless the medicine is not going to be used in children and newborns) and subsequently amend the PIL with the approved information. Older medicines may have been used effectively for many years in children without problems but the manufacturer has not been required to collect data and amend the licence. This does not mean that it is unsafe for children and young people to be prescribed such a medicine 'off-licence/off-label'. However, if you are concerned about any conflicts of information, please discuss with your doctor, nurse or pharmacist.



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