

Oncology / Haematology Department

Dexrazoxane (Cardioxane)

Information for patients, parents, and carers

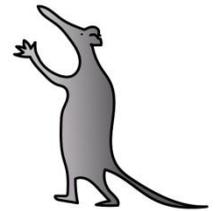
This leaflet provides information on the use of dexrazoxane in children and young people with cancer. Please read this leaflet carefully and keep it somewhere safe so you can read it again.

What is Dexrazoxane?

Dexrazoxane is a 'cardioprotective' medicine that is used to protect the heart during certain chemotherapy cycles. It helps to minimise the damage that can be caused to the heart in patients who are due to receive large total doses of anthracyclines, such as doxorubicin and mitoxantrone, across their cancer treatment.

Do all patients getting anthracyclines need Dexrazoxane?

No - Dexrazoxane is only used in treatment plans where the total dose of anthracycline will be very high, giving the patient a greater risk of heart damage. For some treatment plans the total dose of anthracycline is low enough that damage to the heart is very unlikely and therefore it is not necessary to expose patients to the possible side effects of Dexrazoxane.



How is Dexrazoxane given?

Dexrazoxane is given as an intravenous (IV) infusion into a central venous line over fifteen minutes.

When is Dexrazoxane given?

The Dexrazoxane infusion is given thirty minutes before a dose of anthracycline (such as doxorubicin or mitoxantrone) to make sure that the drug is available to effectively protect the heart during the anthracycline infusion.

Are there any possible side effects of Dexrazoxane?

Like all medicines, Dexrazoxane can cause side effects, although not everyone gets them.

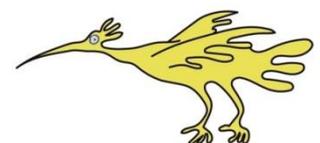
'Side-effects requiring emergency attention'

If your child becomes short of breath or is wheezing, or their face, lips or tongue start to swell, or they develop a rash, they may be allergic to dexrazoxane. Alert a member of staff on the ward immediately if you think you may be experiencing any of these effects during or after the infusion.

'Common side-effects'

Very common (may affect more than 1 in 10 patients):

- More frequent infections
- Sore throat
- Unexplained bleeding/bruising
- Tiredness



N.B. These effects are caused by reduced bone marrow function and may add to the effects caused by chemotherapy - they should only last until your blood counts return to normal after the treatment cycle.

Common (may affect upto 1 in 10 patients):

- Diarrhoea or constipation
- Stomach pain
- Loss of appetite



'Rare side-effects that are important to be aware of'

Dexrazoxane may rarely increase the risk of developing secondary malignancies in the future - the risks / benefits of this should be discussed with you by your consultant prior to starting treatment with Dexrazoxane.

The combination of using Dexrazoxane with chemotherapy may also increase the risk of blood clots.

What tests / investigations will you need before treatment with Dexrazoxane?

Dexrazoxane treatment does not require any additional tests / investigations that will not already be routinely carried out throughout your chemotherapy treatment.

Can Dexrazoxane be given with other medicines?

If you are taking any of the following medications this should be discussed with your doctor before starting treatment with Dexrazoxane:

- Phenytoin (for epilepsy)
- Tacrolimus or ciclosporin (for suppression of immune system)

Whilst receiving Dexrazoxane alongside chemotherapy, all vaccinations should be discussed with your doctor first.

Anything else important to know about Dexrazoxane?

If the patient receiving Dexrazoxane is sexually active, it is vital that they use adequate contraception to prevent unplanned pregnancy during anti-cancer treatment and for six months after.

If pregnancy is suspected, it is important that you speak to your consultant as early as possible.

Use of unlicensed/off-label medication for your child

Dexrazoxane (Cardioxane) has a licence for use in adults, its use in children is classed as off-label. Your doctor will only suggest using Dexrazoxane if they think that it is the best thing to help your child. For further information on unlicensed /off-label medicines please visit:

www.medicinesforchildren.org.uk/unlicensed-medicines

Who to contact for further details

If you have any questions about your medication whilst you are in hospital, please do not hesitate to ask one of the Oncology/Haematology team, alternatively you can telephone us on 0151 228 4811 (ext 4860).

This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment. Further information is available on the following website, but may not include advice on use in children or young people: www.medicines.org.uk/emc/product/1234/smpc

This information can be made available in other languages and formats if requested.

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