







## DOXORUBIN & DACARBAZINE (AD)

### Name of the regimen and cancer drugs

Your care team may refer to your treatment as AD. The AD regimen consists of 2 different anti-cancer therapies.

- A: Doxorubicin (DOK soh ROO bih sin): Adriamycin®
- D: Dacarbazine (duh KAR buh zeen): DTIC-DOME®

#### Common uses

This regimen is most commonly used to treat soft tissue sarcoma but may be used for other diagnoses.

### **Treatment schedule**

Your treatment will be given into your vein through an intravenous (IV) line. This will be through a central venous catheter. A central venous catheter, or central line is a long, flexible IV tube that empties into a very large vein next to the heart.

Each AD treatment is repeated every 21 days (3 weeks). This is known as one cycle. Your treatment may be given for a set number of cycles until it stops working or you have side effects which stop you from continuing treatment. This treatment is typically given for a total of 4 cycles.

- Doxorubicin continuous IV infusion over 96 hours on Day 1 through Day 4
- Dacarbazine continuous IV infusion over 96 Day 1 through Day 4

Drug	Cycle 1 Day	1	2	3	4	5	6	7	8	9	 21	Cycle 2 Day 1
Doxorubicin												
Dacarbazine												

### Other medications

Other medications may be ordered for you to prevent or treat certain side effects. These include:

	Instructions:
Anti-nausea medications	You will receive medications to prevent nausea just before your cancer treatment. You may also get prescriptions for other medications to take at home, as below:









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### **Possible drug interactions**

AD may interact with other drugs you are taking. Please inform your care providers of all prescription medicine, over-the	e-
counter medications, vitamins, and herbal products that you take.	

- ☐ Talk with your care provider or pharmacist before taking new medications, supplements, or receiving any vaccines.
- ☐ Grapefruit or grapefruit juice may interact with doxorubicin. Avoid eating or drinking these during your treatment

### **Common Side Effects**

Common side effects that have been known to happen in patients receiving AD are listed in the left side of this table. In some instances, the side effects may be reported less often but are still important to discuss. This table does not list all the known side effects for this therapy, only the ones that are experienced most often. Not every patient experiences every known side effect of a drug; even if you are taking the same drug as another patient, you may experience different side effects. Options to help manage any side effects that do occur are included on the right side of this table. These should be discussed with your care provider. If you experience any side effect you cannot manage or that is not listed here, contact your care provider.

Possible Side Effect	Management
Decreased white blood cells (WBCs) and increased risk for infection (neutropenia)	Your WBCs should be monitored by a simple blood test. When your WBCs are low, you are at a greater risk of having an infection. Take the following precautions to protect yourself from infection.  • Wash your hands often, especially before eating and after using the bathroom.  • Avoid crowds and people with fevers, flu, or other infection.  • Bathe often for good personal hygiene.  Contact your care team if you experience any signs or symptoms of an infection such as:  • Fever (temperature more than 100.4°F or 38°C)  • Chills  • Sore throat  • Burning when peeing  • Tiredness that is worse than normal  • A sore that becomes red, is draining, or does not heal.  Check with your care team before taking any medicine for a fever or chills.
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Possible Side Effect	Management
Decreased platelet count and increased risk of bleeding	Your platelets should be monitored by a simple blood test. When they are low, you may bruise or bleed more easily than usual.  Use caution to avoid bruises, cuts, or burns.  Blow your nose gently and do not pick your nose  Brush your teeth gently with a soft toothbrush and maintain good oral hygiene  When shaving use an electric razor instead of razor blades  Use a nail file instead of a nail clippers  Call your care team if you have bleeding that won't stop. Examples include:  A bloody nose that bleeds for more than 5 minutes despite pressure  A cut that continues to ooze despite pressure  Gums that bleed a lot when you floss or brush  Seek medical help right away if you have any severe headaches, blood in your urine or stool, coughing up blood, or bleeding that you cannot stop or lasts a long time.  You may need to take a break or "hold" your medication for medical or dental procedures.  Talk to your care team or dentist before any scheduled procedures.
Nausea or vomiting	<ul> <li>Take all medications as prescribed to help prevent and lessen symptoms of nausea and vomiting.</li> <li>Eat and drink slowly.</li> <li>Drink 8-10 (8-ounce) glasses of water and/or fluid (soup or broth) each day unless your care team has instructed you to limit your fluid intake.</li> <li>Eat small, frequent meals throughout the day rather than a few large meals.</li> <li>Eat bland foods; avoid spicy, fried, and greasy foods.</li> <li>Avoid intense exercise immediately after eating.</li> <li>Don't lay down right away after eating.</li> <li>Wear loose-fitting clothing for comfort.</li> <li>Avoid strong odors. Consider getting fresh air and try deep breathing.</li> <li>Let your care team know if you have nausea or vomiting.</li> <li>Your care team may prescribe medication to help with the symptoms.</li> </ul>
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Possible Side Effect	Management
Mouth irritation or sores (stomatitis or mucositis)	<ul> <li>Practice good mouth care.</li> <li>Rinse your mouth often</li> <li>Brush your teeth with a soft toothbrush or cotton swab after meals</li> <li>Use a mild non-alcohol mouth rinse at least 4 times a day (after eating and at bedtime). One example is a mixture of 1/8 teaspoon of salt and 1/4 teaspoon of baking soda in 8 ounces of warm (not hot) water</li> <li>If you have sores in your mouth, avoid using tobacco products, alcohol, and mouthwashes that contain alcohol</li> <li>Call your care team if you experience pain or sores in your mouth or throat.</li> </ul>
Hair loss (alopecia)	<ul> <li>Your hair will likely grow back after treatment is over.</li> <li>Some people choose to wear scarves, caps, or wigs. A short haircut prior to treatment may help with stress of hair loss.</li> <li>Partial or complete hair loss is likely, usually 1-2 weeks after start of therapy. This hair loss can be all body hair.</li> <li>Hair will grow back after treatment is completed, although the color and/or texture may be different</li> <li>It may take 3 to 6 months after therapy is completed to resume normal hair growth</li> <li>Be sure to keep your head covered to protect it from the sun during the summer and cold during the winter.</li> <li>If not covering your scalp during the summer months, be sure to use sunscreen when spending time outdoors.</li> </ul>
Changes in body fluid color	Doxorubicin may cause tears, sweat, saliva, and urine to have a reddish or orange tint for a few days after treatment.
Nail changes	<ul> <li>Nails on fingers and toes may look swollen and reddened and may grow ridges</li> <li>Skin/Nail changes: report any rashes, dryness or scaling to care provider, use mild soaps and rinse well, avoid hot water, use alcohol free oil-based moisturizers, report any darkening or peeling skin or any changes to the nail</li> <li>Usually this change starts at the cuticle and may affect the skin around the nail</li> <li>Wear gloves when cleaning or doing dishes, or working in the garden</li> <li>Keep nails trimmed and hands clean</li> <li>Biting, chewing, or picking at your nails can increase the risk of getting an infection</li> <li>Talk to your care team if you notice any changes in your nails</li> </ul>





Tell your care provider if you experience any symptoms of these problems:





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#### Rare but serious side effects

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Doxorubi	icin may aff	ect you	r heart's at	ility	to pu	mp blood.	You should	receive a	test to m	neasure you	ır heart f	unction	before
traatman	t hainac 🗕 t	hie ie u	ويرعالي وعالو	d an	acho	cardinaran	(ECHO) or	multinata	d acquie	ition (MILIC	(A)	Tall you	r

treatment beings – this is usually called an echocardiogram (ECHO) or multigated acquisition (MUGA) scan. Tell your healthcare provider right away if you experience new or worsening shortness of breath, chest pain, irregular heartbeat, or swelling of your ankles or legs.

Doxorubicin is a vesicant and dacarbazine is an irritant. If these medicines leak outside of the IV, they can cause severe damage to your skin. Notify your nurse right away if you feel any pain, aching, burning, itching, swelling, or redness at the site of your IV.

AD may be harmful to your liver. Speak to your care team to know when you need to have blood tests done to monitor your liver function. If you get this side effect, your doctor may change your dose or stop treatment for some time.

Severe allergic reactions are a rare but serious side effect of AD. Seek medical attention right away if you notice difficulty breathing, swelling of the mouth or tongue, or a serious rash.

Dacarbazine and doxorubicin can cause redness, pain, swelling, or blisters on the palms of your hands or soles of your feet. If you get this side effect, your doctor may change your dose or stop treatment for some time.

A secondary cancer can rarely occur months or years after treatment. Your care team will check your blood cell counts even after treatment is done to monitor for this side effect.

If you experience ANY new, worsening, or uncontrolled side effects, call your care team immediately.

(INSTITUTIONAL CONTACT INFO)









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### Handling body fluids and waste

Some of the drugs you receive may be present in urine, stool, sweat, or vomit for many days after treatment. Many cancer drugs are toxic, your bodily waste may also be toxic and can be dangerous to come into contact with. Once you have started AD, follow the instructions below for at least seven days after your treatment. This is to keep you, your loved ones, and the environment as safe as possible.

		Pregnant women should avoid touching anything that may be soiled with body fluids from the patient.
		Toilet and septic systems
		• You may use the same toilet, septic tank, and/or sewer that you usually use. If you have a low-flow toilet, close the lid and flush twice to ensure that all waste has been discarded.
		If the toilet or toilet seat becomes soiled with urine, stool, or vomit, clean the surface after every use before other people use the toliet.
		Wash hands with soap and water after using the toilet for at least 20 seconds.
		If you need a bedpan, be sure your caregiver knows to wear gloves to assist with cleanup and to wash the bedpan with soap and water every day.
		If you do not have good control of bladder or bowels, use a disposable pad with a plastic back, a diaper, or a sheet to absorb body waste.
		Wash any skin that has been exposed to body waste with soap and water.
		Linens or clothing that are soiled with body fluids or body waste should be washed separately from other linens and clothing. If you do not have a washer, place the soiled linens in a plastic bag until they can be washed.
		Wash hands with soap and water after touching linens or clothing that may be soiled with body fluids.
Inti	ma	acy, sexual activity, contraception, and fertility
	phy	s treatment may cause changes that can affect intimacy and sexuality, including desire and body image. Maintaining rsical closeness and/or intimacy with loved ones can be continued during treatment. Holding hands, hugging, and kissing be done safely. It is recommended that you talk to your care team about any restrictions or questions you may have.
† -	talk you Sor	me treatments can influence the ability to have children, also known as fertility. If you're interested in preserving fertility, to your care team before treatment. Ask your healthcare provider to determine when it is safe to become pregnant after it treatment. Patients of reproductive ability should not become pregnant or get their partners pregnant while receiving AD me of the drugs you receive may be present in semen and vaginal secretion for many days after treatment. You should use rier devices, such as condoms, during sexual activity to limit exposure to body fluids.
	С	alk to your care team about birth control. Not all options may be right for your treatment or cancer. Effective contraception ould include one or more of the following: barrier methods (e.g. condoms), hormone methods (e.g. birth control pills), or urgery.
	T	ell your care team if you become pregnant or plan to breastfeed.









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### **Additional resources**

Prescribing information:

Dacarbazine: labeling.pfizer.com/ShowLabeling.aspx?id=5938		nttps://www.accessdata.f			50467s073lbl.pdf	
	Dacarbazine:	abeling.pfizer.com/Show	'Labeling.aspx'?id=t	5938		

Additional instructions			

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Important notice: The Association of Community Cancer Centers (ACCC), Hematology/Oncology Pharmacy Association (HOPA), National Community Oncology Dispensing Association, Inc. (NCODA), and Oncology Nursing Society (ONS) have collaborated in gathering information for and developing this patient education guide. This guide represents a brief summary of the therapy derived from information provided by the drug manufacturer and other resources. This guide does not cover all existing information related to the possible uses, directions, doses, precautions, warnings, interactions, adverse effects, or risks associated with this therapy and should not substitute for the advice of a qualified healthcare professional. Provision of this guide is for informational purposes only and does not constitute or imply endorsement, recommendation, or favoring of this therapy by ACCC, HOPA, NCODA, or ONS, who assume no liability for and cannot ensure the accuracy of the information presented. The collaborators are not making any representations with respect to the medications whatsoever, and any and all decisions, with respect to such medications, are at the sole risk of the individual receiving therapy. All decisions related to receiving this therapy should be made with the guidance and under the direction of a qualified healthcare professional.

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