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When the First Treatment Doesn't Work [1]

This section has been reviewed and approved by the [Cancer.Net Editorial Board](#) [2], 01/2016

When you have cancer, your doctor will recommend a treatment plan that is most likely to have the greatest benefits and the fewest risks or side effects. A doctor who treats people with cancer is called an oncologist. The initial treatment is referred to as first-line treatment or first-line therapy. It is usually what worked best in clinical trials for patients with the same type and stage of cancer.

How well your treatment works often varies. Your first-line treatment may not work, may start but then stop working, or may cause serious side effects. Your doctor may then suggest a second-line treatment, also called second-line therapy. It is a different treatment that is likely to be effective. Depending on the type of cancer you have and the available drugs, you may be able to have third-line therapy or additional rounds of treatment after that.

Considering a different treatment option

If you need a second-line treatment, this does not mean that you did not get the right treatment the first time or that there aren't more treatments to try. However, the chance that second-line treatment, or more rounds of treatment, will have good results is usually lower than with first-line treatment.

The chance that second-line treatment will be successful depends on the type of cancer you have. Second-line treatment often works very well for certain types of cancer. People with other types of cancer may have only a small chance that second-line treatment will work.

Other factors that affect whether second-line therapy may work include:

- The [stage](#) [3] of the cancer
- How well and how long your first-line treatment worked
- How long it has been since first-line treatment ended. Second-line treatment may be more successful if a year or more has passed between the two treatments.
- The [side effects](#) [4] you experienced during first-line treatment
- Your age and overall health

Before second-line treatment starts, talk with your doctor about the goal of any suggested new treatments. Also talk about your chance of getting better. You and your doctor may decide that undergoing a new treatment is not the best choice. This may happen if the treatment has unpleasant or serious side effects or if the chance for success is small. This tough decision allows you and your doctor to focus more on controlling the symptoms of your cancer. This type of treatment is known as supportive or palliative care. Learn more about [caring for the symptoms of cancer](#) [5].

Talking with your health care team

It is important to continue to talk with your doctors and nurses about your care throughout the treatment process. Being an informed, involved patient, asking questions, and talking about your preferences will help you and your health care team work together better. Also, it will make you feel more confident about your treatment choices.

Bring a list of questions to your visits to help guide the talk. It will ensure your doctor addresses all of your concerns. You may want to print this list or [download Cancer.Net's free mobile app](#) [6] for an e-list and other tools to use during the visit.

Here are some examples of the types of questions you may want to ask your doctor:

- What is the current status of the cancer?
- Has the cancer grown and/or spread since my initial treatment?
- Are other treatment options available?

- Would you recommend starting a new treatment?
- Would you recommend participating in a clinical trial?
- Should I consider not having any new type of treatment at this time?
- What will happen if I choose not to have second-line treatment?
- If I'm worried about managing the costs related to my cancer care, who can help me with these concerns?
- Who can help me understand what aspects of my care are covered by my insurance?

If you and your doctor decide on second-line treatment, you may consider asking the following questions:

- How is this treatment different from the first-line treatment I had?
- What is the goal of this treatment? Is it to remove all of the cancer, help me feel better, or both?
- What are the potential risks and benefits of the treatment?
- What are the possible side effects of this treatment, both in the short term and the long term?
- What success rate does this second-line treatment have for my type of cancer?
- What is the expected timeline for my treatment plan?
- Do I need to start treatment right away?
- What is the chance my cancer will recur (come back) after this treatment?

- Will I need to receive this treatment in the hospital, or can I receive it in a doctor's office or clinic?
- How much experience do you have using this treatment for my type of cancer?
- Where can I find more information about the treatment you are recommending?

Find more [questions to ask the doctor](#) [7].

Considering a clinical trial

At any point during your treatment, you may consider asking your doctor whether a [clinical trial](#) [8] is an option. A clinical trial is a research study that tests a new treatment in people. It proves that it is safe, effective, and possibly better than the standard treatment you may already have had. Many clinical trials require that you have few or no previous treatments. Because of this, it is best to ask about clinical trials early in the treatment process. Enrolling in a clinical trial may be a better option for your second-line treatment than a standard treatment. Your health care team can help you review all clinical trial options that are open to you.

Coping with a new treatment

Learning your first-line treatment did not work can be scary. You may also feel a wide range of other emotions, such as anger, fear, shock, grief, and anxiety. You may wonder if you and your doctor should have chosen another option for your initial treatment. You may worry about whether you have the strength to go through a new treatment. These are all normal reactions. It is important to seek the support you need to get through this difficult time. Some strategies include:

- Sharing your fears and anxieties with family, friends, clergy, or [support groups](#) [9], in-person or online
- Connecting with someone else who has had second-line treatment and understands the emotions you are experiencing
- Expressing your feelings in a [journal](#) [10] or a blog
- Practicing [stress management and relaxation techniques](#) [11]

- Spending time outside or around nature
- Listening to music
- Watching or listening to programs or shows that make you laugh

You may continue to feel [anxious or depressed](#) [12] or are unable to focus or make decisions. If so, consider asking your health care team for help [finding a counselor](#) [13]. Even if you don't experience severe anxiety or depression, it may be helpful to talk with a counselor or a cancer social worker. It can help you develop healthy ways to understand and respond to your needs and concerns.

More Information

[How Cancer is Treated](#) [14]

[Making Decisions About Cancer Treatment](#) [15]

[Financial Considerations](#) [16]

Links

[1] <http://www.cancer.net/navigating-cancer-care/how-cancer-treated/when-first-treatment-doesnt-work>

[2] <http://www.cancer.net/about-us>

[3] <http://www.cancer.net/node/25070>

[4] <http://www.cancer.net/node/25238>

[5] <http://www.cancer.net/node/22948>

[6] <http://www.cancer.net/node/29951>

[7] <http://www.cancer.net/node/25171>

[8] <http://www.cancer.net/node/24863>

[9] <http://www.cancer.net/node/25383>

[10] <http://www.cancer.net/node/31561>

[11] <http://www.cancer.net/node/24589>

[12] <http://www.cancer.net/node/25109>

[13] <http://www.cancer.net/node/24699>

[14] <http://www.cancer.net/node/25071>

[15] <http://www.cancer.net/node/24582>

[16] <http://www.cancer.net/node/24865>