

Understanding Chemotherapy

■ What is chemotherapy?

Chemotherapy is the use of drugs to destroy cancer cells. It works by keeping the cancer cells from growing and dividing to make more cells. Systemic chemotherapy gets into the bloodstream to reach cancer cells throughout the body. Chemotherapy can be given in several ways. The most common method is intravenous (IV) chemotherapy.

In addition to chemotherapy, there are other types of systemic therapy using medication to treat cancer. These include targeted therapy, hormone therapy, and immunotherapy. Doctors will often combine drugs so they are more effective. The drug or combination of drugs, as well as the dose, depends on several factors, including the type and stage of cancer, the patient's general health, and previous cancer treatments. Find more information at www.cancer.net/chemotherapy.

■ What should I expect during chemotherapy?

Before treatment, you will meet with a medical oncologist. They will recommend a specific treatment schedule and explain the risks and benefits. If you decide to receive chemotherapy, you will be asked to give written permission. You will also have tests to help plan treatment. Your doctor may also recommend checking your dental health and heart health and addressing fertility concerns before treatment.

You may receive chemotherapy at the doctor's office, an outpatient clinic, the hospital, or at home. Chemotherapy is often given for a specific time, such as for several weeks, several months, or longer. Or, you might receive chemotherapy for as long as it works. Doctors usually give these drugs with breaks between treatments, so you have time to rest and recover before the next treatment. This lets your healthy cells heal. Each dose and recovery time is called a "treatment cycle." Several treatment cycles make up a course of chemotherapy. A course usually lasts 3 months or more.

Some cancers are treated with less recovery time between cycles. This is called a dose-dense schedule. It can make chemotherapy more effective against some cancers, but it also increases the risk of side effects.

■ What are the side effects of chemotherapy?

The side effects of chemotherapy are different for each person. They depend on the type of cancer, where it is located, the drugs and dose used, and your general health.

Preventing and controlling side effects is a major focus of your health care team, so talk with them about any side effects you experience. The most common side effect is fatigue, which is feeling tired or exhausted almost all the time. Other side effects may include pain, throat and mouth sores, diarrhea, nausea and vomiting, constipation, and blood problems. Some drugs may cause nerve damage, changes in thinking and memory (chemobrain), changes to sexual health, fertility issues, appetite loss, hair loss, and heart problems. Most side effects go away after treatment. However, some long-term side effects may continue, come back, or develop later. These can include permanent damage to some organs; difficulty with thinking, concentrating, and memory; and nervous system changes. Learn more about managing side effects at www.cancer.net/sideeffects.



Questions to ask the health care team

Regular communication is important in making informed decisions about your health care. It can be helpful to bring someone along to your appointments to take notes. Consider asking your health care team the following questions:

- ▶ What is the type and stage of my cancer? What does this mean?
- ▶ Do I need chemotherapy? If so, which drug or drugs will I receive? How will each one be given?
- ▶ What is the goal of chemotherapy? Is it to eliminate the cancer, help me feel better, or both?
- ▶ How often will I receive chemotherapy?
- ▶ How much time will each treatment take?
- ▶ Where will treatment be given?
- ▶ Will each treatment be the same? Will the drug or drug dose change during the course of treatment?
- ▶ What can I do to get ready for this treatment?
- ▶ What will I experience when I receive chemotherapy? Will it hurt or cause discomfort?
- ▶ How and when will I know if the treatment is working?
- ▶ How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- ▶ What are the potential side effects of this treatment? What can be done to prevent or relieve any side effects?
- ▶ Will this treatment affect my ability to become pregnant or have children?
- ▶ Will this treatment affect my sex life? If so, for how long?
- ▶ What are the possible long-term or late effects of this treatment?
- ▶ If I have a question or problem, who should I call?

Find more questions to ask the health care team at www.cancer.net/chemotherapy. For a digital list of questions, download Cancer.Net's free mobile app at www.cancer.net/app.

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Words to know

Adjuvant treatment: Chemotherapy given after surgery or radiation therapy to lower the risk of recurrence.

Fertility: The ability to become pregnant or have a child.

Intraperitoneal chemotherapy: Medication given directly into the abdominal cavity.

Intravenous chemotherapy: Medication given directly into a vein.

Medical oncologist: A doctor who specializes in treating cancer with medication.

Metastasis: The spread of cancer from where it began to another part of the body.

Neoadjuvant therapy: Chemotherapy given before surgery to shrink a tumor.

Oncology nurse: A member of the treatment team who specializes in caring for people with cancer, including giving chemotherapy.

Oral chemotherapy: Medication swallowed as a pill, capsule, or liquid.

Recurrence: Cancer that comes back after treatment.

Topical chemotherapy: Medication rubbed into the skin.

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