

**ADVICE FOR USERS UNDERGOING
ANTICANCER TREATMENT AND FOR THEIR
FAMILY MEMBERS:**

SIDE EFFECTS

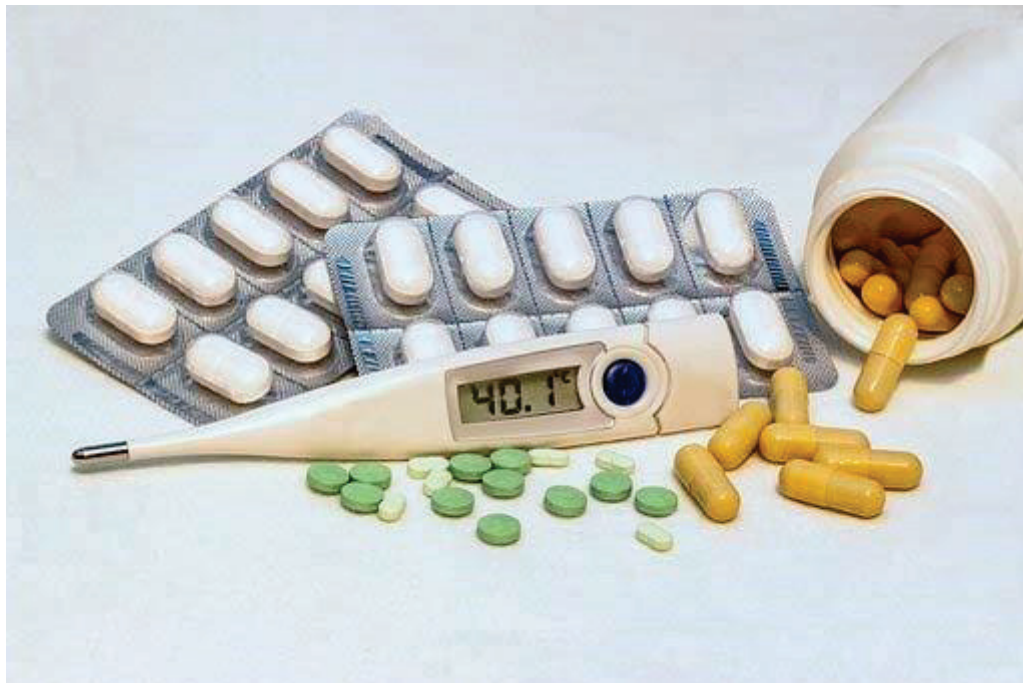


TABLE OF CONTENTS

Side effects	3
Nausea (feeling sick to your stomach) and vomiting	3
Loss of appetite	4
Diarrhea	5
Constipation	6
Fatigue	7
Stomatitis (red spots, ulcers or sores in the mouth)	8
Digestive tract pain or stomach pain.....	9
Skin reactions	10
Hair loss	11
Neuropathy (numbness, tingling)	13
Shortness of breath (difficulty breathing)	15
Anxiety	15
Pain	16
Bladder problems: difficult or painful urination, excessive urination at night or blood in your urine	17
Drowsiness	18
Important information to help you navigate your oncology care	19

You recently received a cancer diagnosis and you will soon start your treatment.

Anticancer treatments attack cancer cells nearly everywhere in your body; however, they can also affect healthy cells and cause side effects.

Since every cancer is different, every treatment plan is different too. The oncology care team will create your care plan with you and determine the frequency and duration of your treatments. For example, you may have a treatment session every day, every week, or every month.

This document contains information about the possible side effects of anticancer treatments and what you can do to manage them. This document is a continuation of the document entitled **Advice For Users Undergoing Anticancer Treatment and For Their Family Members: General Information**

Side effects

Different anticancer treatments can have very different side effects and can cause different side effects for different people. Some people have few to no side effects, while others experience many side effects. The side effects depend on your treatment schedule, your medication, your body's response to the treatment, and your general health condition. They may start immediately during your treatment, a few hours afterward, or even a few days later. A lot of side effects can be relieved. It is therefore very important to discuss any side effects with your care team, including with your oncology nurse navigator (ONN).

The following pages describe the main side effects of your treatment and provide advice on how to cope with them.

Nausea (feeling sick to your stomach) and vomiting

You will not always experience nausea or vomiting, as these symptoms are variable and temporary. Different people are more susceptible to these symptoms, and some drugs are more likely to cause nausea and vomiting than others. It is common to feel nausea for 2, 3 or even 5 days after your treatment. Generally, these side effects can be managed with the nausea medication prescribed by your doctor. **It is recommended that you take this medication as soon as you start experiencing nausea.**

How to prevent and manage nausea and vomiting:

- Drink clear fluids (water, sports drinks, broth, ginger ale, chamomile tea).
- Try relaxation techniques, such as visualization, music therapy and meditation.
- Take your nausea medication before eating so that it takes effect during and after meals.

- If you experience vomiting, limit your intake of food and beverages until the vomiting stops. Once the vomiting has stopped for 30 to 60 minutes, take sips of clear fluids (water, sports drinks, broth, fruit juice diluted with water). If you can keep these fluids down, try to eat dry, starchy food (crackers, toast, dry cereal, pretzels). If you can tolerate these foods, then try adding some protein-rich foods (eggs, chicken).
- Try to eat 5 to 6 small meals or snacks per day.
- Try to eat comforting foods that you like.
- Avoid greasy, fried, very salty or spicy foods.
- Try to eat cold foods, and avoid eating foods at extreme temperatures and that have strong smells.
- After each meal, sit or lie down with your head raised for 30 to 60 minutes.
- Wear loose, comfortable clothing that is not too tight around your stomach.

When to report nausea and vomiting:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Nausea (feeling sick to your stomach)	<ul style="list-style-type: none"> • You have persistent nausea despite taking your prescribed medication. • You have bouts of vomiting. • You have nausea that prevents you from taking your prescribed medication. 	
Vomiting	<ul style="list-style-type: none"> • You vomit more than 3 times in 24 hours. • Your bouts of vomiting are not relieved by your prescribed medication or any other remedy. 	<ul style="list-style-type: none"> • You have repeated bouts of vomiting that prevent you from drinking and eating. • You can't keep down food and fluids. You have bouts of vomiting that prevent you from taking your prescribed medication. • You vomit blood or black liquid. • You have bouts of vomiting with intolerable stomach pain. • You have bouts of vomiting with an intolerable headache.

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Loss of appetite

When you get your anticancer treatments, you may lose your appetite due to several factors (nausea, fatigue, changes to your sense of taste and smell, etc.).

It is important to talk about this with your oncology nurse navigator (ONN), who can refer you to a dietitian for advice. It is very important that you eat a good diet to keep up your weight, increase your strength and energy levels, lower your risk of infection, and promote your recovery after your anticancer treatments.

What to do if you have lost your appetite:

- Try to eat 5 to 6 small meals a day (don't wait until you're hungry).
- Try to eat foods that are rich in protein and high in calories, such as cheese, yogurt, eggs and milkshakes.
- Try to eat foods you like.
- Get help to prepare your meals. If you have trouble preparing your meals, ask your friends or relatives for help or buy pre-prepared meals.
- Drink sports drinks or meal replacement drinks (Ensure, Glucerna, Boost).
- Limit your intake of fluids 30 minutes before you eat (so that you do not feel full).
- Sit for 30 to 60 minutes after each meal to help with digestion.
- Stay as active as possible (a 15- to 20-minute walk, once or twice a day, or a 30- to 60-minute walk, three to five times a week).

When to report a loss of appetite:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Loss of appetite	<ul style="list-style-type: none">• You have a loss of appetite for more than 3 days.• You have rapid weight loss.	

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Diarrhea

Some anticancer treatment or medication can cause more frequent and watery stools. You should contact your care team before taking any over-the-counter medication.

What to do if you have diarrhea:

- Drink between 8 and 10 glasses of clear fluid per day (water, sports drinks, broth, fruit juice diluted with water), except when not medically recommended.

- Eat foods that are rich in soluble fibre and low in insoluble fibre: apple sauce, oatmeal, bananas, barley, cooked carrots, rice, white bread, plain pasta, well-cooked eggs, skinless turkey or chicken, mashed potatoes, peeled or cooked canned fruit.
- Replenish any electrolytes (potassium and sodium or salt) you have lost because of the diarrhea by eating foods like bananas and potatoes, drinking sports drinks or peach or apricot nectar, or taking an oral rehydration solution.
- Eat 5 to 6 small meals a day.
- Avoid foods that contain lactose (milk, yogurt, cheese).
- Avoid alcohol and reduce your caffeine intake (coffee, chocolate) to fewer than 2 to 3 servings per day.
- Avoid greasy, fried and spicy foods.
- Avoid drinking large quantities of fruit juice and fruit drinks.
- Avoid raw vegetables, whole wheat bread, nuts, popcorn, the peels or skins of fruits or vegetables, seeds and legumes.
- Take the diarrhea medication that your doctor has prescribed (if applicable in your case).
- Keep the skin around your rectum or ostomy clean to prevent skin irritation.
- Count and write down how many bowel movements you have a day.

When to report diarrhea:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Diarrhea	<ul style="list-style-type: none"> • You have more than 3 watery stools per day. • Your diarrhea is not relieved by your prescribed medication. • You have blood in your stool or black stool (looks like tar). 	<ul style="list-style-type: none"> • You have more than 7 bouts of diarrhea (watery stools) a day. • You have diarrhea with intolerable stomach or rectum pain. • You have diarrhea with a fever of over 38°C for one hour or fever of over 38.3°C.

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Constipation

Several factors can cause constipation: the cancer itself, the cancer treatment, some medications, changes to your diet, or the simple fact that you are not as active.

How to prevent and manage constipation:

- Drink 6 to 10 glasses of fluid per day, unless not medically recommended.
- Increase your intake of dietary fibre to 25 g/day, if you can drink enough fluids (1500 mL per day).
- Eat fruit with a laxative effect (pitted prunes and dates, figs, prune juice).

- Try to remain active, for example, by walking for 15 to 20 minutes, once or twice a day, or for 30 to 60 minutes, three to five times a week.
- Have easy access to a toilet or commode chair and to any aids you need (e.g. elevated toilet seat). If possible, avoid using a bedpan.
- Take the constipation medication prescribed by your doctor (if applicable in your case).
- Avoid unpasteurized corn syrup and castor oil; corn syrup can contain harmful bacteria and castor oil can cause severe cramps.
- If you have low neutrophils, avoid using suppositories and enemas, as they can cause anal fissures and increase your risk of infection.

When to report constipation:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Constipation	<ul style="list-style-type: none"> • You have not had a bowel movement in 3 days. • Your constipation does not respond to the prescribed medication. • Your stools are very hard and difficult to pass. • You have a stomach ache or cramps. • Your stomach is swollen or bloated. • You don't pass gas. 	<ul style="list-style-type: none"> • You have not had a bowel movement in 3 days, accompanied by intolerable stomach pain, nausea (feeling sick to your stomach) and vomiting, a bloated stomach, and a feeling of not being able to pass gas.

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Fatigue

The fatigue you feel may be different and more intense than normal fatigue.

It can be caused by:

- Your type of cancer
- Your anticancer treatment
- Anemia
- Insufficient nutrition
- A lack of exercise
- Medication side effects
- Anxiety or depression

What to do if you feel fatigued:

- Save your energy for things you want to do.
- Monitor your fatigue and any signs that it is getting worse.
- If possible, get some exercise. Moderate physical activity is recommended during and after your anticancer treatment (e.g. 30 minutes of moderate activity most days of the week: brisk walking, biking, swimming, resistance exercises).
- Eat and drink enough to meet your energy needs.
- Try calm activities like reading, games, music, gardening or nature walks.
- Ask your friends or family for help.
- Do your chores or errands when you are feeling up to them.
- Try relaxing activities, such as meditation, deep breathing, yoga, visualization or massage therapy.
- Take short naps of 20 to 30 minutes before 3:00 p.m. at the latest so that they don't affect your sleep.

When to report fatigue:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Fatigue	<ul style="list-style-type: none">• You have persistent fatigue over several days.• Your fatigue reduces your quality of life and prevents you from doing your everyday activities.• You become winded with effort.	<ul style="list-style-type: none">• You have extreme sudden fatigue with chest pain, palpitations (sensation of an increased heart rate), or both.

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Stomatitis (red spots, mouth ulcers or sores)

Mouth pain can appear around 7 to 10 days after the treatment and persist for up to 4 weeks after the end of your treatments. It can be caused by chemotherapy, facial radiation therapy, poor mouth hygiene, or malnutrition.

Stomatitis can appear in the form of redness at the corners of your lips, white spots with a metallic taste in your mouth, ulcers or pain.

What to do if you experience these symptoms:

- Rinse your mouth 4 times a day with an alcohol-free mouthwash or a homemade mouthwash.
 - Homemade mouthwash: Gargle with 15 mL (one tablespoon) of the solution for at least 30 seconds and spit it out. Prepare more solution every day and store it at room temperature.

Homemade mouthwash recipe:


- ¼ teaspoon of salt
- ¼ teaspoon of baking soda
- 250 mL of warm water

- If applicable, use the medicated mouthwash prescribed by your doctor.
- Use a soft toothbrush, rinse the brush with hot water before you use it, and let it air dry before putting it away.
- Brush your teeth and tongue at least twice a day and use dental floss once a day or according to your tolerance.
- If you wear dentures and your mouth is sensitive, try only wearing them for meals.
- Protect your lips with a water-based moisturizer.
- Drink 8 to 10 glasses of fluid a day (unless not medically recommended). Avoid acidic, carbonated, and alcoholic beverages.
- Do not smoke.
- Eat soft foods; avoid acidic, salty, spicy, very hot or dry foods. The following foods are recommended: oatmeal, bananas, applesauce, cooked carrots, rice, pasta, eggs, mashed potatoes, peeled or cooked canned fruit, soft cheese, soups, pudding and milkshakes.
- Suck on sugar-free candies or chew sugar-free gum to keep your mouth moist.
- Suck on xylitol lozenges or chew xylitol gum (maximum of six grams per day).
- Take painkillers (if prescribed by your doctor).

When to report Stomatitis:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Stomatitis (redness, ulcers in the mouth)	<ul style="list-style-type: none">• You have red spots or ulcers in your mouth with pain or difficulty swallowing or eating.• You have mouth pain that is not relieved with prescribed medication or any other remedy.	<ul style="list-style-type: none">• You have ulcers or red spots in your mouth that prevent you from swallowing fluids and medication and you have had these symptoms for over 24 hours.• You have lesions in your mouth with a fever of over 38°C for one hour or a fever of over 38.3°C.• You have intolerable pain.

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Digestive tract pain or stomach pain

Digestive tract pain or stomach pain may be due to the cancer itself, anti-inflammatory medication, gastric ulcers or gastro-esophageal reflux, anxiety, or another reason.

When to report digestive tract pain or stomach pain:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Esophagitis, gastritis (digestive tract pain, stomach pain)	<ul style="list-style-type: none">You experience pain or a burning sensation in your throat, neck, chest, or stomach.You have difficulty eating.You feel liquid regurgitate into your throat or mouth.You have esophagitis or gastritis that is not relieved by prescribed medication.	<ul style="list-style-type: none">You vomit blood.You have intolerable pain.You can't eat.

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Depending on the severity of your symptoms, your oncology nurse navigator (ONN) may suggest the following:

- Drink 8 to 10 glasses of fluids per day (unless not medically recommended); avoid acidic, carbonated or alcoholic beverages and caffeine.
- Try to eat 5 to 6 small meals a day (don't wait until you're hungry).
- Limit your intake of fluids 30 minutes before you eat (so that you don't feel full).
- After each meal, sit down for 30 to 60 minutes.
- Keep your head and shoulders elevated when lying down or sleeping.
- Take antacids as prescribed.
- Avoid greasy, fried, very salty or spicy foods.

Skin reactions

Anticancer treatments can cause skin reactions such as redness, itching, rashes, very dry skin, hand-foot syndrome (swelling of the hands, fingers and feet with pain and high sensitivity; redness on the palms of your hands and soles of your feet; skin on your feet and hands that peel and that may even turn into blisters and ulcers).

Your nails may become darker, yellow, very brittle or streaked with white lines. You may have signs of infection such as redness, oozing liquid, pain and swelling.

What to do if you experience these symptoms:

- Moisturize intact skin only with a plain water-based cream that is perfume-free and lanolin-free.
- Take warm showers or warm baths (without staying in the water for too long), use a mild soap and then pat yourself dry (do not rub).
- Avoid scented products.
- Use an electric shaver instead of a razor blade. Do not shave areas that are irritated.
- Do not scratch your skin.
- Do not wax or use hair removal creams.
- Avoid swimming pools and chlorinated hot tubs (Jacuzzis).
- Stay hydrated (drink 8 to 10 glasses a day, unless not medically recommended).
- Protect your skin from the sun and cold.
- Apply a sunscreen that is SPF 30 or more and wear a hat.
- Avoid direct exposure to the sun and to tanning beds.
- Avoid extreme temperatures (e.g. avoid using ice packs or heating pads).
- Apply moisturizing cream on the affected areas twice a day.
- Do not use acne products (except those prescribed to you).
- Do not use a skin cleanser or foundation that contains alcohol.
- Do not wear tight socks or footwear (wear comfortable socks and shoes).
- Wear gloves to do the dishes.
- Do not walk barefoot outside or on hot surfaces (sand, concrete).
- Avoid putting bandages on irritated skin.

When to report skin reactions:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Skin Reactions	<ul style="list-style-type: none">• You experience skin redness; breakouts (pimples); dryness; itchiness; tenderness; or skin that is irritated, cracking, peeling or oozing liquid.	

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Hair loss

Hair loss is a common side effect of some anticancer treatments, but not all medications cause hair loss.

Everyone is UNIQUE, and some people lose little to no hair from their treatment. Degree of hair loss has no bearing on the effectiveness of the anticancer treatments.

Hair loss often starts 2 to 3 weeks after your anticancer treatment or radiation therapy. Hair loss can sometimes happen up to 4 to 6 weeks after your treatments.

In most cases, hair loss is temporary. The amount of hair loss and how long it takes for it to grow back depends on:

- The type of medication
- The dose
- Length of treatment
- Personal factors

For many people, their hair will start to grow back before the end of chemotherapy or shortly after, generally in 4 to 6 weeks.

Radiation therapy can cause hair loss in the area where the therapy is given. The amount of hair that will be lost and grow back depends on the dose given. Regrowth generally starts 3 to 6 months after radiation therapy. Permanent hair loss is more common with higher dosages of radiation. Radiation therapy to the head often causes permanent hair loss.

Symptoms:

Hair loss symptoms vary depending on their cause and other factors. Hair can become thinner or fall out completely. It usually falls out in clumps. The remaining hair can become dull or dry. Hair loss is not usually accompanied with any other symptoms, although some people have scalp discomfort or tenderness 1 to 2 days before and during hair shedding.

With radiation therapy, hair loss occurs only in the area treated with radiation. With chemotherapy, hair loss can occur on all parts of the body:

- Head – the scalp may also feel tender.
- Face – some or all eyelashes and eyebrows may fall out.
- Body – some or all pubic, chest and underarm hair may fall out.

Loss of facial and body hair is usually less severe because hair grows less actively in these areas than on the scalp.

Things you can do to minimize the impact of hair loss:

- For long or medium-length hair, get a shorter cut to make your hair look fuller and thicker. This may also help to make the hair loss less dramatic.
- Try wearing a scarf, turban or hat if you feel sensitive about your hair loss. These will also help keep your head warm.
- Consider buying a wig or toupee. Try choosing one before your hair falls out so that it is easier to match your current hair colour and style. Check with your provincial and private health insurance for coverage for wig purchases.
- Protect your scalp when you go outside. Wear a wide-brimmed hat or a scarf, or apply sunscreen to your scalp. Wear sunglasses to protect your eyelashes.
- You can use makeup when your eyebrows or eyelashes thin or fall out because of your treatments. The *Look Good Feel Better* workshop gives makeup techniques so that you can fill in or recreate your eyebrows or eyelashes with eyeliner. Don't hesitate to ask your oncology nurse navigator (ONN) about these workshops.
- Gently wash loose hair from your arms, underarms and pubic areas. Men should also gently wash hair from their chest and face.

Hair loss treatment:

- Wash the hair on your head less frequently once it starts to fall out.
- Use a mild protein shampoo twice a week and massage your scalp. You can use a protein conditioner to help add body to thin or limp hair.
- Use a soft hair brush and a hair dryer set on low heat or let your hair dry naturally.
- Pat your hair dry instead of rubbing it.
- Avoid curling irons, straight irons and hot rollers.
- Avoid getting a perm or using hair dye, bleach, peroxide, ammonia or hair spray during your treatments. These products can contain chemicals that can irritate the scalp and damage your hair.
- Wear a soft cap at night to catch hair as it falls out.
- Use a satin pillow case, since satin is softer and smoother than other materials.

Source: Canadian Cancer Society, *Hair Loss*, <http://www.cancer.ca/en/cancer-information/diagnosis-and-treatment/managing-side-effects/hair-loss/?region=qc>, accessed 2016-12-20

Neuropathy

Some anticancer medication can have adverse effects on the nerves. Neuropathy is described as a lack a sensitivity, tingling, a burning sensation, trembling, balance problems, and pain in different areas of the body. Generally, these side effects do not last, but some can be serious.

Your treatments can also make your muscles weaker than usual or make you lose your balance.

You may not be able to button up your clothes or write with a pen or pencil. You could also have problems feeling whether something is hot or cold.

It is important to report the following symptoms, as they could be signs of neuropathy:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Peripheral Neuropathy	<ul style="list-style-type: none"> • You have tingling or numbness in your hands or feet or can't feel heat or cold. You have numbness that does not respond to prescribed medication. • You have trouble walking. • You have trouble holding objects. 	<ul style="list-style-type: none"> • You have sudden trouble walking.

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If you receive a diagnosis of neuropathy, follow these recommendations:

- If you have neuropathy in your feet:
 - Wear comfortable shoes.
 - At home:
 - Ensure that your hallways are free of clutter.
 - Have a non-slip surface in the shower; use a non-slip mat or a security bar in your bathtub.
 - Remove rugs that you could trip on.
 - When walking on uneven ground, look down to compensate for the lack of sensation in your legs and feet.
 - Make sure you have good lighting so that you can see properly.
- For all types of neuropathy: Avoid burns due to decreased sensitivity:
 - Use a thermometer to ensure that the temperature of your bath or shower water is below 120° F or 49° C.
- To avoid dizziness:
 - Try to move your legs around before getting up.

Your doctor or your oncology nurse navigator (ONN) may recommend that you see a physiotherapist or occupational therapist for the following reasons:

- You need to use a cane, walker or brace to improve your balance and gait.
- You need to start a physical fitness or TENS (transcutaneous electrical nerve stimulation) program.
- You need suggestions about wearing moccasins or velcro shoes.
- You need adapted equipment, such as utensils with bigger handles, button pullers, velcro on your computer keyboard to stimulate your sense of touch, etc.

Warnings for patients who take oxaliplatin:

- You may experience numbness or tingling in your hands or feet. This can be exacerbated by the cold, can begin a few hours after the oxaliplatin injection, and may persist for a few days afterward.
- You may also feel pain when in contact with something cold (cold liquids or food, the air, etc.).
- During or immediately following your oxaliplatin treatment, you may feel like you have trouble swallowing or breathing. This symptom is rare and will disappear a few hours after it starts.

What to do:

- Avoid exposing your hands and feet to the cold for a few days after your treatment.
- Avoid doing outdoor activities in cold weather.
- Wear gloves and socks to protect yourself from the cold for a few days after your treatment.
- Wear gloves to get food out of the fridge or freezer.
- Wash your hands with warm water.
- If necessary, wear a scarf around your neck to protect yourself from the cold.
- Avoid drinking or eating cold foods for a few days following your treatment.
- If your symptoms persist between treatments, talk to a member of your care team at your next treatment.

Source: Groupe d'étude en oncologie du Québec (GEOC): Subcommittee of the Comité national de l'évolution de la pratique des soins pharmaceutiques (CEPSP) of the Direction générale de cancérologie (DGC) of the MSSS, in coordination with the Comité de l'évolution de la pratique en oncologie (CEPO) of the INESSS.

Shortness of breath (difficulty breathing)

Shortness of breath may be caused by various factors. It is sometimes described as difficulty breathing, a feeling of choking or pressure in the chest, or an inability to catch your breath (be out of breath or gasping for air).

It is important that you contact your oncology nurse navigator (ONN) or go to the emergency room if you have the following symptoms:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Shortness of breath (difficulty breathing)	<ul style="list-style-type: none"> • You have trouble breathing. • You get out of breath more than usual. • You have shortness of breath with a cough, with or without mucus. • You have shortness of breath that keeps you from doing your daily activities. 	<ul style="list-style-type: none"> • You have sudden shortness of breath with thoracic pain (chest pain). • You have sudden shortness of breath and an inability to speak or lie flat, or both. • You have shortness of breath with fever of over 38° C for one hour or a fever of over 38.3° C.

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If your shortness of breath or your difficulty breathing does not require urgent care, your oncology nurse navigator may give you the following advice:

- Use a fan or open a window to increase the circulation of air on your face.
- Try to lower the temperature in your home.
- Rest in a seated position to make it easier to breathe.
- Do breathing and relaxation exercises (diaphragmatic breathing, pursed lip breathing).
- If you have a wheelchair, portable oxygen or a walking aid, use these during any activities that make it hard for you to breathe.
- If your doctor has prescribed inhalers (pumps), try to use them when you have shortness of breath or difficulty breathing.

Anxiety

Anxiety is a common reaction to a cancer diagnosis. The upcoming challenges and changes that this diagnosis brings can make you tense and anxious and can affect:

- Your decision-making.
- Your compliance with your treatment plan.
- Your quality of life.
- Your everyday activities.
- Your judgement.
- Your mood and more.

If possible, try to identify the cause of your anxiety (cancer diagnosis, symptoms, start of treatment, loss, financial situation, illness, work, family role, etc.).

Ask yourself the following questions and ask for help if you need it:

- If you had more information about your cancer or your treatment, would this alleviate your concerns?
- If you had more information about your symptoms, would this alleviate your concerns?
- Do you feel like you have enough help at home and to get to your appointments/treatments (transportation, financial help, medication)?
- Are you part of a support group or do you have friends or family you can turn to?
- Have you tried relaxation, breathing exercises and visualization?
- Have you tried therapeutic massages?
- Do you know about different ways to reduce your anxiety? If yes, what have you tried?

When to report anxiety:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Anxiety	<ul style="list-style-type: none">You have anxiety that affects your mood.You can't think clearly or relax.Your anxiety prevents you from doing your everyday (family and social) activities.You have trouble sleeping, trouble concentrating, frequent crying, a loss of interest in activities, or a loss of appetite.	<ul style="list-style-type: none">You have anxiety accompanied by trembling, tightness in your throat, or difficulty breathing.You are having a panic attack.You have suicidal thoughts.

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Pain

Some types of cancer or their treatments can cause pain. However, having cancer does not mean that you will feel pain. The intensity of the pain is not always related to the development of the cancer or the effectiveness of the treatment. A very small tumour that presses on a nerve can cause pain, whereas a big tumour located somewhere else in the body may be painless.

What to do when you feel pain:

- Regularly take painkillers as prescribed.
- Take breakthrough doses as needed. In a workbook, note down your pain and the effectiveness and side effects of your painkillers.
- Be sure to have regular bowel movements, as painkillers can cause constipation. (See page 6: *How to prevent and manage constipation.*)
- Think ahead about activities that may be painful, e.g. take your painkiller an hour before taking a bath.
- Try guided imagery techniques and distract yourself while waiting for the painkillers to take effect. A massage can promote muscle relaxation. Heat or cold can reduce your sensation of pain. Social activities can be a distraction. Music and relaxation exercises help with concentration and focus your attention on sensations other than pain.

When to report pain:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Pain	<ul style="list-style-type: none"> • You have pain that you have experienced before that is not relieved by your current pain medication. • You experience new pain. • You have pain that keeps you from doing your everyday activities. • Your pain increases. 	<ul style="list-style-type: none"> • You have new acute pain • You have intolerable pain.

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Bladder problems: difficult or painful urination, excessive urination at night, or presence of blood in your urine

Some anticancer treatments and infections can damage cells in your kidneys, ureters and bladder.

Because of the decrease in white blood cells caused by your anticancer treatment, you have a higher risk of getting a urinary tract infection.

When to report bladder problems:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Bladder problems	<ul style="list-style-type: none"> • You experience minor changes in your normal urinary habits. • You experience major changes in your urinary habits resulting in discomfort or distress. You experience a change in the colour and appearance of your urine. • You have trouble emptying your bladder. • You have trouble urinating. • You feel an urgent need to urinate. • You feel the need to urinate often. • You feel that your bladder is never completely empty. • You have incontinence (a lack or a loss of control of your bladder). 	<ul style="list-style-type: none"> • You have acute and intolerable pain. • You can't urinate for more than 10 hours despite staying hydrated. • You have a large amount of blood your urine. • You have a fever of over 38° C for one hour or a fever of over 38.3° C.

Source: Telephone nursing practice and symptom management guidelines, Cancer Care Ontario, 2004 and Canadian Cancer Society, accessed 2016-12-21.

What to do when urinating is difficult or painful, when you need to urinate too often at night, or if there is blood in your urine:

- Drink 8 to 10 glasses of fluid a day, unless not medically recommended.
- Reduce the amount of fluids you drink after supper.
- Avoid foods and fluids that irritate the bladder, i.e. spices, coffee, alcohol.
- Use a lubricant during sexual intercourse; for women: urinate after sexual intercourse.
- Avoid staying too long in a bath or hot tub.
- Avoid powdered or perfumed personal hygiene products.

Drowsiness

Drowsiness means a strong feeling of wanting to go to sleep. It is normal to feel drowsy at night, when you usually go to bed, or in the early afternoon.

Anyone can feel drowsy, especially when they are tired, have had a bad night, or have just eaten a large meal. Drowsiness is not normal when it happens daily, affects your attention, and interferes with your everyday activities. Drowsiness can be a sign of an illness or disease, and you must see a health care professional if you have this symptom.

When to report drowsiness:

Symptoms	Report if: Daytime: Contact your ONN* Evening and night: Info-Santé 811	Go to the emergency room if:
Drowsiness (tendency to fall asleep)	<ul style="list-style-type: none"> • Your drowsiness keeps you from doing your everyday activities. • You have trouble staying awake. 	<ul style="list-style-type: none"> • You find it abnormally hard to wake up.

Source: © Government of Quebec, 2011, DGC, *Oncology Passport*

If you develop any other symptom or side effect, please do not hesitate to talk to a health care professional or your oncology nurse navigator (ONN).

Important information to help you navigate your oncology care

<p>To request or change an appointment with your hematologist-oncologist</p>	<p>Contact your hematology-oncology clinic (see contact information in the appendix).</p>
<p>To request an address change or to change or add a phone number to your file:</p>	<p>Go to the reception of your hematology-oncology clinic.</p>
<p>For insurance or other forms that your hematologist-oncologist must fill out:</p>	<p>Leave your form with the secretary of your hematology-oncology clinic. When the hematologist-oncologist has filled out your document(s), an administrative officer will contact you to come pick them up. Please note that there are fees for this service.</p>
<p>To get a medication renewed:</p>	<p>At your appointment with the hematologist-oncologist, it is your responsibility to ensure you have enough medication until your next appointment. If you nevertheless need to have your prescribed medication renewed by the hematologist-oncologist, ask your pharmacist to fax a renewal request to your hematologist-oncologist. (See contact information in the appendix.)</p>
<p>If you do not have a blood sample requisition:</p>	<p>Call the administrative officer of the hematology-oncology clinic.</p>

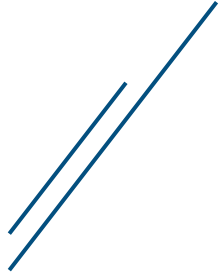
Below is a list of services in each region.

Region	Service	Contact information: hematology-oncology clinic and CRID
Laurentides Centre intégré de santé et services sociaux des Laurentides	Hôpital Régional de Saint-Jérôme Centre de cancérologie Saint-Jérôme 290 De Montigny Street Block D, Room D144 Saint-Jérôme, Quebec J7Z 5T3	Hematology-oncology outpatient clinic Hours: 7:00 a.m. to 5:00 p.m. Appointment scheduling: 9:00 a.m. to 4:00 p.m. Phone: 450-431-8366 Fax: 450-431-830
	Centre de cancérologie de Saint-Eustache 14 Industriel Blvd. Saint-Eustache, Quebec J7R 5B8	Hematology-oncology outpatient clinic Hours: 7:30 a.m. to 4:00 p.m. Appointment scheduling: 8:00 a.m. to 4:00 p.m. Phone: 450-473-6811, ext. 47700 Fax: 450-473-3582
	Hôpital d'Argenteuil Centre multiservices de santé et de services sociaux d'Argenteuil 145 Providence Avenue Lachute, Quebec J8H 4C7 Room U-114 treatment room (for appointments, check in at Counter 345 at the main entrance).	Hematology-oncology outpatient clinic Hours: 8:00 a.m. to 4:00 p.m. Appointment scheduling: Phone: 450-562-3761, ext. 72323 Fax: 450-566-3343
	Hôpital de Mont-Laurier 2561 Lièvre Road South Mont-Laurier, Quebec J9L 3G3	Hematology-oncology outpatient clinic Hours: 8:00 a.m. to 4:00 p.m. Appointment scheduling: 8:00 a.m. to 4:00 p.m. Phone: 819-623-1234, ext. 4293 Fax: 819-623-0861

Region	Service	Contact information: hematology-oncology clinic and CRID
	Hôpital Laurentien 234 Saint-Vincent Street Sainte-Agathe-des-Monts, Quebec J8C 2B8	Hematology-oncology outpatient clinic Hours: 8:00 a.m. to 4:00 p.m. Appointment scheduling: 8:00 a.m. and 4:00 p.m. Phone: 819-324-4000, ext. 34721 Fax: 819-324-4112
	Centre de services de Rivière-Rouge 1525 L'Annonciation Street North Rivière-Rouge, Quebec J0T 1T0	Hematology-oncology outpatient clinic Hours: 8:00 a.m. to 4:00 p.m. Appointment scheduling: 8:00 a.m. to 4:00 p.m. Phone: 819-275-2118,ext. 53340 Fax: 819-275-1201
Laval Centre intégré de santé et de services sociaux de Laval	Hôpital de la Cité-de-la-Santé 1755 René-Laennec Blvd. Laval, Quebec H7M 3L9	CRID (PQDCS) / Breast Clinic RC-135. Hours: 8:00 a.m. to 4:00 p.m. To schedule an appointment: fax your consultation request with the test results filled out. Fax: 450-975-5967 Phone: 450-975-5505
	Centre Intégré de cancérologie de Laval (CICL) 1755 René-Laennec Blvd. Laval, Quebec H7M 3L9	Hematology-oncology outpatient clinic Hours: 8:00 a.m. to 4:00 p.m. Appointment scheduling: 8:00 a.m. to 4:00 p.m. Phone: 450-975-5359 Fax: 450-975-5044

Region	Service	Contact information: hematology-oncology clinic and CRID
		Radiation-oncology (supraregional service) Hours: 7:30 a.m. to 5:30 p.m. Appointment scheduling: 8:00 a.m. to 4:00 p.m. Phone: 450-975-5359 Fax: 450-975-5044
Lanaudière Centre intégré de santé et de services sociaux de Lanaudière	Hôpital Pierre-Le Gardeur 911 Pionniers Road Terrebonne, Quebec J6V 2H2	Hematology-oncology outpatient clinic Hours: 6:30 a.m. to 4:30 p.m. Appointment scheduling: 8:30 a.m. to 4:30 p.m. Phone: 450-654-7525, ext. 23139 or 23159 Fax: 450-654-1951
	Centre Hospitalier de Lanaudière 1000 Sainte-Anne Blvd. Saint-Charles-Borromée, Quebec J6E 6J2	Hematology-oncology outpatient clinic Hours: 8:00 a.m. to 5:00 p.m. Appointment scheduling: 1:00 p.m. to 4:00 p.m. Phone: 450-759-8222, ext. 4065, option 1 Fax: 450-756-4750
		CRID (PQDCS) / Breast Clinic C1-270 Hours: 8:00 a.m. to 4:00 p.m. Appointment scheduling: Fax the consultation request Fax: 450-585-2298 Phone: 450-470-2652

Updated March 23, 2018



The CISSS des Laurentides has over 80 health and social services facilities and a wide variety of experts who provide quality health care services. Here, patients are at the heart of our vision.

Our organization includes hospitals, CLSCs, residential and long-term care centres, youth protection centres, rehabilitation centres for troubled youth, intellectual disability and autism spectrum rehabilitation centres, physical disability rehabilitation centres, and addiction rehabilitation centres. Our teams are recognized for their commitment and professionalism and work together to provide quality services.

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Communications – Mai 2019

**Centre intégré
de santé
et de services sociaux
des Laurentides**

Québec 