PATIENT & CAREGIVER EDUCATION

Adjuvant Therapy for Breast Cancer

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This information explains what adjuvant therapy is, how different kinds of adjuvant therapies work, and how to manage possible side effects.

**What Is Adjuvant Therapy?**

Adjuvant therapy is treatment given in addition to your surgery. It’s used to kill any cancer cells that may be left over in your breast or in the rest of your body. It’s also sometimes given before surgery to help make the procedure easier to do. Studies have shown that adjuvant therapy helps many people with breast cancer. Your doctor will decide which therapy is right for you. Adjuvant therapy could be one or a combination of the following:

- **Chemotherapy** can kill cells by stopping the cells’ ability to multiply. Your chemotherapy may last 3 to 6 months or longer.

- **Hormonal therapy** uses medications that stop your body from making some hormones or change the way they work. Hormonal therapy may be taken for years.

- **Antibody therapy** attacks growth proteins on cancer cells. Antibody therapy may be taken for up to a year.

- **Radiation therapy** targets cancer cells that doctors can’t see but remain in the breast or lymph nodes after surgery. Radiation therapy may last 3 to 7 weeks.

**Planning Your Adjuvant Therapy**

Your treatment plan is created for you based on multiple factors. Your doctor takes your full history, does a physical exam, reviews your test results, pathology results and x-rays, and then designs your treatment plan. Everyone’s treatment plan is different. You will review your treatment plan with your doctor in detail.

If you need radiation or surgery, your doctor will speak with you about how it fits in with your treatment plan. Ask your doctor or nurse any questions you may have.

**Possible Side Effects and How To Manage Them**

If you are experiencing any of these side effects, call your doctor or nurse. They may be able to give you advice or a prescription to help you feel better. You don’t need to wait for your next appointment.

Chemotherapy works best against cells that divide quickly, such as cancer cells. Some normal cells also divide quickly, including:

- Blood cells
- Hair roots
- Nails
- Cells that line your mouth, throat, stomach, and intestines

Because chemotherapy can kill these cells as well as the cancer cells, you may have a decrease in your blood counts, hair thinning or loss of your hair, changes in your nails, nausea, vomiting, or diarrhea while receiving chemotherapy. The side effects of chemotherapy depend on which medication you are receiving and how much is given. For example, not all medications cause nausea and vomiting or hair loss.

Hormonal therapies can cause changes in your hormone levels. For women, this can change or stop menstrual periods and cause side effects related to menopause. For men, there is a small chance that they
will have a change in their ability to maintain an erection. Both men and women may notice a decrease in their sexual desire during chemotherapy.

Antibody therapies have fewer side effects, but can sometimes affect the way some of your organs work.

More specific possible side effects of chemotherapy, hormonal therapy, and antibody therapy are described below. Each section also gives tips on how to feel better during your treatment. Your doctor and nurse will tell you which side effects to expect from your treatment. If you will receive radiation therapy to your breast as part of your adjuvant therapy, your nurse will give you additional information.

**Nausea and Vomiting**

Some chemotherapy causes nausea and vomiting. Nausea and vomiting happen because chemotherapy irritates either the areas of your brain that control nausea or the cells lining your mouth, throat, stomach, and intestines.

There are medications that are very good at preventing or controlling nausea. If the chemotherapy you will receive can cause nausea and vomiting, you will get antinausea medication before, after, or both for each chemotherapy treatment. This will reduce the chance that you will have nausea. You will also get a prescription to take home with you. Your nurse will tell you how to take the medication. Taking it the right way will give it the best chance to work.

Nausea can make you want to stop eating. Not eating and drinking will deprive your body of the energy it needs to repair itself from the effects of your chemotherapy. Below are some hints to help you lessen your nausea. Also, ask your nurse for the resource *Eating Well During and After Cancer Treatment.*

**What you can do:**

- Take your anti-nausea medication as instructed by your doctor or nurse. Don't try to hold off taking the medication to see if the nausea will go away.
- Eat dry starchy foods (i.e., crackers, pretzels) or hard candy to help prevent nausea.
- Eat small frequent meals. Stop eating before you feel too full.
- Drink 8 to 10 glasses of liquids every day. This will prevent dehydration from vomiting. Sip a little bit at a time to avoid more nausea.
- Practice relaxing. Listen to soft music, breathe deeply, do yoga, or meditate. You might also try to think of pleasant things to distract yourself.
- Ask your doctor or nurse to refer you to a dietitian for more suggestions.

**What to avoid:**

- Fried, greasy, creamy, or spicy foods.
- Eating or cooking foods that have a strong odor.

**Call your doctor or nurse if you:**

- Are vomiting for 24 hours.
- Have nausea that does not stop even if you take your anti-nausea medication.
- Are unable to drink or keep anything in your stomach.
• Feel light-headed or dizzy.
• Have heartburn or stomach pain.

**Hair loss or thinning (alopecia)**

Some chemotherapy medications cause hair loss. Hair loss usually starts about 2 to 4 weeks after the first chemotherapy treatment. If you do lose your hair, it will begin to grow back once you’re no longer taking that chemotherapy medication. Some hormonal therapies can mildly affect your hair as well.

Generally, hair loss is affected by:

• The type, dose, and length of time you take the medication(s).
• The amount of hair you have before treatment.
• The amount of chemical processing (e.g., perm, dye) the hair had before treatment.

**What you can do:**

• Go to a Look Good Feel Better class to learn make-up and skin care techniques. Call 212-639-5665 to sign up.
• Use a mild shampoo.
• Talk with your doctor or nurse about getting a prescription for a wig before you start treatment. People who lose their hair from cancer treatment may have insurance coverage for a wig. Check with your insurance provider for more information.
• Wear scarves and soft terry cloth turbans, if they appeal to you; they are very comfortable and add variety.
• Use a low heat setting when blow-drying your hair.
• Speak with your doctor about trying a cold cap. A cold cap is a cap filled with cold gel that is worn around your scalp to reduce the amount of chemotherapy that reaches your hair follicles. This can help minimize hair loss. For more information, read *Managing Hair Loss with Scalp Cooling During Chemotherapy for Breast Cancer.*

**What to avoid:**

• Bleaching or perming your hair.
• Using hot curlers.

**Low white blood cell count (leukopenia)**

A low white blood cell count raises your risk of getting an infection. Low counts can occur 7 to 14 days after each treatment but may last longer in some cases. A medication given by injection (shot) may be used to raise your white blood cell count or prevent it from falling.

**What you can do:**

• Take your temperature by mouth every 4 hours if you think you have a fever, body aches, or chills, or notice an increased temperature of your skin. Call your doctor or nurse if it is above 100.4° F (38° C). This is very important especially 7 to 14 days after each treatment.
• Ask your nurse or doctor if you may take acetaminophen (Tylenol®).

• Always wash your hands after using the toilet and before eating.

• Protect your hands from cuts and burns:

• Do not cut your cuticles. Push them back instead.

• Wear gloves when you wash the dishes, cook, or garden.

• Keep your skin moisturized to avoid skin cracking.

• If you have a cut, wash it with soap and water right away. Watch for signs of infection (redness, swelling, or pus). If any develop, call your doctor.

**What to avoid:**

• Being around people who are sick or have been exposed to anything that you can catch, such as chickenpox, strep, tuberculosis (TB), the flu, measles, or the common cold.

• Dental work or surgery. Check with your doctor or nurse first.

• Using tampons or douching.

• Using dental floss.

• Using suppositories (medication taken through the rectum, vagina, or penis), rectal thermometers, and enemas.

• Live virus vaccines, such as the shingles vaccine, MMR, chickenpox vaccine, and the nasal spray flu vaccine.

• Being around anyone who has received a live virus vaccine or nasal spray vaccine for 7 to 10 days after they received it.

**Contact your doctor or nurse:**

• If you have redness, swelling, or pus leaking from a wound.

• If you have an oral temperature of 100.4° F (38° C) or higher.

• If you have chills or body aches, with or without fever.

• Before you receive any vaccines.

**Low red blood cell count (anemia)**

Anemia is when your body does not make enough red blood cells. Red blood cells carry oxygen through your body. When you don’t have enough red blood cells, you may feel tired (fatigue) or short of breath. Anemia can occur 7 to 14 days after each chemotherapy treatment but is more likely to occur after months of chemotherapy treatment.

**What you can do:**

• Eat foods that have iron, which may lessen your chance of becoming anemic.
  
  – Iron-rich foods include lean meat, chicken, fish, dried apricots, raisins, beans, and lentils. For more information on how to get your daily dose of iron, read [Iron in Your Diet](#).

• Choose activities that will help you save energy.
What to avoid:

- Anything that makes you feel tired.
- High altitudes, which may make you extremely dizzy.

Contact your doctor or nurse if you have:

- Dizziness
- Severe fatigue
- Shortness of breath
- Chest pain or pressure

Low platelet count (thrombocytopenia)

A low platelet count lowers your body's ability to stop bleeding or bruising. This side effect is less common than having low red or white blood cell counts. You may have a low platelet count 10 to 14 days after chemotherapy, but this is more common after months of chemotherapy.

Ask your doctor if you can take anti-inflammatory medication such as ibuprofen (Advil®, Motrin®) or naproxen (Aleve®, Naprosyn®). These medications can increase bleeding. Notify your doctor if you take aspirin or blood thinners for other health conditions.

What you can do:

- Use a soft tooth brush for your teeth and gums.
- If you currently floss your teeth, you may continue to do so gently. If you do not floss regularly, don’t start now.
- Be careful not to cut or bump yourself.
- Watch for any unexplained bruises or red spots on your skin.

What to avoid:

- Sharp objects (e.g., cuticle scissors, straight razors, sharp knives).
- Using rectal thermometers or suppositories.
- Dental work or surgery.
- Contact sports or anything that may result in bumping or banging.
- Having more than 3 alcoholic drinks per week. Alcohol can affect the body’s ability to form clots by affecting how the liver works.

Contact your doctor or nurse if you have:

- Blood in your urine, stool, vomit, or when you cough.
- Unexplained bruising or bleeding from your nose or gums.
- Changes in your vision.
- Headaches or any signs of a stroke, such as weakness on one side.
Effects on the Hands or Feet (Neuropathy)

Some chemotherapy can affect the nerves in your hands or feet. You could develop some numbness or tingling in your fingers, toes, or both. This may be temporary or permanent depending on how long you are on the chemotherapy. Your doctor may be able to make the neuropathy less bothersome by using medications or changing the dose of your chemotherapy. For more information on neuropathy, read Neuropathic Pain.

What you can do:

- Speak with your doctor about applying ice to your hands and feet during treatment to help reduce neuropathy. For more information, read Nail Cooling During Treatment with Taxane-based Chemotherapy.
- Be extra careful to avoid burning yourself when using the stove, oven, or iron. You may not be able to feel heat as much as you used to.

What to avoid:

- Using heating pads or hot packs.

Contact your doctor or nurse if you have:

- Problems holding a pencil or pen, or closing buttons.
- Pain, burning, or tingling in your fingers or toes.
- Trouble walking or feeling the ground when you walk.

Taste changes

Having a metallic taste in your mouth is common during treatment. Some foods may taste bland or unpleasant.

What you can do:

- Chew flavored gum.
- Suck hard candy to lessen the metallic taste. If it happens while you are getting chemotherapy, ask your nurse for a candy.
- Ask your doctor or nurse to refer you to a dietitian for more suggestions.

What to avoid:

- Eating foods that cause an unpleasant taste.

Diarrhea

Loose or liquid stools (diarrhea) are caused by irritation of the lining of the stomach and intestines.

What you can do:

- Drink 8 to 10 glasses of liquids daily so that you don’t get dehydrated. Water, juices diluted with water, or liquids containing electrolytes, such as Pedialyte®, Gatorade®, Powerade®, and other sports drinks are good choices.
- Eat bananas, rice, applesauce, and white toast.
- Ask your doctor or nurse if you can take medication to help, such as bismuth subsalicylate (Kaopectate®) or loperamide (Imodium A-D®).
• Keep your rectal area clean and dry to help decrease skin irritation.

• For rectal irritation, try warm sitz baths. You can also apply a soothing cream such as A&D®, petroleum jelly (Vaseline®), or hemorrhoidal cream.

• Do not use suppositories without checking with your doctor.

• Apply a warm cloth to your stomach, which may soothe cramping. Be careful not to burn yourself.

• Ask your doctor or nurse to refer you to a dietitian for more suggestions.

What to avoid:

• Foods that contain high amounts of fiber (e.g., bran, oats, whole wheat or whole grain breads and cereal, brown rice, beans)

• Foods and drinks that contain caffeine or high amounts of artificial sweeteners or sugar (e.g., coffee, tea, colas, and other soft drinks). They may stimulate your bowel.

• Dairy products

• Raw fruits and vegetables. Have canned fruits and cooked non-gassy vegetables like green beans or carrots instead.

• Foods that make you bloated or gassy (e.g., cabbage, beans).

• Stool softeners

• Rectal suppositories

Contact your doctor or nurse if you have:

• Three or more loose, watery stools in 1 day.

• Diarrhea, despite 2 days of eating bananas, rice, applesauce, and white toast.

• Rectal irritation that doesn’t go away.

• Blood in your stool.

Constipation

Constipation is having less than your usual number of bowel movements or having hard stools. It is a common side effect of medications used to treat pain and nausea. Some chemotherapy can also cause constipation.

What you can do:

• Drink 8 to 10 glasses of decaffeinated liquids daily.

• Slowly increase the amount of fiber you eat to help prevent gas. Fiber is found in fruits, vegetables, cereals, and grains (e.g., bran, oats, whole wheat or whole grain breads and cereal, brown rice, beans). For more information on how to get more fiber in your diet, read Food Sources of Fiber.

• Exercise if you can. Walking is an excellent way to keep active, and it helps decrease constipation.

• Ask your doctor or nurse if you can take medications such as docusate sodium (Colace®), senna (Senokot®), or polyethylene glycol (MiraLAX®).

• Ask your doctor or nurse to refer you to a dietitian for more suggestions.
What to avoid:

- Suppositories
- Enemas

Contact your doctor or nurse if you:

- Have not had a bowel movement or passed gas for more than 3 days.
- Have hard stools or difficulty moving your bowels for more than 3 days.

Mouth Sores (Stomatitis)

Some treatments can cause painful areas or sores in the mouth or throat. These are often temporary.

What you can do:

- Rinse your mouth 4 times a day using either a mixture of 1 to 2 teaspoons of salt in 1 quart of water or an alcohol-free mouthwash. Do not swallow the solution.
- Gargle with the salt solution or using mouthwash in the morning, after each meal, and at bedtime. If you vomit, clean your mouth well and gargle afterward.
- If you are receiving the chemotherapy fluorouracil (5FU), you can suck on ice chips during treatment to decrease mouth sores.
- Keep your lips moist with lip balm or ointments to prevent drying.
- If you have dentures, remove them during mouth rinses and before bedtime.
- Eat soft foods.
- Ask your nurse or doctor to refer you to a dietitian if you are unable to eat.

What to avoid:

- Commercial mouthwashes that may have alcohol or hydrogen peroxide. These can make the sores worse.
- Acidic, salty, coarse, sharp, or spicy foods.
- Foods that are hot to touch.

Contact your doctor or nurse if you:

- Get mouth sores frequently.
- Have pain when eating or swallowing.
- Cannot get enough liquids down to keep yourself hydrated.

Allergic reaction

Some medications can cause an allergic reaction while they’re being given but this doesn’t happen often. You will get medication to prevent this, if needed. If you get medication to take at home before your treatment, take it as directed and tell your healthcare team if you did not take it. You will also be closely monitored by your nurse during your treatment.

Your doctor and nurse will tell you if any of the medications you’re getting can cause a reaction.
Contact your doctor or nurse if you:

- Have a rash, shortness of breath, or swelling while you're at home.

**Pain**

Getting chemotherapy is not painful. However, some chemotherapy or the medications given to prevent low blood counts, can cause aches between treatments. Some hormonal therapies can cause achy joints. Tell your doctor or nurse if you have pain. Your doctor can adjust your medication or prescribe another medication to make you more comfortable. Ask if it is safe to use over-the-counter anti-inflammatory pain medications, such as ibuprofen.

**Eye and vision changes**

Some chemotherapy medications may cause dry eyes or increased tearing. If this happens, you can use wetting drops or allergy eyedrops. If you have blurry vision during your treatment, see your eye doctor. It may be because your eyes are dry or tearing.

Some chemotherapy medications may cause your eyelashes and eyebrows to fall out. If this happens, it is temporary. They will grow back in after you have stopped taking that chemotherapy medication.

**Skin and nail changes**

Chemotherapy can cause changes to your skin. You may have darkening of your skin, nails, tongue, and the veins in which you have received the chemotherapy. You may also have general skin changes, including:

- Dryness
- Itchiness
- Cracking
- Sensitivity to sunlight

**What you can do:**

- Apply body lotion and hand creams while your skin is still moist, such as after a shower.
- Use a sunscreen with an SPF of 30 or higher every day.
- Wear broad-brimmed hats.
- Wear long-sleeved clothes.
- Wear light-colored clothes.
- Speak with your nurse about using ice on your fingers and toes during chemotherapy to decrease nail changes. For more information, read *Nail Cooling During Treatment with Taxane-based Chemotherapy.*

**What to avoid:**

- Long, hot baths or showers.
- Being in direct sunlight.
Contact your doctor or nurse if:

- Your skin is peeling or blistering.
- You have a rash.
- You have any new bumps or nodules on your skin.

Weight changes
Some people gain weight during treatment, while others lose weight.

Weight gain can be due to:

- Fatigue, which decreases your activity level and causes you to burn fewer calories.
- Eating a lot of carbohydrates. Eating carbohydrates may help relieve nausea in some people.
- Overeating because some people are afraid that weight loss means they are sick.
- Drinking more juices and drinks high in sugar.
- Starting menopause during or after treatment which can cause some women's metabolisms to change.

What you can do

- Eat a well-balanced diet and avoid extra calories.
- Exercise regularly.
- Ask your doctor or nurse to refer you to a dietitian for more suggestions.

Weight loss can be due to:

- Nausea from medications.
- Mouth sores which make it hard to eat.
- Lack of appetite.
- The effects of cancer.
- Loss of appetite from medication, constipation or depression.

What you can do:

- Eat a well-balanced diet.
- Eat small frequent meals if you can’t finish a large meal.
- Add extra calories to your meals and by snacking in between.
- Ask your doctor if there are medications that can improve your appetite.
- Ask your doctor or nurse to refer you to a dietitian for more suggestions.

Heart problems
Some chemotherapy can affect the way your heart functions. You may have a fast heart beat, feel fatigued, or be short of breath. Your doctor will tell you if the treatment you are receiving requires any heart tests.
Tell your doctor or nurse if you have:

- Fast or irregular heartbeats.
- Trouble breathing when you exert yourself.
- Chest pain or heaviness.

**Fatigue (tiredness)**

Many people describe fatigue as feeling weak or having no energy. Fatigue from treatment can range from a mild to an extreme feeling of being tired.

What you can do:

- Eat a well-balanced diet including protein sources like chicken, fish, eggs, lentils or peanut butter, grains such as pasta, rice, breads and cereals, and fruits and vegetables.
- Do activities and exercise when you have the energy.
- Make time to rest.
- Ask others to help you with your chores.
- Check with your doctor or nurse before starting any vitamins or supplements.
- Talk with your doctor or nurse. Your nurse can give you the resource *Managing Cancer-Related Fatigue*, which includes a lot of helpful information.

**Memory changes**

Some people find they cannot think as clearly or as quickly as they did before treatment. You may find that you:

- Have difficulty concentrating or focusing.
- Have difficulty doing more than one thing at a time.
- Have trouble remembering things.

These symptoms can be caused by various factors. Fatigue, mood changes, stress, anxiety, normal aging, hormonal changes, the disease, and anesthesia can affect your thinking for some period of time.

We are studying the impact that the medications we use for treating breast cancer can have on thinking. We hope to learn why problems with thinking occur, how long they last, and who develops them. We also hope to find out how to manage these problems until they get better.

Many people do not experience any of these problems. We cannot predict who might have them, but they often go away over time. If this is something you're worried about, talk with your doctor. They can also tell you about any studies that you might be eligible to participate in, if you're interested.

If you do experience any of these symptoms, an occupational therapist can help you maintain participation in everyday activities and can provide helpful strategies for improving attention, concentration, and memory.

What you can do:

- Make sure you get enough sleep.
- Eat a well balanced diet.
• Read and socialize to keep yourself stimulated.
• Seek counseling if you have anxiety or depression because they can add to memory problems.

What to avoid:
• Unnecessary medication that can make you sleepy.
• Stress, as much as possible. It can be distracting.

Contact your doctor or nurse if:
• The changes in memory are preventing you from doing your normal daily activities.
• You also have headaches.
• You also have trouble with your vision or balance.

**Hot flashes**
You may have hot flashes or sweats that may interfere with your daily routine or your sleep.

What you can do:
• Check with your doctor before taking any herbs or over-the-counter substances for hot flashes. Do not use herbal remedies, such as oil of evening primrose, cohosh or red clover. They can work like estrogen, which might stimulate breast tumors.
• Wear comfortable, loose-fitting cotton clothing.
• Ask your doctor or nurse how to manage or treat menopausal symptoms.
• Avoid hot foods and beverages, spicy food, caffeine, and alcohol.
• Drink 8 to 10 glasses of liquids daily so that you don’t get dehydrated.

For more information on how to manage hot flashes, read *Managing Your Hot Flashes Without Hormones.*

**Sexual intimacy**
Breast cancer often changes how breasts look. This may be because of a tumor, radiation, or surgery. Although these changes can be covered by clothing, side effects such as hair loss may change your looks in ways that cannot be hidden as easily. Changes in your body from chemotherapy and hormone therapy may affect:
• How you feel about yourself.
• Your comfort with exposing your body to another person.
• Your desire for sex.
• How your body responds sexually.
• Your ability to get pregnant and have children.

What you can do:
• Talk with your partner. It is the most important way to learn what you both are feeling. You may find that they are worried about causing you pain or discomfort during sex.
• Talk with a member of your healthcare team.
• See a specialist in our Male Sexual and Reproductive Medicine Program or Female Sexual Medicine and Women’s Health Program. For more information or to make an appointment, call 646-888-5076 to reach the women’s program and 646-422-4359 for the men’s program.

**Side Effects Experienced By Women**

**Menstrual cycle (period) changes**

Some treatments may cause your periods to change (to heavy or light), become irregular, or stop. Also, your treatment plan may include medication or surgery to stop your periods.

- **If you still have ovaries and a uterus, you can still be ovulating and can get pregnant, even if your periods stop.** If you have ovaries and a uterus, you must use a non-hormonal form of birth control such as a condom, diaphragm, or non-hormonal IUD.
- Ask your doctor when you can stop using these methods of birth control.
- Hormonal changes caused by medication and your period may give you mood swings.
- Chemotherapy can cause early menopause. Periods are more likely to stop if you are in your 40 or older.

**Vaginal dryness**

Many women have vaginal dryness after menopause or from hormonal treatments. This can make penetration painful or difficult. It can also make it easier to get urinary tract infections (UTI).

What you can do:

- Use vaginal moisturizers regularly, such as Replens®, K-Y®, Silk-E®, or Vitamin E gel caps.
- Use lubricants during sexual activity to minimize discomfort.
  - Examples include water-based lubricants, such as Astroglide®, K-Y® Jelly, or Liquid Silk®, or silicone lubricants, such as K-Y®, Intrigue®, or Pjur® Eros Bodyglide.
- Make foreplay longer. This may increase your arousal.
- Assure your partner that vaginal dryness is a side effect of the treatment, not your lack of desire.
- Try different positions. Some may be better than others.
- See a specialist in our Female Sexual Medicine and Women’s Health Program. For more information or to make an appointment, call 646-888-5076.

**Fertility and Pregnancy for Men and Women**

It’s important for women not to become pregnant while they, or their partner, are on chemotherapy or hormonal therapy. These treatments can cause birth defects. Even women whose menstrual periods have stopped may be at risk of getting pregnant for some time.

Women should not use oral birth control. They have estrogen and progesterone. These may stimulate tumor growth.

Men and women on chemotherapy should use barrier methods of birth control (e.g., condom, diaphragm, or both). Do not rely on the rhythm method. It is unreliable.
Chemotherapy or hormonal therapy can cause infertility for both men and women. It's not always permanent, but often is. Discuss this with your doctor before you start treatment. You might also ask for additional resources, such as *Fertility Preservation: Options for Women Who Are Starting Cancer Treatment* and *Building Your Family after Cancer Treatment: Information for Men*.

**Your Emotions During Treatment**

You may feel emotional changes during your treatment. These changes are different for everyone, but some common ones include:

- Feeling sad, lonely, or angry.
- Exhaustion or restlessness.
- Changes in your mood throughout the day.

What you can do:

- Talk with those close to you about your feelings and the changes you are going through. Open communication will help you to understand each other better. Friends and family can support and comfort you.
- Do not hesitate to ask for help. Accept the help that others may offer you.
- Share your concerns with your doctors and nurses. They can tell you more about emotional changes you might have. They may also refer you to other resources.

**Survivorship**

About 2 to 5 years after your treatment ends, your care may be transferred from your doctor to a survivorship nurse practitioner (NP). Your survivorship NP will be a member of Memorial Sloan Kettering’s (MSK) breast cancer team. They will examine you and order tests, focusing on your long-term physical and psychological needs. Your survivorship NP will communicate with your local doctor about your breast cancer treatment and recovery so that in time, you can transfer your care to your local doctor.

**Frequently Asked Questions**

**Does someone need to come with me each time I have treatment?**

During your treatments you may receive medications that can make you very drowsy. If so, it would not be safe for you to drive a car or travel alone. It may be more convenient for a friend or family member to pick you up at the end of your treatment.

After your first treatment, you will have a better idea of how you feel and what works best for you. You can also ask your doctor or nurse whether you are likely to feel drowsy after getting your medications.

**What can I eat before and after chemotherapy? Are there any foods to avoid?**

It is best to eat small regular meals before chemotherapy to prevent a heavy and full feeling. Food safety is important during treatment. Avoid raw or undercooked meat, fish, and poultry and unpasteurized products. Ask your nurse if you should review the *Low-Microbial Diet* resource.

Drink plenty of non-caffeinated liquids before and after your chemotherapy appointment to stay well hydrated.
Do I still need to take my antinausea medication if I’m not nauseous?

Nausea and vomiting can occur on the same day or as late as the second or third day after chemotherapy. If the chemotherapy you’re receiving can cause nausea, your doctor will prescribe medication to lessen or prevent it. Always take your anti-nausea medication as instructed. Some medication works best if you take it before you become nauseated. If you are still nauseated while taking your medication as instructed, call your doctor or nurse.

Why wasn’t I able to receive my chemotherapy when it was scheduled?

Chemotherapy works on both cancer cells and normal cells. Your chemotherapy is scheduled so that your body has time to recover between treatments. This allows normal cells to be replaced. Your body may need more time to reverse the effects of therapy (e.g., to allow mouth sores to heal or blood counts to rise to normal). Your doctor will decide if your chemotherapy should be postponed.

My chemotherapy treatment was delayed because my ANC was low. What is an ANC?

An ANC is an absolute neutrophil count. A neutrophil is a white blood cell that helps fight bacteria. The count is expected to fall 7 to 14 days after chemotherapy. If your ANC is low, your doctor may delay your treatment until it is back to normal.

Can I do something to increase my blood counts?

Your blood counts will recover over time. Your doctor may prescribe medication to maintain or raise your white blood cell count. These are usually shots given between treatments. Sometimes treatment will be delayed to allow time for your blood counts to recover.

There is no evidence that vitamins or a special diet will speed the recovery of your blood counts. However, if your iron levels are low, you may be more likely to have anemia (a low red blood cell count) and may be advised to take iron supplements.

I have chills or a temperature above 100.4° F (38° C), but the doctor’s office is closed. How can I reach a doctor?

You can always reach a doctor. During evenings, weekends, or holidays, call the hospital operator at 212-639-2000. Ask for the doctor covering your health care provider’s office.

I have not lost my hair yet and my counts have not dropped. Does this mean that the chemotherapy is not working?

Not having side effects such as hair loss, lowered blood counts, or nausea does not mean that the chemotherapy isn’t working. Different therapies cause different side effects, to varying degrees. Also, different people can react differently to the same treatment. Your doctor and nurse will monitor your progress and response to treatment.

What can I take for a headache?

You may take acetaminophen (Tylenol® or Extra Strength Tylenol®) for a headache. If you feel that you have a fever or chills, check your temperature before you take acetaminophen. Otherwise, the acetaminophen may lower your temperature and hide a fever, which is usually the first sign of infection. Call your doctor or nurse if you have chills or a temperature greater than 100.4° F (38° C).

Ask your doctor or nurse if you may take products containing aspirin or ibuprofen, since they may increase the chance for bleeding with some chemotherapy. Your nurse can give you a list of products to avoid.
I’ve been having problems urinating. Is this normal?

Some chemotherapy can irritate the bladder. Side effects can be urgency, burning, or blood in the urine. These may be signs of an infection or irritation. Call your doctor if you have any of these symptoms. They may want a urine specimen. You may need to be treated for an infection.

Make sure that you drink 8 to 10 glasses of liquids each day and empty your bladder frequently.

Can I still take my other prescription medications?

In most cases, you can continue to take your prescription medications. Tell your doctor the names of all the medications, herbs, and supplements you take. These include the ones you need a prescription for and the ones you buy over the counter.

Some medications, herbs, or supplements change the way the chemotherapy works. Do not start any new medications before checking with your doctor.

Can I take vitamins or mineral supplements?

Avoid most vitamins, mineral, herbal, or other dietary supplements. They might interfere with your treatment or affect your cancer. They might also increase the side effects of your treatment. Talk to your doctor or dietitian about any vitamin, mineral, herbal or other dietary supplements you are taking or may be interested in taking.

Can I drink alcohol?

Many chemotherapy and other medications are processed by the liver. So is alcohol, which can:

- Limit your liver’s ability to process the chemotherapy, causing more side effects.
- Interact with some medications and make them less effective.
- Cause your body to lose too much water.
- Cause too much drowsiness.

For these reasons, we recommend you limit alcohol during chemotherapy. If you feel you must drink, please speak with your doctor or nurse.

Can I have dental work?

Do not have any procedure that can cause bleeding as this may allow bacteria to enter your bloodstream. If your blood counts are low, you are at a higher risk for a serious infection. Check with your doctor before you schedule any dental work, including cleanings or surgery.

Can I color or perm my hair?

We advise you not to color or perm your hair. Chemicals are irritating to the hair follicles, speeding up the rate of hair loss during chemotherapy. If you must dye your hair, use a vegetable-based dye or discuss this further with your doctor.

Is a wig covered by insurance?

People who lose their hair from cancer treatment may have insurance coverage for a wig. In this case, your doctor should write a prescription for a “total cranial prosthesis for chemotherapy-induced alopecia” and include the breast cancer diagnosis code (C50.919) on the prescription. Check with your insurance company for details.
Can I travel while I get chemotherapy?
Traveling is usually permitted, but it depends on your treatment and where you are going. Before you make any plans, discuss them with your doctor. Your doctor will advise you on precautions to take depending on where you are going.

It may also be necessary for you and your doctor to plan a treatment holiday or break week from your treatment so you can take extended trips. Consider getting travel insurance in case you have to cancel your trip for any reason.

Will I be able to continue working?
Many people with advanced breast cancer continue to work. Whether you can work depends on the type of work, side effects of treatment, and symptoms of your breast cancer. Speak with your doctor or nurse if you are struggling to continue working or would like to take a leave of absence from work.

Resources and Support Services at MSK
We have many ways to support and help our patients understand and cope with cancer.

Art Therapy
646-888-5397
The art therapy group meets weekly in the group room, which is located within the library in the Evelyn H. Lauder Breast Center. It offers patients and families a chance to relax and be creative.

Counseling Center
646-888-0200
Many people find that counseling helps them deal with emotions during cancer treatment. We provide counseling for individuals, couples, families, and groups, as well as medications to help if you feel anxious or depressed.

Evelyn H. Lauder Breast Center Boutique
646-888-5330
Our boutique is located on the 2nd floor of the Evelyn H. Lauder Breast Center and is open Monday through Friday from 9:00 am to 5:00 pm. Come browse or talk with our experienced fitter for prostheses or breast forms. The boutique offers a large selection of headwear and head coverings, prosthetics, specialty bras, and bathing suits.

Genetic Counseling
646-888-4050
MSK’s Clinical Genetics Service offers genetic testing and counseling about you and your family members’ risk of getting certain cancers that are hereditary (passed through your genes).

Integrative Medicine Program
646-888-0800
Our Integrative Medicine Service offers patients many services to complement traditional medical care, including music therapy, mind/body therapies, dance and movement therapy, yoga, and touch therapy.

Library
646-888-5993
The library located in the Evelyn H. Lauder Breast Center has books and videos on breast health topics. Library materials are for use on-site, however staff can help you make copies if there is information you want to take home. Many pamphlets are also available for you to keep. The library has computers with access to the Internet.
Look Good Feel Better
212-639-5665
In the Look Good Feel Better class, makeup artists teach makeup techniques, skin and nail care, as well as hair styling and head-covering options that compensate for changes that can result from treatment.

Nutritional Counseling
646-888-4880
Our Nutrition Service offers nutrition counseling by one of our certified dietitians, who will review your current eating habits and advise you what to eat while you're going through treatment.

Palliative Care Medicine
646-888-2726
The expertise of MSK’s Pain and Palliative Care Service is available to patients throughout their cancer treatment. These doctors and nurses specialize in helping patients manage physical symptoms such as pain, shortness of breath, and nausea, as well as emotional issues, such as sadness, depression, and anxiety. They work with a patient’s primary team, providing an extra layer of support. If you feel that you or your loved one might benefit from the care provided by the Pain and Palliative Care Service, talk with your doctor.

Patient-to-Patient Support Program
212-639-5007
You may find it comforting to speak with a cancer survivor or caregiver who has been through a similar treatment. Through our Patient-to-Patient Support Program, you can speak with former patients and caregivers.

Rehabilitation Services (Occupational and Physical Therapy)
646-888-1900
At MSK, we offer a variety of outpatient rehabilitation services to help patients throughout all phases of treatment. These include occupational and physical therapy to help restore function in everyday activities, decrease pain, and enhance quality of life following certain cancer treatments.

Social Work
646-888-5271 or 646-888-5203
Social workers help patients, family, and friends deal with issues that are common during cancer treatment. They provide counseling and can help you communicate with children and other family members. Our social workers can also help with referrals to community agencies and programs, including those that help with transportation and homecare.

Sexual Health Program
Cancer and its treatments can have an impact on your sexual health. MSK’s sexual health programs, Male Sexual and Reproductive Medicine Program and Female Sexual Medicine and Women’s Health Program, help people who are dealing with cancer-related sexual health challenges. For more information or to make an appointment, call 646-422-4359 to reach the men’s program and 646-888-5076 for the women’s program.

Tobacco Treatment Program
212-610-0507
Whether you’ve just been diagnosed with cancer, are undergoing treatment, or have overcome the disease, MSK’s Tobacco Treatment Program can help you stop smoking. Call for an appointment.

If you have any questions or concerns, contact a member of your healthcare team directly or call 212-639-2000 for help.