

# Managing Treatment Related Side Effects

Myeloma medications, like all medications, have the potential to cause side effects. This list includes some of the more common side effects, but is not comprehensive. Side effects can vary by person and with the different medications and combinations in your treatment regimen.

**This is just a general overview and you should ALWAYS discuss with your doctor.** Side effects can often be managed, so always let your healthcare team know if you are experiencing any.

## **Side effect: Blood clots**

Patients with myeloma are at an increased risk of developing blood clots, particularly those who are newly diagnosed and those who have had blood clots in the past. There are other factors that put patients at greater risk of developing blood clots, such as older age, family history, some other medical conditions, obesity, and long periods of immobilization (e.g., hospitalization and long airplane rides). In addition, several myeloma medications are associated with an increased risk of developing serious blood clots known as deep vein thrombosis. These include ImiDs (Revlimid, Pomalyst, and Thalomid) when taken in combination with other myeloma drugs, dexamethasone, chemotherapy, and red blood cell growth factors (erythropoietin).

## **Treatment: Aspirin and blood thinning medications**

In particular, patients taking IMiDs should receive blood thinners to reduce the chance of developing blood clots. Aspirin is recommended to most patients, while molecular weight heparin is prescribed to those at greater risk. In some cases, additional medications may be recommended as well.

## **Side effect: Peripheral neuropathy**

Peripheral neuropathy is a condition affecting the nerves that causes pain, tingling, burning sensations, and numbness in the hands and feet. Proteasome inhibitors (particularly Velcade) and an older IMiD, Thalomid, have been associated with the development of peripheral neuropathy. Other conditions, such as diabetes, can also cause neuropathy. The presence of existing neuropathy is a consideration in the selection of which myeloma therapy is given, and depending upon its severity, myeloma medications that do not have this side effect may be selected.

## **Treatment: Changes in dose, switching medications**

Peripheral neuropathy usually improves or resolves after the treatment dose is reduced or treatment is stopped. In addition, some medications, such as gabapentin (Neurontin), may be helpful as well as certain vitamins or other supplements, but these are less proven. Always speak with your doctor about any vitamins or supplements before taking them.

## **Side effect: Gastrointestinal problems**

Commonly used myeloma medications may cause a variety of gastrointestinal problems, such

as constipation, diarrhea and nausea/vomiting. Medications as well as changes in diet may be helpful. It is important to drink plenty of fluids.

### **Treatment for constipation**

Depending on your situation, your doctor may recommend that you take a stool softener and/or laxatives as prevention. Drinking plenty of fluids, eating a high fiber diet, and physical activity may be helpful. Be sure to let your healthcare team know if you have not had a normal bowel movement after three days.

### **Treatment for diarrhea**

If you experience diarrhea, your doctor will recommend either an over-the-counter or prescription antidiarrheal medication and may advise you to take a fiber supplement. Drinking plenty of fluids and eating a bland, low-fiber diet is usually recommended. In some cases, diarrhea can be serious. Call your doctor immediately if you:

Have six or more loose bowel movements per day for more than two days in a row

Notice blood in the stool

Cannot urinate for at least 12 hours

Have a fever

Lose five pounds or more after the diarrhea starts

Have a swollen and/or painful abdomen

Feel dizzy or lightheaded when moving to a standing position

### **Treatment for nausea and vomiting**

If you experience nausea or vomiting, your doctor will prescribe an antiemetic medication (e.g., Zofran, Kytril, Emend, Anzemet, and Aloxi). Antiemetics work best when taken regularly as advised by your doctor, not only when you feel nauseated or after you have vomited. Eating small meals throughout the day as well as drinking at least eight glasses of fluids in small amounts may be helpful as well.

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