This fact sheet is for people with pancreatic cancer who want to know more about the chemotherapy drug gemcitabine and how it is given.

Gemcitabine is one of the main chemotherapy drugs used to treat pancreatic cancer. It can be given on its own, or with another chemotherapy drug called capecitabine (Xeloda®) – this is known as GemCap.

Each hospital may do things slightly differently, and treatment will vary depending on your cancer. Speak to your doctor or nurse about your treatment.

Contents

How is gemcitabine used? ................................................................. 2
How is gemcitabine given? ............................................................... 3
What are the side effects of gemcitabine? ....................................... 6
Further information and support ..................................................... 10

You can speak to our specialist nurses on our Support Line about any questions you have about chemotherapy. You can call them free on 0808 801 0707, or email nurse@pancreaticcancer.org.uk

Read more about the other chemotherapy drugs used for pancreatic cancer at pancreaticcancer.org.uk/chemotherapydrugs
How is gemcitabine used?

GemCap can be used in different ways.

- If you have cancer that can be removed with surgery (such as the Whipple’s procedure), you may be offered GemCap after surgery to try stop the cancer coming back.

- If you have cancer that has grown close to major blood vessels near the pancreas (borderline resectable cancer), you may have GemCap to try to shrink the cancer to make surgery possible. We need more research into this, and you may be offered GemCap before surgery as part of a clinical trial.

- If you have locally advanced or advanced pancreatic cancer and surgery is not possible, you may be offered GemCap to try to control the growth of the cancer.

If you aren’t well enough for GemCap, you may be offered gemcitabine alone, as it may have fewer side effects. Read about side effects on page 6.

Gemcitabine can also be given with the chemotherapy drug nab-paclitaxel (Abraxane®) to treat advanced pancreatic cancer.

Talk to your doctor or nurse about which chemotherapy may be best for you.

Read more about how chemotherapy is used in our fact sheet [Chemotherapy for pancreatic cancer](pancreaticcancer.org.uk/chemotherapy), or on our website at [pancreaticcancer.org.uk/chemotherapy](pancreaticcancer.org.uk/chemotherapy)

Read about capecitabine at [pancreaticcancer.org.uk/capecitabine](pancreaticcancer.org.uk/capecitabine)

Read about nab-paclitaxel (Abraxane®) at [pancreaticcancer.org.uk/abraxane](pancreaticcancer.org.uk/abraxane)
How is gemcitabine given?

You will have gemcitabine at the hospital as an outpatient. This means that you will go into hospital for treatment, but won’t need to stay overnight.

Gemcitabine is given in a four-week cycle. This means you will have gemcitabine once a week for three weeks, and then have a break from treatment for a week. This break allows your body to recover. The number of cycles you have will depend on how the treatment is working and how chemotherapy affects you. Your chemotherapy team can tell you more about this.

Gemcitabine is given as an infusion into a vein – you may hear this called a ‘drip’. You will have an infusion of gemcitabine through a cannula. A cannula is a thin tube which is put into a vein in the back of your hand or lower arm. Chemotherapy is given through an infusion into the cannula, which takes 30 minutes.

Read information on how chemotherapy is given at pancreaticcancer.org.uk/havingchemotherapy

Allergic reaction

Some people have an allergic reaction while gemcitabine is being given. Signs of an allergic reaction are:

- an itchy rash
- high temperature
- feeling dizzy or faint
- feeling short of breath or faint.

If you have any of these, tell your chemotherapy team. An allergic reaction needs treating straight away.
**Gemcitabine and capecitabine (GemCap)**

If you are having gemcitabine together with capecitabine (GemCap), this is given in a four-week cycle. You will have an infusion of gemcitabine for 30 minutes, and you will have this once a week for three weeks.

Capecitabine is taken as tablets, which you will take twice a day for the 3 weeks.
Gemcitabine and nab-paclitaxel (Abraxane®)

Gemcitabine with nab-paclitaxel (Abraxane®) is given in a four-week cycle. You will have an infusion of these drugs once a week for three weeks. Normally, both of the drugs are given on the same day. You will have an infusion of nab-paclitaxel for 30 minutes. After this, you will have a 30 minute infusion of gemcitabine.
What are the side effects of gemcitabine?

Gemcitabine can cause side effects, but these can affect everyone differently, and you may not get all of the side effects mentioned here. Your chemotherapy team should give you information about any possible side effects and how to manage them. Make sure you ask them any questions you have. Most people cope well with gemcitabine, but knowing what to expect can help you to deal with any side effects.

Your chemotherapy team should give you an emergency number to call if you are unwell, or if you need information about any side effects. Your nurse will explain when to use this number. If you haven’t been given a number, ask your nurse about this.

Common side effects

Infection

Gemcitabine can increase your risk of getting an infection. An infection is an emergency if you are having chemotherapy, and needs treating straight away. Signs of an infection include:

- a high temperature
- feeling shivery and cold
- headaches and sore muscles
- a cough or sore throat
- having pain or burning when you pass urine
- feeling generally unwell or tired.

A high temperature is 37.5°C or 38°C depending on the advice of your chemotherapy team. If you have a high temperature, or you have any other signs of an infection, call your chemotherapy team on the emergency number, or go to A&E and tell them you are having chemotherapy.
You should also phone if you suddenly feel unwell and have flu-like symptoms, even if your temperature is normal or low (a low temperature is 35°C and below).

Read more about infections and how they can be treated in our fact sheet Chemotherapy for pancreatic cancer, or at pancreaticcancer.org.uk/chemotherapy

**Flu-like symptoms**

While you are being given gemcitabine you may get some flu-like symptoms, such as feeling hot, cold or shivery, and having a headache. If these symptoms happen within 24 hours of having an infusion of gemcitabine, they are a side effect of gemcitabine, and not an infection. If these symptoms don’t get better after a day, call your chemotherapy team on the emergency number.

**Feeling or being sick (nausea or vomiting)**

This is a common side effect of gemcitabine. You will normally be given anti-sickness medicines before your chemotherapy starts. If these medicines don’t help, speak to your chemotherapy team about changing to a different medicine.

Read more about feeling and being sick, and our tips for coping with it, at pancreaticcancer.org.uk/sickness

**Fatigue (extreme tiredness)**

Fatigue is a common side effect of gemcitabine. It isn’t the same as feeling tired. Fatigue can make you feel weak and have problems concentrating. Some people find that the fatigue starts a few hours to a few days after having chemotherapy, and starts to get better after a few days. There are things that you can do to help with fatigue.

Read about fatigue, and how it can be managed, at pancreaticcancer.org.uk/fatigue
Runny poo (diarrhoea)

If you have diarrhoea, make sure you drink lots of water. If you have it more than four times a day, tell your chemotherapy team. They can give you medicines to control it, or they may lower the dose of gemcitabine.

Problems emptying your bowels (constipation)

If you get constipation, try to eat high fibre foods, such as fruit and vegetables. Gentle exercise such as walking can also help. Speak to your doctor about medicines that can help.

Anaemia (feeling tired or dizzy)

Gemcitabine can lower the number of red blood cells in your blood. This is called anaemia, and can make you feel tired, dizzy or short of breath. If your red blood cell level is very low, you may need to be given blood through a drip. This is called a blood transfusion.

Bruising and bleeding

Gemcitabine can lower the number of platelets in your blood – this is called thrombocytopenia. This can cause you to bruise more easily than normal, and you may be more likely to have nosebleeds or bleeding gums. Speak to your chemotherapy team straight away if you get any of these side effects. If you have a nosebleed that doesn’t stop after five minutes, call your chemotherapy team who will be able to help.

Swelling (oedema)

Some people get swelling in their feet, ankles, legs, fingers or face. This is because of a build-up of fluid, which is called oedema. This normally gets better by itself. If you have swelling in your feet, it may help to have your legs up on a cushion when you are sitting down. Your doctor may also give you medicines to help.
Loss of appetite
During your treatment you may not feel like eating, and you may start to lose weight. Try to eat small meals often. If your appetite doesn’t get better after a few days, tell your doctor or dietitian.

Sore mouth and mouth ulcers
Gemcitabine can make your mouth sore, or cause mouth ulcers which can be uncomfortable. Tell your chemotherapy team about any problems you have with your mouth. They can make sure you don’t have a mouth infection, and give you a mouthwash which should help. You should also tell them if you have white spots in your mouth. This is a sign of oral thrush, which is normally easy to treat.

Less common side effects
- **Hair loss.** Gemcitabine may cause your hair to thin – but it should grow back once your treatment stops.

- **Severe breathing problems.** Gemcitabine can cause problems with your lungs, but this is very rare. If you feel short of breath or have a dry cough that won’t go away, call your chemotherapy team on the emergency number. You may need to have some tests to check how your lungs are working.

- **Heart problems.** Gemcitabine can cause an irregular heartbeat. It can also make you feel short of breath or dizzy. It is important to call your chemotherapy team straight away if you have any of these symptoms. Or go to A&E and tell them that you are having chemotherapy.

Speak to your chemotherapy team if you experience anything unusual, or if you would like more information.

If you have any questions about gemcitabine or side effects, you can speak to our specialist nurses free on our Support Line.
Further information and support

Pancreatic Cancer UK services

We are here for everyone affected by pancreatic cancer.

We’re here to support and listen

Our free and confidential Support Line is a lifeline for thousands of people affected by pancreatic cancer. Our specialist nurses understand the issues you might be facing and their expert help will support you in coping with pancreatic cancer.

Call free on **0808 801 0707** weekdays 10am-4pm, or email **nurse@pancreaticcancer.org.uk**

We’re here with the information you need

We have the most up-to-date information on everything you need to know about pancreatic cancer. We can help you every step of the way through diagnosis and treatment options to managing your symptoms and the care you receive.

Go to **pancreaticcancer.org.uk/informationandsupport**

Download or order our free publications at **pancreaticcancer.org.uk/publications** or call **0808 801 0707**

Find an A-Z of medical words at **pancreaticcancer.org.uk/medicalwords**

We’re here so you can share

Our Forum is a supportive place where everyone affected by pancreatic cancer can be there for each other online, any time of day or night: **forum.pancreaticcancer.org.uk**

Our Living with Pancreatic Cancer Support Days provide local face-to-face support in an informal setting for people with pancreatic cancer: **pancreaticcancer.org.uk/supportdays**

Local support groups mean you can meet other people to share your experiences: **pancreaticcancer.org.uk/supportgroups**
Useful organisations

Cancer Research UK
www.cancerresearchuk.org
Helpline: 0808 800 4040 (Mon-Fri 9am-5pm)
Information for anyone affected by cancer.

Healthtalk
www.healthtalk.org
Personal experiences presented in written, audio and video formats, including people talking about pancreatic cancer.

Macmillan Cancer Support
www.macmillan.org.uk
Support Line: 0808 808 00 00 (Everyday 8am-8pm)
Provides practical, medical and financial support for anyone affected by cancer.

Maggie’s Centres
www.maggiescentres.org
Tel: 0300 123 1801
Centres around the UK and online offer free, comprehensive support for anyone affected by cancer.
This fact sheet has been produced by the Support and Information Team at Pancreatic Cancer UK.

We make every effort to make sure that our services provide up-to-date, accurate information about pancreatic cancer. We hope that this information will add to the medical advice you have had, and help you make decisions about your treatment and care. This information should not replace advice from your medical team – please speak to your doctor, nurse or other members of your medical team about any questions.

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Email us at publications@pancreaticcancer.org.uk for references to the sources of information used to write this fact sheet.

Give us your feedback

We hope you have found this information helpful. We are always keen to improve our information so let us know if you have any comments or suggestions. Email us at publications@pancreaticcancer.org.uk or write to our Information Manager at the address below.

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