### **OESOPHAGEAL CANCER**

# Combination Treatment Diary

For patients being treated with KEYTRUDA® (pembrolizumab) in combination with chemotherapy



Your healthcare team should have provided you with materials to help you identify any side effects you may experience on your treatment. Ensure you read the Patient Safety Information Brochure and carry your Patient Alert Card with you at all times.

If you get any side effects, talk to your healthcare professional. This includes any possible side effects not listed in the Patient Information Leaflet (PIL). By reporting side effects you can help provide more information on the safety of this medicine. You can also report side effects directly via the Yellow Card Scheme at www.mhra.gov.uk/yellowcard or search for MHRA Yellow Card in the Google Play or Apple App Store. Adverse events should also be reported to MSD UK (Tel: 0208 154 8000).

This material has been developed by MSD UK.



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Your healthcare team should have provided you with materials to help you identify any side effects you may experience on your treatment. Tell your healthcare professional IMMEDIATELY about any changes to how you are feeling.

DO NOT ATTEMPT TO DIAGNOSE OR TREAT SIDE EFFECTS YOURSELF.

Reporting side effects early may stop them from becoming more serious and can make them easier to treat. They may be managed without having to permanently come off treatment and your healthcare professional is there to support you every step of the way.

Ensure you read the Patient Safety Information Brochure. Keep the Patient Alert Card with you at all times and show it to any healthcare professional who treats you.

Ensure you read the Patient Information Leaflet (PIL). Use the diary in this book to keep track of how you are feeling and to record any questions you have for your healthcare professional.



### Contents

24

25

25

26

28



### **Emergency contacts and** treatment information

Fill in your emergency contacts details and key information about your treatment, such as your treatment plan and start date

Useful information
Immunotherapy
Your treatment belongs to a type of cancer
reatment called immunotherapy. Learn about
mmunotherapy
Desophageal cancer
Learn more information about oesophageal cancer
Your treatment
_earn more about the treatment you have been
prescribed, including how it works and why you

### What to look out for

have been prescribed this treatment



### **Possible side effects**

8

10

23

Reporting side effects early can make them easier to treat. Here you'll find a diagram of some of the main symptoms you should look out for and contact your healthcare professional about

### **Keeping track**

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Your weekly treatment diary
This is a weekly diary that will help you to keep
track of how you are feeling and any symptoms
you may have
Appointment details
Record your appointment details here

4

5

6

7



#### Multidisciplinary team (MDT) An MDT is a group of healthcare professionals with different expertise who work together to provide you with the treatment that works best for you. Learn more about who is involved in the MDT

### Lifestyle

Diet

Important people



Oesophageal cancers and their treatment may affect your eating and drinking, however, it is important to have a balanced diet. Here you'll find some tips for a balanced diet

#### Exercise

Keeping active during and after your treatment is important. Here you'll find some suggestions of ways to keep active

**Frequently Asked Questions** 



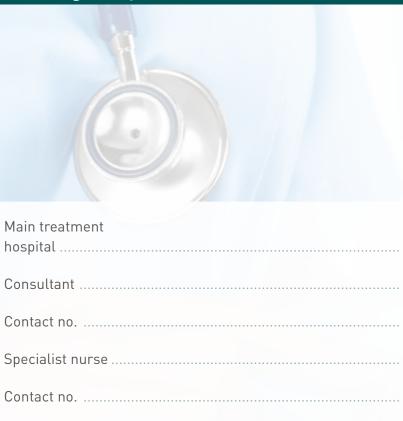
### Helpful terms

Explanations of the terminology and definitions you may hear your healthcare team use



# Emergency contact numbers

# Treatment information



Your GP	
Surgery	
Contact no	

Out of hours helpline

Pat	tient name		
Diagnosis	& date:	 	
Treatment	plan:	 	
Planned st	art date:	 	
Length of t	reatment:	 	
Treatment	intent:	 	
Chemothe	rapy regimen:	 	
Concurren	t radiotherapy:	 	
Medication	allergies:	 	

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Past medical history:

# Useful information





Your healthcare professional has prescribed KEYTRUDA® in combination with chemotherapy as part of your treatment plan. You may hear this referred to by your healthcare professional as pembrolizumab. This is because medicines usually have two names, a brand name and a generic name. KEYTRUDA® is the brand name, and pembrolizumab is the generic name. Your treatment belongs to a type of cancer treatment called immunotherapy.

### What is immunotherapy?

Immunotherapy works with your body's immune system by increasing its ability to recognise and attack cancer cells.

Your KEYTRUDA® treatment will be given to you in a hospital or clinic under the supervision of an experienced healthcare professional. Your healthcare professional will give you your treatment through an IV infusion into a vein. The infusion will last for approximately 30 minutes.



You will receive an infusion of KEYTRUDA<sup>®</sup> every 3 weeks or every 6 weeks depending on your treatment schedule, and your healthcare professional will let you know how often you will receive your chemotherapy infusions. They will also decide how many treatments you will need.

It is important that you visit your healthcare professional for your scheduled appointments so that they can check your progress and administer your treatment.



If you are unable to keep an appointment, call your healthcare professional right away to reschedule.

*Please refer to the first page for your healthcare professional's contact details.* 



### Oesophageal cancer

### What is oesophageal cancer?

Oesophageal cancer is a cancer that starts in the oesophagus (also known as the food pipe). The oesophagus is the tube that carries food from your mouth to your stomach.

Oesophageal cancer is when abnormal cells in the oesophagus grow in an uncontrolled way.

There are different types of oesophageal cancer which develop in different parts of the oesophagus:

- 1. Cancer in the **upper and middle parts** are usually squamous cell carcinomas. These develop from cells that make up the inner lining of your oesophagus.
- 2. Cancer in the **lower part** of the oesophagus are usually adenocarcinomas. These cancers start in the glandular cells.
- 3. Cancer in the lowest end of the oesophagus which joins to the stomach, also called the gastro oesophageal junction.

Between 2015 and 2017, around 9,200 people each year were diagnosed with oesophageal cancer in the UK, making it the 14th most common cancer in adults.

### Causes of oesophageal cancer

Doctors do not know the exact causes of oesophageal cancer; however, there are risk factors that can increase the likelihood of developing it, such as:

- Long-term acid reflux
- Alcohol

- Obesity
- Gender
- Age
- Smoking

MSD



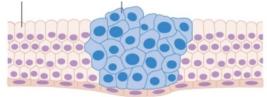
- Previous cancer treatment
- Barrett's oesophagus
- Other medical conditions

### Stages of oesophageal cancer

Like other types of cancer, oesophageal cancer can be described using stages. These are numbered from Stage 0 to Stage 4 based on the size of the tumour and whether it has spread to other areas in the body. The stage of your cancer determines the type of treatment your clinician will recommend for you.

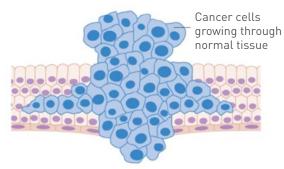
#### Cancer starts when cells change abnormally





Cancer cells

Cancer grows as cells multiply over and over



**Cancer starts** when one or more abnormal cells grow and multiply too much in an uncontrolled way. This may cause a growth called a tumour. Some cancers may eventually spread into other parts of the body.

Figure adapted from a graphic created by Cancer Research UK.



6/32



### Oesophageal cancer

# KEYTRUDA<sup>®</sup> and chemotherapy

# What is locally advanced unresectable cancer?

In many cases, the first treatment offered for oesophageal cancer is surgical removal of the tumour and the surrounding tissue. This may be followed by radiation therapy. The aim of surgery is to remove as many cancer cells as possible. However, some cases are locally advanced, which means the cancer has spread into tissues around the oesophagus. Because of this, it may not be safe or possible to perform surgery. This is known as locally advanced unresectable oesophageal cancer.

### What is metastatic cancer?

Some tumours which start in the oesophagus spread to other parts of the body. This is known as metastasis. When oesophageal cancer spreads, the most common sites are the lungs and liver. In many cases, surgery is not possible for metastases and you will instead receive treatment which affects your whole body to help reduce the size of these tumours.

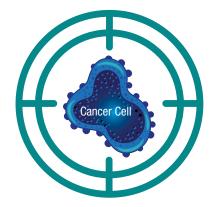






### How do they work together?

**Chemotherapy** kills cancer cells by interfering with their growth and preventing them from spreading around the body.





The cancer cell death can also activate your body's immune system.

**Immunotherapy** works with your body's immune system by increasing its ability to recognise and attack cancer cells.

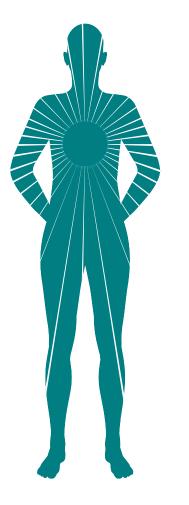




# KEYTRUDA<sup>®</sup> and chemotherapy

### Why have I been prescribed KEYTRUDA® and chemotherapy?

When you were diagnosed with locally advanced unresectable or metastatic oesophageal cancer, a member of your healthcare team will have taken a sample (biopsy) of your tumour to be analysed in a laboratory. Your tumour has been found to contain a biological marker called PD-L1, which means it may respond to a combination of KEYTRUDA<sup>®</sup> and chemotherapy. This treatment aims to slow down the progression of your cancer and help you have a better quality of life.



### Possible side effects

# Reporting side effects early can make them easier to treat

If you are being treated with a combination of KEYTRUDA® and chemotherapy your chances of having side effects may be increased.

You may experience more than one side effect at the same time.

Whilst side effects may occur soon after starting treatment, they can also occur at any time during your treatment.

Your side effects may be managed without having to permanently come off treatment, and it is always best to report your side effects as soon as possible to a healthcare professional.



#### Be aware of possible side effects

Overleaf is a diagram of the main symptoms you should look out for. If you get any side effects, talk to your healthcare professional immediately. This includes any side effects not included in the Patient Information Leaflet (PIL) or the diagram included in this diary.



## Possible side effects

Ensure you read the Patient Safety Information Brochure and carry your Patient Alert Card with you at all times.

#### Speak to your healthcare professional IMMEDIATELY if you notice ANY of these symptoms:

#### GENERAL

- More tired or confused than normal
- Feel colder than normal
- Fever or hot flushes
- Lost or gained weight
- Memory problems
- Seizures
- Chills or flu-like illness
- Trouble sleeping
- Feel weak or numb
- Feeling anxious or irritable
- Feeling generally unwell
- Have noticed a change in my behaviour

#### **SKIN AND HAIR**

- Yellowing of the skin
- Skin has lost some of its colour
- Rash
- Dry or itchy skin
- Bleeding or bruising more easily than normal
- Sweating more than normal
- Hair falling out
- Skin blistering, peeling or sores
- Ulcers in mouth or in lining of nose, throat or genital area
- Noticeable changes to skin or hair

#### MUSCLES, NERVES, JOINTS AND LIMBS

- Muscle aches or tenderness
- Muscle, bone or joint pain, or muscle weakness
- Weakness, numbness, burning, tingling and/or paralysis in hands, feet, arms or legs
- Swelling or pain in arms, legs, joints or tendons
- Discolouration of fingertips or toes
- Stiff neck



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**EYES** 

- Eyesight has changed
- Yellowing of the eyes
- Dry eyes

• Double vision

• Chest pain

heart beat

• Rapid or irregular

• Eyes that feel uncomfortable

#### **MOUTH AND HEAD**

- More thirsty than usual
- Dry mouth
- Feel faint or dizzy
- Sense of taste has changed
- Headaches that will not go away or are unusual

#### **THROAT AND CHEST**

- Developed a new or worse cough
- Voice is getting deeper
- Short of breath

#### **STOMACH AND BOWELS**

- Feel less or more hungry than usual
- Nauseous and vomiting
- Constipated
- Diarrhoea or more bowel movements than usual
- in stomach area • Pain on right side of stomach

or have blood or mucus

• Soreness or tenderness

Stools are black, tarry, sticky,

 Pain or pressure in lower abdomen

#### URINE

9/32

- More frequent urination than normal
- Urinary incontinence or difficulty urinating
- Change to amount or colour of urine
- Painful urination

#### Your healthcare team should have provided you with materials

- to help you identify any side effects you may experience on
- your treatment. It is important to be aware of side effects.
- You may experience more than one side effect at the same time. Telling your healthcare professional IMMEDIATELY once you notice any symptoms may stop them from becoming more serious.

Do NOT wait for your next appointment. DO NOT ATTEMPT TO DIAGNOSE OR TREAT SIDE EFFECTS YOURSELF.



- Blood in urine









## Using your treatment diary

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Make a note of anything that you

did or how you felt each day

It is important to record any symptoms you experience

### Week commencing: Monday 21st / June / 2021

	İ	0			6			
Symptoms	General	Eyes	Mouth and head	Throat and chest	Skin and hair	Stomach and bowels	Urine	Bones and joints
Mon <b>21</b>			X					
Tue <b>22</b>								
Wed 23			X					
Thu 24								
Fri <b>25</b>								
Sat <b>26</b>								X
Sun 27								

How did you feel this week, on a scale of 1-5?



Do you feel better or worse than last week?

Use these boxes to record how you feel in general, and to track your progress week by week



Speak to your healthcare professional IMMEDIATELY if you notice any of these symptoms.

**Do NOT wait for your next appointment.** 

Do NOT attempt to diagnose or treat side effects yourself.

#### Daily notes

Woke up with very dry throat - called nurse

No appetite today

Woke up with very dry throat again - called nurse

Had some soup and went for short walk

Very hot today - stayed inside

Back pain - called nurse

Much better today - back is much improved

#### Weekly summary

Weather was good so sat in garden a lot - read my new book.

Grandchildren came over at weekend and we had tea and cake.

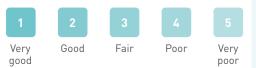
Margaret called in on Thursday with hanging baskets.

Record any specific details of what happened or how you felt this week



Week comm	encing	: Mond	lay	/	/	/		
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Symptoms	General	Eyes	Mouth and head	Throat and chest	Skin and hair	Stomach and bowels	Urine	Bones and joints
Mon								
Tue								
Wed								
Thu								
Fri								
Sat								
Sun								

How did you feel this week, on a scale of 1-5?



Do you feel or worse th last week?	
Better	Worse



Speak to your healthcare professional IMMEDIATELY if you notice any of these symptoms.

**Do NOT** wait for your next appointment.

Do NOT attempt to diagnose or treat side effects yourself.

#### Daily notes

#### Weekly summary



Week comm	encing	: Mond	lay	/		/		
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Mon								
Tue								
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Sun								

How did you feel this week, on a scale of 1-5?

1	2	3	4	5
Very good	Good	Fair	Poor	Very poor

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Better	Worse



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#### Weekly summary



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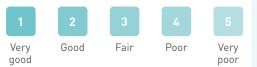
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#### Daily notes

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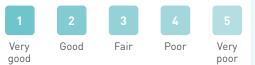
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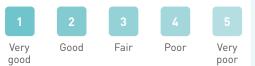
#### Daily notes

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#### Daily notes

#### Weekly summary

# Appointment details

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Date	Time	Type/purpose

Date	Time	Type/purpose



# Multidisciplinary team (MDT)

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An MDT is a group of healthcare professionals with different expertise, who work together to provide you with the treatment that works best for you.

The specialists needed in these teams will depend on the type of cancer and where it is.

MDT meetings are held regularly to discuss your individual needs and to ensure that all appropriate choices of treatment for you are considered. These meetings are held so treatment decisions are not made solely by one person and it is a team decision.

An MDT will vary from patient to patient and may include the following healthcare professionals:

### Clinical nurse specialist (CNS)

Clinical nurse specialists have specialist training and experience in oesophageal cancer. They help organise your care between doctors and other healthcare professionals. You can contact your CNS if you have any questions or need help coping with your treatment.



### Oncologist

Oncologists specialise in non-surgical cancer treatments.



### **Nutritional support**

A dietician with specific expertise in dealing with oesophageal cancer can offer you support and advice about how to maintain a good diet while coping with the side effects of treatment.



### Speech and language therapist

Treatment for oesophageal cancer can cause difficulties with speaking, eating or swallowing. This can be as a result of radiotherapy or surgery.



A speech and language therapist can help with these complications of treatment.

Other members of your MDT may include:

- Gastroenterologists
- Palliative care doctors or nurses
- Radiologists
- Pathologists
- Physiotherapists

- Clinical psychologists
- and counsellors
- Occupational therapists
- Benefits advisors
- Dental services
- Oncology pharmacists

There is space at the beginning of your diary to note down the contact details of your MDT.



### Diet

Oesophageal cancer and its treatment may affect your eating and drinking; however, it is important to make sure you have a **well balanced diet** as this can help you:



• Feel better

• Manage weight

- Maintain your strengthSpeed your recovery
- Eating slowly and chewing your food well can help. And for some it can be helpful to have a drink during or after eating. Eating **smaller amounts more often** can be easier than having large amounts. If you are struggling with chewing and swallowing, a soft diet may help.

### Some examples of soft food include:



Drinking plenty of water or other fluids is important to prevent dehydration and can also help to loosen thick saliva that may build up. If you feel thirsty, you may be dehydrated. It is important to tell your Speech and Language Therapist, or another member of your cancer care team, if you are experiencing any problems with eating or drinking at any time after treatment for your cancer. If you are having difficulty eating, your cancer care team are here to help and can refer you to a dietitian.

### Exercise

It is **important to keep active** during and after treatment for cancer. Exercise can help improve your general physical functioning, make you feel less tired, and reduce feelings of depression or low mood. Overall, **keeping active can improve your quality of life**.

When deciding what exercise to do, it may be helpful to talk to your cancer care team. It's a good idea to start with short chunks (10 to 15 minutes) of gentle activity, such as walking or swimming, then gradually build it up.

However, any exercise is beneficial and you should find something you enjoy doing. Please seek advice from your healthcare team before starting any exercise to develop a plan that is suitable for you.





## Frequently asked questions

#### Can I drink alcohol?

Alcohol consumption should be kept to a minimum whilst undergoing your treatment. You can discuss this with your healthcare professional.

### What effect will KEYTRUDA® and chemotherapy have on my other medicines?

Your treatment may interact with other medicines. It is important to tell your healthcare professional about any medicines you are currently taking or planning to take.

### Can I take antibiotics?

It is important to ensure that any medications are compatible with your treatment. Ensure your healthcare professional is aware of any treatments you are currently taking or planning to take, including over-the-counter medicines.

### Can I go on holiday?

Discuss your holiday plans with your healthcare professional before you book your holiday. Some extra preparation may be necessary, and you should always carry your Patient Alert Card with you.

### Should I change my diet?

A healthy diet is important. You can discuss any changes to your diet with your healthcare professional. See the section on diet for more information.

### Can I exercise?

Gentle exercise, such as short walks, is encouraged as it can help reduce constipation and the feeling of tiredness. Please discuss this with your healthcare professional before starting any exercise. See the section on exercise for more information.

# Can I take vitamins and herbal supplements?

You should tell your healthcare professional about all the medicines you take, including vitamins and herbal supplements. Your healthcare professional can help you decide if they are suitable to take or not.

# Should I use contraception?

Yes. It is possible that your treatment could harm or cause death to your unborn baby. If you are female and able to become pregnant you should use an effective method of contraception during and for at least 4 months after the last dose of your treatment. Talk to your oncology pharmacist about birth control methods that you can use during this time, and tell your healthcare professional right away if you become pregnant during treatment.

### Can I breastfeed?

Do not breastfeed while taking this medicine and chemotherapy as it is not known if your treatment passes into your breast milk. Please speak to your healthcare professional for further guidance if you are breastfeeding or plan to breastfeed before starting treatment.

# Can I drive and/or operate machinery?

You may feel dizzy, tired or weak while taking your treatment, which can affect your ability to drive or use tools or machines. If this happens, avoid these activities.

#### Can I have vaccinations?

Consult your healthcare professional before receiving any vaccinations, including the flu vaccination.





## Frequently asked questions

# You can visit these websites for extra support about oesophageal cancer:

Learn more about cancer and immunotherapy: www.cancerresearchuk.org

Find out more about Macmillan's cancer support: www.macmillan.org.uk

Your friends and family are there to support you but cancer can also be hard on them. The below resources are available should they need some additional support:

Find out more about Macmillan's support for carers: www.macmillan.org.uk/cancer-information-and-support/ supporting-someone

Find out more about Cancer Research UK's support for carers:

www.cancerresearchuk.org/about-cancer/coping/familyfriends-caregivers

 $\ensuremath{\mathsf{Please}}$  note: these are third party websites and MSD has not influenced their content

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# Helpful terms

#### **Biological therapy**

Targeted treatments that use the body's own systems to fight cancer. They may act on cancer cells directly to kill them or stop them growing, or they may help the immune system to kill cancer cells. Types of biological therapies include monoclonal antibodies, cancer growth inhibitors and vaccines. See also 'Immunotherapy'.

### **Biopsy**

A small sample of tissue taken from your tumour, either in surgery or using a needle. A pathologist (a doctor who specialises in examining samples of tissue to help diagnose diseases) will examine the sample under a microscope to see if it contains any cancer cells and if so, what type.

### Chemotherapy

A treatment that uses anti-cancer (cytotoxic) drugs to destroy cancer cells. The drugs circulate in your body via the bloodstream, so it is known as systemic therapy.

### Grade

Describes how cancer cells look under a microscope. The more abnormal they are, the higher the grade. Low grade cancers tend to grow more slowly and are less likely to spread. Cancers are most often graded from 1 to 3.

### Immunotherapy

A type of biological therapy that uses the immune system to fight cancer. See also 'Biological therapy'.

### Locally advanced oesophageal cancer

Cancer that has spread to other tissues around the oesophagus, but not to other organs in the body. See also 'Stage'.

### Metastatic oesophageal cancer

Cancer that has spread from the oesophagus to other organs in the body.

### **Personalised medicine**

Treatment that is tailored to the biology of your specific cancer. For example, your cancer cells may have too many of a particular growth receptor, so your doctor may give you a medicine that blocks that receptor. Many biological therapies can be used as part of personalised medicine. See also 'Biological therapy'.

### Radiotherapy

The use of high-energy radiation, usually X-rays, to kill cancer cells in a specific area by damaging the DNA of these cells. Radiation also affects normal cells, which can cause side effects in the treatment area.



# Helpful terms

### Stage

A system that doctors use to describe the size of your cancer, how far it has grown and whether it has spread. This helps your doctor to choose the best treatment for you. There are five main stages, from 0 to 4.

### Systemic therapy

A treatment that travels through the bloodstream and reaches your whole body. All drug treatments that are injected or that you take by mouth are systemic, including chemotherapy, biological therapy and hormone therapy.

#### **Targeted therapy**

A type of treatment that directly targets cancer cells to stop them from growing and spreading. Targeted treatments are a type of biological therapy. See also 'Biological therapy'.

### Tumour

A lump of cells that may or may not be cancerous (malignant or benign, respectively).

#### Unresectable oesophageal cancer

Oesophageal cancer that cannot be treated with surgery due to the size or location of the tumour.



# Notes





# Notes





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If you get any side effects, talk to your healthcare professional. This includes any possible side effects not listed in the Patient Information Leaflet (PIL). By reporting side effects you can help provide more information on the safety of this medicine. You can also report side effects directly via the Yellow Card Scheme at www.mhra.gov.uk/yellowcard or search for MHRA Yellow Card in the Google Play or Apple App Store. Adverse events should also be reported to MSD UK (Tel: 0208 154 8000).