

IMF

International Myeloma Foundation

Dedicated to improving the quality of life of myeloma patients while working toward prevention and a cure...

For questions about the International Staging System or other concerns of myeloma patients, their families, friends, and caregivers, please contact the IMF Hotline at 1-800-452-2873 (toll-free in the US and Canada) which is available Monday-Friday 9am-4pm (Pacific time)

Additional support can be found on the IMF Website: www.myeloma.org

The International Myeloma Foundation provides education, support, advocacy, and ground-breaking research. Patients, Doctors, and Nurses look to the IMF for information about treatment, disease management, side-effects management, and research support.

Until there is a cure....There is the IMF



International Myeloma Foundation

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Doxil[®]

Indication	<p>Doxil[®] (doxorubicin HCl liposome injection) is approved in combination with VELCADE[®] (bortezomib) for Injection to treat patients with multiple myeloma who have not previously received VELCADE[®] and have received at least one prior therapy.</p> <p>Doxil is a different form of the chemotherapy agent doxorubicin in that it has a pegylated liposome coating that has led to improved tolerability.</p>
Dosage/I.V.	<p>Bortezomib is administered at a dose of 1.3 mg/m² as intravenous bolus on days 1, 4, 8 and 11, every three weeks one week off therapy. DOXIL 30 mg/m² should be administered as a 1-hr intravenous infusion on day 4 following bortezomib.</p>
Duration of Therapy	<p>Patients may be treated for up to 8 cycles or until disease progression or the occurrence of unacceptable toxicity</p>

Some Potential Side Effects:

<i>Heart-related Toxicities</i>	<p>Your doctor will monitor your heart function and watch the dosage of Doxil. Notify your doctor of any history of heart disease, prior chemotherapy or radiation to the chest. Notify your doctor/nurse if you experience shortness of breath, ankle swelling, fatigue or irregular heart beat.</p>
<i>Infusion Reaction</i>	<p>Infusion reactions have been seen in some patients treated with Doxil so you will be closely observed for reactions during infusions. In some patients this can be managed by slowing or stopping the infusion. In some patients these reactions can be serious and life threatening. If a reaction occurs it is generally during the first infusion.</p>
<i>Hand-Foot Syndrome</i>	<p>Notify your doctor/nurse of any redness, rash, pain/tenderness, swelling, tingling, flaking or small blisters on palms of hand or soles of feet. In most case this is mild and improves in 1–2 weeks without delay of therapy and can be managed with simple supportive measures and dosage adjustments</p>
<i>Stomatitis</i>	<p>Mouth sores, dry, swollen tongue, difficulty swallowing, pain or burning in the mouth. This is generally manageable with proper mouth care and avoiding certain foods and beverages and dosage adjustments.</p>
<i>Decreased Blood Cell Counts</i>	<p>You may experience significant reduction in the number of blood cells in your body and you may be given medication that may help increase blood cell counts or your doctor may delay and/or reducing your Doxil and VELCADE[®] doses</p> <p>Neutropenia – decreased white blood cell counts can lead to fever and infections. Notify your doctor or nurse immediately if you develop a fever of 100.5°F or higher.</p> <p>Anemia – decreased red blood cell counts can make you feel tired and fatigued.</p> <p>Thrombocytopenia – decreased platelet counts can lead to impaired blood clotting and prolonged bleeding.</p>
Efficacy	<p>The large Phase III study showed that when used together to treat patients with relapsed/refractory multiple myeloma, Doxil plus VELCADE[®] significantly extended the median time to disease progression (TTP) from 6.5 months to 9.3 months. The 15-month survival rate for Doxil + VELCADE[®] was 76% compared with 65% for VELCADE[®] alone.</p>