Sorafenib

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is used for:
  - A type of liver cancer called hepatocellular carcinoma (HCC)
  - A type of kidney cancer called renal cell carcinoma (RCC)
  - A type of thyroid cancer called differentiated thyroid carcinoma (DTC)
- It may also be used for other reasons.

Goal of Treatment: _____

- Treatment may continue for a certain time period, until it no longer works, or until side effects are no longer controlled.

Treatment Regimen

Treatment Name	How the Treatment Works	How the Treatment is Given
Sorafenib (sor-A-feh-nib): Nexavar (NEK-suh-var)	Slows down or stops the growth of cancer cells by blocking specific proteins involved in tumor growth and the formation of blood vessels.	Tablet(s) taken by mouth.

Treatment Administration and Schedule

Your sorafenib dosing instructions:

_____

_____

_____

- Sorafenib comes in 1 tablet strength: 200 mg.
- Your dose might differ, but sorafenib is typically taken as two 200 mg tablets (400 mg total) by mouth 2 times a day.
- Take sorafenib 2 times a day, around the same times each day.
- Take sorafenib without food (at least 1 hour before or 2 hours after a meal).
- Swallow sorafenib tablets whole. Do not chew, crush, or split sorafenib tablets
- Do not change your dose or stop taking sorafenib unless your care team tells you to.
- Your care team may tell you to change your dose, temporarily stop, or completely stop taking sorafenib if you develop certain side effects.

Brought to you by: ACCC Association of Cancer Care Centers, HOPA Hematology/Oncology Pharmacy Association, NCODA Network for Collaborative Oncology Development & Advancement, ONS Oncology Nursing Society

Treatment Administration and Schedule (Continued)

- If you vomit or miss a dose of sorafenib, skip the missed dose, and take your next dose at your regular time. Do not double your dose of sorafenib.
- If you take too much sorafenib, call your care team or go to the nearest hospital emergency room right away.

Storage and Handling of Sorafenib

- Store sorafenib at room temperature between 68°F and 77°F (20°C to 25°C).
- Store sorafenib in a dry place.
- People who are or may be pregnant should wear gloves when handling sorafenib.
- Keep sorafenib and all medicines out of the reach of children and pets.
- Ask your care team how to safely throw away any unused sorafenib.

Appointments

Appointments may include regular check-ups with your care team, lab visits, and imaging tests. It's important to keep your appointments whenever you can. If you miss an appointment, call your care team as soon as possible to reschedule it.

Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Taken at Home
To help prevent or treat nausea and vomiting	
Other	

Common Side Effects

Side Effect	Important Information
Low Platelet Count (Thrombocytopenia)	Description: Platelets help your blood clot and wounds heal. A low platelet count increases your risk of bruising and bleeding. Recommendations: • Blow your nose gently and avoid picking it. • Brush your teeth gently with a soft toothbrush and keep good oral hygiene. • Use an electric razor for shaving and a nail file instead of nail clippers. • Avoid over-the-counter medicines that can increase bleeding risk (for example, nonsteroidal anti-inflammatory drugs (NSAIDs) like ibuprofen). • Talk with your care team or dentist before medical or dental procedures — you may need to pause treatment. Talk to your care team if you have: • A nosebleed lasting more than 5 minutes despite pressure • A cut that continues to bleed • Heavy gum bleeding when brushing or flossing • Sudden or severe headache • Blood in your urine or stool • Blood in your spit after coughing
Low Red Blood Cell (RBC) Count and Hemoglobin (Hgb) (Anemia)	Description: RBCs and Hgb carry oxygen to your body's tissues and remove carbon dioxide. Low RBC or Hgb (anemia) can make you feel weak or very tired, or may make you look pale. Recommendations: • Aim for 7 to 8 hours of sleep each night. • Do not drive, operate heavy machinery, or do other dangerous activities if you are very tired. • Balance activity and rest — stay as active as you can, but rest when needed. • Eat a balanced diet and follow any nutrition or supplement advice from your care team. Talk to your care team if you have: • Shortness of breath • Dizziness or fainting • Fast or irregular heartbeats • Sudden or severe headache

<table>
<tr><td>Fatigue</td><td>Description: Fatigue is a constant and sometimes strong feeling of tiredness.

Recommendations:
Routine exercise can help reduce fatigue. Talk with your care team to find the right type and amount of activity for you.
Ask family and friends for help with daily tasks and for emotional support.
Try healthy ways to feel better, such as meditation, journaling, yoga, or guided imagery, to reduce anxiety and improve well-being.
Aim for 7 to 8 hours of sleep each night. Limit daytime naps to help you sleep better at night.
Do not drive, operate heavy machinery, or do other potentially dangerous activities if you are very tired.
Talk to your care team if you have:
Tiredness that affects your daily life or prevents you from doing normal activities
Tiredness that does not get better with rest
Dizziness or weakness along with severe tiredness</td></tr>
<tr><td>High Blood Pressure (Hypertension)</td><td>Description: High blood pressure means the force of blood against your artery walls is too high. Treatment can raise your blood pressure or make it harder to control.

Recommendations:
Exercise regularly, maintain a healthy weight, and limit alcohol and salt (sodium).
Take blood pressure medicines as prescribed. Your care team may change your medicines if needed.
Your care team may ask you to check and record your blood pressure at home. Bring readings to appointments.
Follow diet and lifestyle advice from your care team.
Talk to your care team if you have:
Severe or new headaches
Dizziness or lightheadedness
Blurred vision
Trouble breathing
Nosebleeds that do not stop
A pounding sensation in your chest, neck, or ears
Irregular or fast heartbeats
Chest pain or pressure</td></tr>
<tr><td>Liver Problems</td><td>Description: Treatment can cause liver injury. Your care team may check your liver with blood tests before and during treatment.

Talk to your care team if you have:
Yellowing of your skin or the white part of your eyes (jaundice)
Severe nausea or vomiting
Pain on the right side of your stomach area (abdomen)
Dark, tea-colored urine
Bleeding or bruising more easily than normal</td></tr>
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<tr><td>Stomach-Area (Abdominal) Pain</td><td>Description: Abdominal pain is when you feel discomfort or pain in the belly area.

Talk to your care team if you have:
• Severe abdominal pain</td></tr>
<tr><td>Low Appetite & Weight Loss</td><td>Description: Loss of appetite can lead to weight loss and low energy. Small changes in when and what you eat can help maintain strength and nutrition.

Recommendations:
• Be as active as you can. Do light physical activity before a meal (check with your care team before starting an exercise program).
• Note times of day when your appetite is best and eat your largest meal then.
• Eat 5 or 6 small meals or snacks each day.
• Choose high-protein foods (beans, chicken, fish, meat, yogurt, tofu, eggs). Eat protein first during meals.
• Choose higher-calorie foods (avoid “low-fat", “fat-free”, or “diet” options when trying to gain/maintain weight).
• If you feel full quickly, avoid drinking 30 minutes before a meal and drink liquids between meals; choose calorie-containing drinks rather than diet drinks.
• Have a bedtime snack that’s easy to digest (for example, peanut butter and crackers). If you have reflux, wait at least 1 hour before lying down.
• Try nutritious beverages (high-protein shakes or smoothies) if solid food is unappealing.
• Ask your care team about liquid nutrition supplements and ways to add protein or calories (protein powder, yogurt, ice cream).

Talk to your care team if you have:
• Unintentional weight loss
• Little or no appetite for several days
• Excessive tiredness or low energy</td></tr>
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<tr><td>Diarrhea</td><td>Description: Diarrhea is loose, watery stools or more frequent bowel movements than usual. It can cause dehydration and weakness.

Recommendations:
Keep track of how often you go to the bathroom each day.
Drink 8 to 10 glasses of water or other fluids daily, unless your care team tells you otherwise.
Eat small meals of mild, low-fiber foods (such as bananas, applesauce, potatoes, chicken, rice, and toast).
If you have diarrhea, avoid high-fiber foods (such as raw vegetables, fruits, and whole grains), gas-producing foods (such as broccoli and beans), dairy (such as milk and yogurt), and spicy, fried, or greasy foods.
Your care team may recommend an antidiarrheal medicine such as loperamide (Imodium).
Talk to your care team if you have:
4 or more bowel movements above your usual number in 24 hours
Dizziness or lightheadedness while having diarrhea
Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)
Bloody diarrhea</td></tr>
<tr><td>Hair Loss (Alopecia)</td><td>Description: Hair loss or thinning may begin days to weeks after treatment starts and usually grows back later. New growth can be a different color or texture and may not look the same as before.

Recommendations:
Consider a short haircut before treatment and use scarves, hats, or wigs for comfort and confidence.
Keep your head covered outdoors to protect it from the sun and cold; apply sunscreen to your exposed scalp.
Use gentle haircare: mild shampoo, soft brush, and avoid heat styling and harsh treatments.
Ask your care team about wig prescriptions or resources for head coverings.
Talk to your care team if you have:
No hair regrowth months after treatment ends
Concern about hair changes or need help finding a wig or support resources</td></tr>
</table>

Hand-Foot Skin Reaction (HFSR)	Description: HFSR causes dryness, thickening, calluses, blisters, or cracking of the skin on the palms of your hands and soles of your feet. HFSR can lead to a loss of fingerprints, which could impact your identification. Recommendations: • Keep hands and feet moisturized with a non-scented moisturizing cream. • Applying urea 10% or 20% cream twice daily to the affected area may be helpful. • Avoid exposure to hot water on the hands and feet in showers or baths, or when doing dishes, as this may dry out the skin. • Avoid tight-fitting shoes or socks. • Avoid excessive rubbing of hands and feet unless applying lotion. • Wear gloves when working with your hands. Talk to your care team if you have: • Painful blisters or calluses on your hands or feet
Rash or Itchy Skin	Description: Rash or itchy skin can cause redness, swelling, and a variety of bumps or patches (small red spots, welts, blisters, or scaly dry areas). Recommendations: • Keep your skin moisturized with creams or lotions to reduce rash and itchiness. • Wear loose-fitting clothing. • Avoid perfumes and colognes, as they may worsen rash symptoms. • Limit time spent in the heat to prevent worsening symptoms. • Avoid sun exposure, especially between 10 AM and 4 PM, to lower the risk of sunburn. • Wear long-sleeved clothing with ultraviolet (UV) protection and broad-brimmed hats. • Apply broad-spectrum sunscreen (UVA/UVB) with sun protective factor (SPF) 30 or higher as directed. • Use lip balm with SPF 30 or higher. • Avoid tanning beds. • Your care team may recommend medicines for symptoms. Talk to your care team if you have: • Rash or itching that continues to worsen

Thyroid Gland Problems	Description: Sorafenib can cause the thyroid gland to not make enough thyroid hormones (hypothyroidism). Talk to your care team if you have: • Fatigue • Weight gain • A puffy face • Being cold all of the time • Constipation • Dry skin • Thinning, dry hair • Decreased sweating • Depression
High Amylase and Lipase Levels in Your Blood	Description: Treatment may cause high levels of amylase and lipase in your blood. This may indicate a problem with your pancreas. Your care team will do blood tests to check you for these changes and will treat you if needed. Talk to your care team if you have: • Fever of 100.4°F (38°C) or higher • Fast heartbeat • Severe stomach-area (abdominal) pain that radiates to the back • Worsening pain after eating • Severe nausea or vomiting • Diarrhea • Yellowing of your skin or the white part of your eyes (jaundice)
Changes in Electrolytes and Other Laboratory Results	Description: Treatment may cause low levels of calcium and phosphate in your blood. It may also cause a high international normalized ratio (INR) level, which may increase your risk of bleeding. Your care team will perform blood tests to check you for these changes and will treat you if needed. Talk to your care team if you have: • Severe muscle cramps or spasms • Tingling or numbness around the mouth, hands, or feet • New weakness or trouble breathing • Fast, irregular, or pounding heartbeat • Confusion, fainting, or seizures • Sudden weight gain • Swelling of your arms, hands, legs, or ankles • New or worsening muscle weakness, cramps, or bone pain • Trouble breathing or shortness of breath • Confusion, slurred speech, or severe dizziness • Severe fatigue or inability to perform daily activities • Vomiting blood or if your vomit looks like coffee grounds • Pink or brown urine • Red or black (looks like tar) stools • Coughing up blood or blood clots • Menstrual bleeding that is heavier than normal \Unusual vaginal bleeding • Nosebleeds that happen often • Bruising • Lightheadedness

Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms
Heart Problems	• Chest pain, pressure, tightness, or discomfort (may spread to arm, neck, jaw, or back) • Shortness of breath or trouble breathing, with or without chest pain • Fast, slow, or irregular heartbeat, pounding or fluttering in your chest • Protruding neck veins • Breaking out in a cold sweat • Sudden dizziness, fainting, or feeling like you might pass out • New or sudden swelling in your legs, ankles, feet, or sudden weight gain • Sudden severe fatigue, weakness, sweating, nausea, or vomiting • Feeling lightheaded or dizzy
Changes in the Electrical Activity of Your Heart Called QT Prolongation	QT prolongation can cause irregular heartbeats that can be life-threatening. • Feel faint, lightheaded, dizzy • Fast or irregular heartbeat
Severe Bleeding (Hemorrhage)	• Vomiting blood or if your vomit looks like coffee grounds • Pink or brown urine • Red or black (looks like tar) stools • Coughing up blood or blood clots • Menstrual bleeding that is heavier than normal • Unusual vaginal bleeding • Nosebleeds that happen often • Bruising • Lightheadedness
A Tear in Your Stomach or Intestinal Wall (Perforation)	• Severe pain or tenderness in your stomach area (abdomen) • Swelling of the abdomen • Fever of 100.4°F (38°C) or higher • Chills • Nausea • Vomiting • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)

Before starting treatment, ask your care team when to call 9-1-1 or seek emergency help.
If you experience any new, worsening, or uncontrolled side effects, contact your care team immediately.

Intimacy, Fertility, Pregnancy, and Breastfeeding

- Treatment may **change how you feel about intimacy and your body.** However, physical closeness—such as holding hands and hugging—remains safe. It is common to have questions about intimacy. If needed, talk to your care team for guidance.
- Treatment may affect your **ability to have children**. It may damage your reproductive organs or stop them from working. If you are worried about fertility, talk to your care team before starting treatment.
- Treatment may **harm an unborn baby**.
    - If you are able to become pregnant:
        - Your care team will verify your pregnancy status before treatment.
        - Use an effective method of birth control during treatment and for 6 months after your last dose of sorafenib.
        - If you think you might be pregnant or if you become pregnant, tell your care team right away.
    - If your partner is able to become pregnant, use an effective method of birth control—such as condoms—during treatment and for 3 months after your last dose of sorafenib.
- **Do not breastfeed** during treatment and for 2 weeks after your last dose of sorafenib.

Additional Information

- **Tell your care team about all the medicines you take**.
  This includes prescriptions, over-the-counter drugs, vitamins, and herbal products. Before starting any new medicine, supplement, or vaccine, ask your care team first.
- **Wound healing problems**. Wound healing problems have happened in some people who take sorafenib. Tell your care team if you plan to have any surgery before or during treatment with sorafenib.
    - You should stop taking sorafenib at least 10 days before planned surgery.
    - Your care team should tell you when you may start taking sorafenib again after surgery.
- **This Patient Education Sheet may not describe all possible side effects.**
  Call your care team for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

Notes

Updated Date: July 20, 2026

Scan the QR code below to access this education sheet.

Important Notice:
The Association of Cancer Care Centers (ACCC), Hematology/Oncology Pharmacy Association (HOPA), Network for Collaborative Oncology Development & Advancement, Inc. (NCODA), and Oncology Nursing Society (ONS) have collaborated to gather information and develop this patient education guide. This guide is a summary of the medication, based on information provided by the drug manufacturer and other sources.

This guide does not cover all information available on the possible uses, directions, doses, precautions, warnings, interactions, adverse effects, or risks associated with this medication. It should not be used as a substitute for the advice of a qualified healthcare professional. The provision of this guide is for informational purposes only. It does not constitute or imply endorsement, recommendation, or favoring of this medication by ACCC, HOPA, NCODA, or ONS, who assume no liability for and cannot ensure the accuracy of the information presented. All decisions regarding this medication should be made with the guidance and direction of a qualified healthcare professional.

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