Cyclophosphamide, Bortezomib, and Dexamethasone (CyBorD)

Patient Education Sheets
Understanding Your Cancer Treatment

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is often used for multiple myeloma (MM) and amyloidosis.
- 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

This treatment is often called by its acronym: “CyBord” or “VCd”

CyBorD

- **Cy**: **Cy**clophosphamide
- **Bor**: **Bor**tezomib
- **D**: **D**examethasone

VCd

- **V**: Bortezomib (**V**elcade)
- **C**: **C**yclophosphamide
- **d**: **D**examethasone

Treatment Name	How the Treatment Works	How the Treatment is Given
Cyclophosphamide (SY-kloh-FOS-fuh-mide)	Slows down or stops the growth of cancer cells by damaging the genetic material that cancer cells need to multiply.	Capsules or tablets taken by mouth. OR Infusion into a vein (intravenous (IV) infusion).
Bortezomib (bor-TEH-zoh-mib): Velcade (VEL-kayd)	Blocks a part of the cell that helps break down proteins, which stops cancer cells from growing and causes them to die.	Infusion into a vein (intravenous (IV) infusion). OR Injection given under the skin (subcutaneous injection) into the thigh or stomach-area (abdomen).
Dexamethasone (DEK-suh-MEH-thuh-sone)	Tells cancer cells to "self-destruct". It also helps other medicines work better.	Tablet(s) taken by mouth. OR Infusion into a vein (intravenous (IV) infusion).

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Treatment Administration and Schedule

Treatment is typically repeated every 4 weeks. This length of time is called a “cycle”.

- Cyclophosphamide is given weekly on Days 1, 8, 15, and 22.
- Bortezomib is typically given weekly on Days 1, 8, 15, and 22.
- Talk with your care team about how to you take dexamethasone.

Treatment Name	Cycle 1									Next Cycle
	Day 1	…	Day 8	…	Day 15	…	Day 22	…	Day 28	Day 1
Cyclophosphamide	✓		✓		✓		✓			✓
Bortezomib	✓		✓		✓		✓			✓
Dexamethasone	Talk with your care team about how you will take dexamethasone.									

See the information below if you are going to be taking cyclophosphamide, dexamethasone, or both by mouth.

Your cyclophosphamide (and, if taken by mouth, dexamethasone) dosing instructions:

_____

_____

_____

Treatment Taken by Mouth: Cyclophosphamide and Dexamethasone

- Cyclophosphamide comes in 2 capsule strengths (25 mg and 50 mg) and 1 tablet strength (50 mg). Your care team will tell you when and how much to take. They may adjust your doses, if needed.
- Swallow cyclophosphamide tablets or capsules whole with water once a day. Do not open, break, or chew your capsules or tablets.
- Your dose is based on many factors, including your height and weight, overall health, and diagnosis.
- Cyclophosphamide may be taken with or without food. Drink lots of fluids with cyclophosphamide to prevent side effects and dehydration. If taken by mouth, dexamethasone should be taken with food.
- Take cyclophosphamide at about the same time each day in the morning. Do not take it at bedtime. If taken by mouth, dexamethasone should be taken in the morning.
- If you miss a dose of cyclophosphamide and it has been less than 12 hours since your usual time, take it as soon as you remember. Call your care team if you forget to take your dose. Do not take 2 doses at the same time.
- If you take too much cyclophosphamide, call your care team or go to the nearest hospital emergency room right away.

Storage and Handling of Cyclophosphamide and Dexamethasone

- Store cyclophosphamide and dexamethasone at room temperature, between 68°F and 77°F, in a dry location away from direct light.
- Keep cyclophosphamide and dexamethasone out of the reach of children and pets.
- Whenever possible, give cyclophosphamide to yourself and follow the steps below. If someone else gives it to you, they must also follow these steps:
    1. Wash hands with soap and water.
    2. Put on gloves to avoid touching the medication.
    3. Transfer the cyclophosphamide from its package to a small medicine or other disposable cup.
    4. Administer the medicine immediately by mouth with water.
    5. Remove gloves, if used, and throw them and medicine cup in household trash.
    6. Wash hands with soap and water.
- Do not open or break cyclophosphamide capsules or handle them any more than needed. If the contents of the capsule or crushed/cut tablets come in contact with your skin, wash the skin right away with soap and water.
- If you plan to use a daily pill box or pill reminder, contact your care team before using it.
    - When the box or reminder is empty, wash it with soap and water before refilling.
    - The person refilling the box or reminder should:
        - Wear gloves.
        - Wash their hands with soap and water after completing the task.
- Ask your care team how to safely throw away any unused cyclophosphamide. Do not throw it in the trash or flush it down the sink or toilet.

Appointments

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

Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Given at the Clinic or Hospital	Supportive Care Taken at Home
To help prevent or treat nausea and vomiting		
To help lower the risk of infections		
Other		

Common Side Effects

Side Effect	Important Information
Low White Blood Cell (WBC) Count (Neutropenia) and Increased Risk of Infection	Description: WBCs help protect your body from infections. A low WBC count increases your risk of getting infections. Recommendations: • Wash your hands often and bathe regularly. • Avoid crowded places and close contact with people who are sick. • Follow food safety and wound care advice from your care team. • Your care team may prescribe medicine to help your WBCs recover. Talk to your care team if you have: • Fever of 100.4°F (38°C) or higher • Chills • New or worsening cough or sore throat • Painful urination or signs of a urinary infection • Feeling much more tired than usual • Red, swollen, warm, or painful areas on the skin (possible skin infection)
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, very tired, or 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

Fatigue	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
Nausea and Vomiting	Description: Nausea is an uncomfortable feeling in your stomach or the need to throw up. You may or may not vomit. Recommendations: • Eat smaller, more frequent meals. • Avoid fatty, fried, spicy, or highly sweet foods. • Eat bland foods at room temperature and drink clear liquids. • If you vomit, start with small sips of water, broth, or other clear liquids. If these stay down, try soft foods (such as gelatin, plain cornstarch pudding, yogurt, strained soup, or strained cooked cereal) and gradually return to solid foods. • Your care team may prescribe medicine for these symptoms. Talk to your care team if you have: • Vomiting for more than 24 hours • Nonstop vomiting • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine) • Blood or coffee-ground-like appearance in your vomit • Severe stomach pain that does not go away after vomiting

Diarrhea	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 than normal in 24 hours • Dizziness or lightheadedness while having diarrhea • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine) • Bloody diarrhea
Constipation	Description: Constipation means hard, dry stools or fewer bowel movements than normal. It can cause discomfort or pain. Recommendations: • Track how often you have bowel movements each day. • Drink 8 to 10 glasses of fluids daily, unless your care team says otherwise. • Stay active and exercise regularly. • Eat more high-fiber foods (such as raw fruits, vegetables, and whole grains) unless advised otherwise. • Your care team may recommend laxatives such as polyethylene glycol (Miralax) or senna. Talk to your care team if you have: • Constipation lasting 3 or more days • No bowel movement 48 hours after using a laxative

Nerve Problems in Your Arms, Hands, Legs, or Feet (Peripheral Neuropathy)	Description: Nerve pain and tingling are uncomfortable sensations from nerve damage or irritation. Pain may be sharp, burning, or deep. Tingling can feel like pins-and-needles or mild electric shocks, often in the hands, feet, arms, or legs. Recommendations: • Keep a daily log of pain and sensations, noting triggers and what helps or makes it worse. • Check your feet every day for cuts, sores, blisters, or color changes, especially if numbness reduces feeling. • Wear comfortable, well-fitting shoes and avoid walking barefoot if sensation is reduced. • Protect hands and feet from extreme heat or cold. • Your care team may recommend or prescribe medicines, topical treatments, physical therapy, or supplements to help with symptoms. Talk to your care team if you have: • New or worsening “pins and needles”, burning, or numbness in your hands or feet • Trouble moving your arms or legs, or weakness • Problems with balance or frequent falls

Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms	
Heart Problems	• Swelling of your stomach-area (abdomen), legs, hands, feet, or ankles • Shortness of breath • Nausea or vomiting • New or worsening chest discomfort, including pain or pressure	• Weight gain • Pain or discomfort in your arms, back, neck, or jaw • Protruding neck veins • Breaking out in a cold sweat • Feeling lightheaded or dizzy
Dizziness or Lightheadedness (Hypotension)	• Dizziness	• Lightheadedness
Lung Problems	• Cough • Shortness of breath	• Chest pain
Changes in Blood Sugar	High or low blood sugar may occur during treatment. This risk may be higher for people who take medicine for diabetes. Signs and Symptoms of High Blood Sugar (Hyperglycemia): • Frequent urination • Drowsiness • Increased thirst • Loss of appetite • Blurred vision • Fruity smell on your breath • Confusion • Nausea, vomiting, or stomach pain • It becomes harder to control your blood sugar	Signs and Symptoms of Low Blood Sugar (Hypoglycemia): • Dizziness • Confusion or difficulty concentrating • Feeling sweaty, shaky, or hungry • Tiredness
Liver Problems	• Yellowing of your skin or the whites of your eyes (jaundice) • Severe nausea or vomiting • Pain on the right side of your stomach area (abdomen)	• Dark urine (tea colored) • Bleeding or bruising more easily than normal
Bladder Irritation	Cyclophosphamide can cause irritation and damage to your bladder. To reduce this risk, take your cyclophosphamide early in the day, drink plenty of fluids, and urinate frequently for a few days after each dose of cyclophosphamide. • Blood in the urine • Painful urination • Urinating more frequently	• Stomach (abdominal) or pelvic pain • Fever of 100.4°F (38°C) or higher

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Herpes Reactivation	• Blisters on your lips or around your mouth • Blisters on and around your genitals • Fever of 100.4 °F (38°C) or higher • Flu-like symptoms, such as fatigue, headache, and muscle aches
Posterior Reversible Encephalopathy Syndrome (PRES)	A neurologic condition called PRES can happen during treatment with bortezomib. • Severe headache • Confusion • Weakness • Seizures • Blindness or change in vision
Progressive Multifocal Leukoencephalopathy (PML)	PML is a rare, serious brain infection caused by a virus that can happen in people who receive bortezomib. People with weakened immune systems can get PML. PML can result in death or severe disability. There is no known treatment, prevention, or cure for PML. • Confusion • Dizziness or loss of balance • Difficulty walking or talking • Decreased strength or weakness on one side of your body • Vision problems, such as blurred vision or loss of vision
Thrombotic Microangiopathy (TMA)	TMA is a condition involving blood clots and injury to small blood vessels that may cause harm to your kidneys, brain, and other organs, and may lead to death. • Confusion • Weakness • Swelling of arms and legs • Yellowing of your skin or the whites of your eyes (jaundice) • Stomach (abdomen) or back pain • Nausea or vomiting • Feeling sick • Decreased urination
Tumor Lysis Syndrome (TLS)	Tumor lysis happens when cancer cells break apart and flood your bloodstream with chemicals and toxins faster than your body can get rid of them. TLS is a group of conditions that affect your heart, kidneys, and muscles. • Severe nausea, vomiting, or diarrhea • Urinating smaller amounts or dark-colored urine • Muscle cramps or twitching • Rapid heartbeats or chest pain • Confusion or weakness • Seizures
Risk of New Cancer	There is a risk of developing new cancers during or after treatment. Talk with your care team about this risk, and ask about the signs and symptoms of new cancers.

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 can 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, take a pregnancy test before starting treatment.
  - Use an effective method of birth control during treatment with CyBorD, for 7 months after your last dose of bortezomib, and 1 year after your last dose of cyclophosphamide.
  - 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 with CyBorD and for 4 months after your last doses of bortezomib and cyclophosphamide.
- **Do NOT breastfeed** during treatment with CyBorD, for 2 months after your last dose of bortezomib, and for 6 weeks after your last dose of cyclophosphamide.

Handling Body Fluids and Waste

Some drugs you receive may stay in your urine, stool, sweat, or vomit for many days after treatment. Because many cancer drugs are toxic, your body waste may also be dangerous to touch. To help protect yourself, your loved ones, and the environment, **follow these instructions** for at least **48 hours** after each dose of **cyclophosphamide and bortezomib.**

- People who are pregnant should avoid touching anything that may be soiled with body fluids from the patient.
- You can use your usual toilet. Always close the lid and flush to discard all waste. If you have a low-flow toilet, flush twice.
- If the toilet or seat is soiled with urine, stool, or vomit, clean the surface after each use before others use it.
- Wash your hands with soap and water for at least 20 seconds after using the toilet.
- If you need a bedpan, inform your caregiver so they can wear gloves and assist with cleanup. Wash the bedpan with soap and water daily.
- If you cannot control your bladder or bowels, use a disposable pad with a plastic back, a diaper, or a sheet to absorb waste.
- Wash any skin exposed to body waste with soap and water.
- Wash soiled linens or clothing separately from other laundry. If you don’t have a washer, place them in a plastic bag until they can be washed.
- Wash your hands with soap and water after touching soiled linens or clothing.

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.
- **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

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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 in gathering information for and developing this patient education guide. This guide represents a brief summary of the medication derived from information provided by the drug manufacturer and other resources.

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