

Brentuximab Vedotin, Cyclophosphamide, Doxorubicin, and Prednisone (A-CHP)

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is used for systemic anaplastic large cell lymphoma (sALCL) and other peripheral T-cell lymphomas (PTCL).
- 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

Your treatment is often called A-CHP or BV-CHP:

- **A or BV:** Adcetris (**B**rentuximab **V**edotin)
- **C:** Cyclophosphamide
- **H:** Hydroxydaunorubicin (Doxorubicin)
- **P:** Prednisone

Treatment Name	How the Treatment Works	How the Treatment is Given
Brentuximab Vedotin (bren-TUK-sih-mab veh-DOH-tin): Adcetris (ad-SEH-tris)	Finds and attaches directly to a specific protein on cancer cells. Once attached, the medicine goes inside the cancer cell and releases a chemotherapy drug to destroy it.	Infusion into a vein (intravenous (IV) infusion).
Cyclophosphamide (SY-kloh-FOS-fuh-mide): Cytoxan (sai-TAAK-sn)	Slows down or stops the growth of cancer cells by damaging the genetic material that cancer cells need to multiply. It can also be used to dull the immune response.	Infusion into a vein (intravenous (IV) infusion).
Doxorubicin (DOK-soh-ROO-bih-sin): Adriamycin (AY-dree-uh-MY-sin), Hydroxydaunorubicin (hy-DROK-see-DAW-noh-ROO-bih-sin)	Slows down or stops the growth of cancer cells by damaging the genetic material that cancer cells need to grow.	Infusion into a vein (intravenous (IV) infusion).
Prednisone (PRED-nih-sone)	Tells cancer cells to "self-destruct".	Tablet(s) taken by mouth.

Treatment Administration and Schedule

Treatment is typically repeated every 21 days (3 weeks). This length of time is called a “cycle.” You may receive up to 6 to 8 cycles of treatment. Your care team will tell you how many treatment cycles you will receive.

Note: Prednisone is taken by mouth 1 time each day on Days 1 to 5 of cycles 1 to 6 or 8.

- Your care team will prescribe this medicine.
 - Take prednisone with food to avoid stomach upset.
 - Tell your care team if you develop heartburn or acid reflux.
 - Prednisone may increase your blood sugar and blood pressure on days of therapy.
 - Avoid taking it in the evening (after 6 PM) or before bedtime, as it can cause trouble sleeping.
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- Brentuximab vedotin is given on Day 1.
 - Cyclophosphamide is given on Day 1.
 - Doxorubicin is given on Day 1.
 - Prednisone is taken on Days 1 to 5.

Treatment Name	Cycle 1								Next Cycle
	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	...	Day 21	Day 1
Treatment Given at the Clinic or Hospital									
Brentuximab vedotin	✓								✓
Cyclophosphamide	✓								✓
Doxorubicin	✓								✓
Treatment Taken at Home									
Prednisone	✓	✓	✓	✓	✓				✓

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 an appointment, call your care team as soon as possible to reschedule it.

Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Given at the Clinic or Hospital	Supportive Care Taken at Home
To help your body make white blood cells to fight infections		
To help prevent or treat nausea and vomiting		
To help lower the risk of infusion-related reactions		
Other		

Common Side Effects

Side Effect	Important Information
Low White Blood Cell (WBC) Count (Neutropenia) and Increased Risk of Infection (Boxed Warning)	Description: WBCs help protect your body from infections. A low WBC count increases your risk of infection. 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
Low Platelet Count (Thrombocytopenia) (Boxed Warning)	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) (Boxed Warning)	Description: Red blood cells carry oxygen throughout your body. Low levels can make you feel tired, weak, dizzy, or short of breath. 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
Mouth Sores or Irritation (Mucositis or Stomatitis)	Description: Treatment can irritate the lining of the mouth. In some cases, this can cause redness, sores, pain, and swelling. Recommendations: • Rinse your mouth after meals and at bedtime; rinse more often if sores develop. • Brush your teeth gently with a soft toothbrush or use a cotton swab after meals. • Use a mild, non-alcohol mouth rinse at least 4 times daily (after meals and at bedtime). Example: 1/8 teaspoon salt + 1/4 teaspoon baking soda in 8 oz warm water. • Avoid acidic, hot, spicy, rough, or crunchy foods and drinks that can irritate your mouth. • Avoid tobacco, alcohol, and alcohol-based mouthwash. • Your care team may prescribe medicines or mouth treatments to help with pain and healing. Talk to your care team if you have: • Painful mouth sores or throat pain • Trouble eating or significant weight loss

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 in your vomit or vomit that looks like coffee grounds • Severe stomach pain that does not go away after vomiting
Diarrhea	Description: Diarrhea means having bowel movements more often than usual. Your stools may also be loose or watery. If you have diarrhea: • Keep track of how often you have diarrhea. • Drink 8 to 10 glasses of water or fluids each day. Do this unless your care team tells you otherwise. • Eat small meals with low-fiber foods. Try bananas, applesauce, potatoes, chicken, rice, or toast. • Avoid high-fiber foods. These include raw vegetables, fruit, and whole grains. • Avoid foods that may cause gas. These include broccoli and beans. • Avoid milk, yogurt, and other dairy foods. • Avoid spicy, fried, or greasy foods. • Your care team may recommend medicine for diarrhea. One example is loperamide (Imodium). Talk to your care team if you have: • An increase of 4 or more bowel movements than usual in one day • Dizziness or lightheadedness while you have diarrhea • Signs of dehydration, such as feeling very thirsty, dizzy, or having dark urine • Blood in your stool

Numbness, Tingling, or Burning in Your Hands 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
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

Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms
Heart Problems (Boxed Warning)	Doxorubicin may cause heart problems that may lead to death. These problems can happen during your treatment or months to years after stopping treatment. In some cases, heart problems are irreversible. There is a cumulative total lifetime dose of doxorubicin. Your care team will track the amount of doxorubicin you receive. Talk with your care team if you have received anti-cancer medicines before. Your care team will perform tests to check your heart before, during, and after your treatment with doxorubicin. - 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
Progressive Multifocal Leukoencephalopathy (PML) (Boxed Warning)	PML is a rare, serious brain infection caused by a virus that can happen in people who receive brentuximab vedotin. 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
Extravasation (Boxed Warning)	Extravasation happens when medicine that is supposed to go into a vein leaks out into the tissues around it. This can cause pain, swelling, and damage to the skin and tissues. Doxorubicin may cause extravasation. - Pain, burning, or stinging at the infusion site - Swelling, redness, or blistering around the site - Coolness or numbness in the area - Decreased blood flow or tissue damage, potentially leading to ulcers or tissue death in severe cases
Bone Marrow Problems called Myelodysplastic Syndrome (MDS) or Acute Myeloid Leukemia (AML) (Boxed Warning)	Symptoms of low blood cell counts are common during treatment, but can be a sign of serious bone marrow problems, including MDS or AML. Symptoms may include: - Weakness - Weight loss - Fever - Frequent infections - Blood in urine or stool - Shortness of breath - Feeling very tired - Bruising or bleeding more easily

Tears in Your Stomach or Intestines (Gastrointestinal Perforation)	Gastrointestinal perforation may be severe and lead to death. Tell your care team right away if you develop any of the following signs or symptoms: • Tenderness or pain in your stomach area (abdomen) that is severe or does not go away • Nausea, vomiting, or vomiting blood • Blood in the stool or black stool that looks like tar • Fever or chills
Serious Liver Problems	Treatment can cause a serious liver problem called veno-occlusive disease (VOD), also known as sinusoidal obstruction syndrome (SOS). This condition causes blockage of the small veins in the liver. Your care team may check your liver with blood tests before and during treatment. • 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) • Rapid or unusual weight gain • Dark, tea-colored urine • Bleeding or bruising more easily than normal • Swollen or tight stomach area (abdomen)
Kidney Problems	• Decrease in your amount of urine • Blood in your urine • Swelling of your ankles • Loss of appetite
Bladder Irritation (Hemorrhagic Cystitis)	Cyclophosphamide can cause irritation and damage to your bladder. To reduce this risk, 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
Change in the Color of Your Urine	You may have red- or orange-colored urine for 1 to 2 days after your infusion of doxorubicin. This is normal. • Your urine remains red- or orange-colored after a few days • Blood or blood clots in your urine
Lung Problems	Cyclophosphamide can cause lung problems that may be serious, life-threatening, or fatal. Lung problems can include inflammation or scarring in the lungs called interstitial lung disease (ILD) or pneumonitis. If you develop lung problems, your care team may treat you with corticosteroid medicines. Call your care team right away if you develop: • Cough • Trouble breathing or shortness of breath • Fever • Other new or worsening breathing symptoms such as chest tightness or wheezing

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
Allergic Reactions, Including Anaphylaxis	Get emergency medical help right away if you develop any of the following signs or symptoms: • Swelling of your lips, mouth, tongue, or throat • Trouble breathing or swallowing • Raised red areas on your skin (hives) • A very fast heartbeat • You feel dizzy or faint	
Tumor Lysis Syndrome (TLS)	Tumor lysis happens when cancer cells break apart and release large amounts of substances into your bloodstream faster than your body can handle. TLS is a group of conditions that affect your heart, kidneys, and muscles. • Severe nausea, vomiting, or diarrhea • Urinating smaller amounts or having dark-colored urine • Muscle cramps or twitching • Rapid heartbeats or chest pain • Confusion or weakness • Seizures	
Low Sodium Levels in Your Blood (Hyponatremia)	• New or worsening confusion, drowsiness, or trouble thinking • Severe headache or nausea/vomiting	• Seizures or fainting • Sudden weakness, unsteadiness, or trouble walking • Difficulty breathing
Risk of New Cancers	There is a risk of developing one or more new cancers during or after treatment. Talk with your care team about this risk, and ask about the signs and symptoms to watch for.	

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:
 - Your care team will verify your pregnancy status before treatment.
 - Use an effective method of birth control during treatment, for 2 months after your last dose of brentuximab vedotin, for 6 months after your last dose of doxorubicin, and for 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, for 3 to 6 months after your last dose of doxorubicin, and for 4 months after your last dose of brentuximab vedotin and cyclophosphamide.
 - If you have a pregnant partner, you should use condoms during treatment with doxorubicin and for at least 10 days after the final dose.
- **Do not breastfeed** during treatment with A-CHP, for 1 week after your last dose of cyclophosphamide, and for 10 days after your last dose of doxorubicin. It is **not known** if brentuximab vedotin is present in **breast milk**. Talk with your care team if you are breastfeeding or plan to breastfeed.

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**, **7 days** after each dose of **doxorubicin**, and **3 weeks** after each dose of **brentuximab vedotin**: (Note: Prednisone does not require special handling of body fluids and waste.)

- 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.
- **You should not receive a “live vaccine”** before, during, or after treatment, until your care team tells you it is okay. If you are not sure about the type of immunization or vaccine, ask your care team. These vaccines may not be safe or may not work as well during treatment.
- **Wound healing problems.** Wounds may not heal properly during cyclophosphamide treatment. Tell your care team if you plan to have any surgery before starting or during treatment with cyclophosphamide.
 - Your care team should tell you when you may start receiving cyclophosphamide 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

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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 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.

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