

What is Idarubicin?

Idarubicin is an anti-cancer agent used to treat some types of leukaemia.

How does it work?

Idarubicin belongs to a class of medication called anthracycline. It inhibits DNA and RNA synthesis by forming bonds between the components of DNA (purines and pyrimidine's), uncoiling the DNA helix and forming obstructions, resulting in the death of cells.

How is it given?

Idarubicin is administered as an intravenous (IV) infusion, usually over 1 hour.

Special instructions:

- Idarubicin can cause nausea and vomiting. The doctor will prescribe you medications to keep you from feeling sick and throwing up after you receive idarubicin.
- Drink plenty of fluid while receiving idarubicin.
- This medicine may make your mouth sore and irritated. The doctor or nurse may give you oral rinses to keep your mouth clean after you receive idarubicin.
- You may need an echocardiogram to test your heart function before and after receiving idarubicin.
- Your urine, sweat and tears may be tinted red in colour after receiving idarubicin.
- Certain side effects of therapy may be exacerbated when idarubicin is given during radiation therapy. If you are receiving radiotherapy as part of your treatment, idarubicin may be delayed or skipped during the duration of radiation.

Possible Side Effects:

Listed below, but not limited to, are the more commonly experienced side effects that you may see. The side effects your child might experience may be temporary and some may be permanent.

	Likely Happens to 21-100 children out of every 100	Less Likely Happens to 5-20 children out of every 100	Rare but serious Happens to <5 children out of every 100
Immediate Within 1-2 days of receiving the medicine	<ul style="list-style-type: none"> ▪ Nausea and/or vomiting ▪ Diarrhoea ▪ Abdominal (belly) cramps ▪ Pink or red colour to urine, sweat, tears and saliva 	<ul style="list-style-type: none"> ▪ Headache ▪ Temporary changes to the rhythm and rate of your heart* which may require treatment e.g. supraventricular tachycardia, S-T wave changes, atrial or ventricular extrasystoles 	<ul style="list-style-type: none"> ▪ Seizures ▪ Rash with itching and/or hives ▪ Severe allergic reaction which can be life threatening with shortness of breath, low blood pressure and a rapid heart rate. ▪ Damage to the skin if the medication leaks from the vein ▪ High levels of uric acid in the blood which could damage the kidneys
Prompt Within 2-3 weeks, prior to the next course	<ul style="list-style-type: none"> ▪ Decreased blood cell components. Fewer white blood cells may make it easier to get infections. Fewer red blood cells may make you feel tired and weak. Fewer platelets may cause you to bruise and 	<ul style="list-style-type: none"> ▪ Numbness or tingling in the fingers and toes 	<ul style="list-style-type: none"> ▪ Discoloration under fingernails ▪ Rash on the soles of your feet and/or palms of your hands ▪ Redness or burning at sites which have received radiation in the past

Idarubicin

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Patient/Caregiver Information

	bleed more easily. ▪ Increased risk of infections		
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Prompt Within 2-3 weeks, prior to the next course	<ul style="list-style-type: none"> ▪ Hair loss[^] ▪ Excessive or uncontrolled bleeding which occur in the head, stools, the nose, urine and other parts of the body[^] ▪ Inflammation and/or sores in the mouth (and/or throat and/or oesophagus) that may make swallowing difficult and painful 		<ul style="list-style-type: none"> ▪ Elevation of certain enzymes in the blood associated with the liver which may indicate liver irritation or damage ▪ Bleeding from the gastrointestinal tract including from a stomach ulcer, the colon or rectum and a risk of a tear in the lining of the gut ▪ Increase in certain factors in the blood associated with kidney damage ▪ Heart attack
Delayed Anytime later during therapy, excluding the above conditions			<ul style="list-style-type: none"> ▪ Damage to the heart muscle which may not be noticeable or may make you feel tired, weak, feel short of breath and retain fluid, and which may require treatment and/or may be permanent^{*#}
Late Anytime later after completion of therapy			<ul style="list-style-type: none"> ▪ A new cancer or leukaemia resulting from prolonged use of this treatment
[^] Toxicity may occur later [*] Rarely clinically significant [#] The risk is increased with chest radiation and prior uses of anthracyclines			

The risk of heart damage, associated with idarubicin, may be greater in very young children than in older children, and greater in children who received radiation therapy that involves the heart.

This information sheet is a brief overview. Each individual can respond differently to the medication, it is vital that you communicate all signs and symptoms you observe to your doctor or nurse.

If you have any questions about the information provided please discuss them with your oncologist or haematologist.

Further information can be obtained from your doctor, nurse or pharmacist or at the following website:
<http://medsafe.govt.nz/consumers/medicine/where.asp>