

What is Ifosfamide?

Ifosfamide is an anti-cancer agent used to treat different types solid tumors and in some type of leukaemia's.

How does it work?

Ifosfamide is an alkylating agent that prevents cell division by cross-linking DNA strands and by binding to other structures within the cell. This prevents protein and DNA synthesis.

How is it given?

Ifosfamide is administered as an intravenous (IV) infusion and is usually given over 1 hour. IV fluids will be required before, during and after the infusion.

Special instructions:

- It is important to be well hydrated and to urinate frequently prior to and after receiving IV ifosfamide. You will be given IV fluids while you are in hospital and your urinary output will be monitored by the nurses and doctors.
- Ifosfamide can cause bladder irritation or damage to the bladder resulting in blood in your urine. You will be given another medication called mesna to help prevent the side effect of blood in your urine.
- The nurses will regularly test your urine for any blood. If you notice any blood in your urine, inform your nurse or doctor right away.
- If you are having trouble urinating while receiving ifosfamide, inform your nurse or doctor right away.
- You may taste this medication while it is being given to you. Gum, soft drinks or lollies can help hide the taste of this medicine.

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 ▪ Vomiting 	<ul style="list-style-type: none"> ▪ Drowsiness ▪ Confusion ▪ Depression 	<ul style="list-style-type: none"> ▪ Loss of appetite ▪ Diarrhea ▪ Constipation ▪ Seizures ▪ Damage to brain tissue with very high doses that may lead to coma[^] ▪ Abnormal hormone function which may lower the level of salt in the blood and urine, causing too much or too little urine ▪ Low potassium levels in your blood. ▪ Severe allergic reaction which can be life threatening with shortness of breath, low blood pressure, rapid heart rate, chills and fever

Ifosfamide

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Patient/Caregiver Information

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Prompt Within 2-3 weeks, prior to the next course	<ul style="list-style-type: none"> ▪ Hair loss ▪ Fewer white blood cells in the blood. A lower number of white blood cells may make it easier to get infections. ▪ Decreased ability of the body to fight infection 	<ul style="list-style-type: none"> ▪ Fewer red blood cells and platelets in the blood. Fewer red blood cells may make you feel tired and weak. Fewer platelets may cause you to bruise and bleed more easily ▪ Blood in the urine that is only seen under the microscope ▪ Damage to the heart with abnormal heart beat or rhythm* ▪ Structures in the kidney that remove acid from the blood are impaired which may lead to a buildup of acid levels in the blood and affect the balance of electrolytes in the blood. 	<ul style="list-style-type: none"> ▪ Elevation in the blood of certain enzymes found in the liver which may mean liver irritation or damage ▪ Heart muscle damage which may occur with very high doses and which may be fatal ▪ Damage to the bladder which can lead to inflammation of the bladder and large amounts of blood in the urine, pain and the urge to urinate frequently and also scarring of the bladder. ▪ Damage or scarring of urinary bladder tissue
Delayed Anytime later during therapy, excluding the above conditions	<ul style="list-style-type: none"> ▪ Absence or decrease in the number of sperm or monthly periods. This may be temporary or permanent and may decrease the ability to have children* ▪ A risk of infertility which is the inability to have children (see below) 		<ul style="list-style-type: none"> ▪ Kidney failure or damage ▪ Damage to heart muscle which may make you tired, weak, feel short of breath and retain fluid.
Late Anytime later after completion of therapy	<ul style="list-style-type: none"> ▪ A slight decrease in kidney function 		<ul style="list-style-type: none"> ▪ A new cancer or leukemia resulting from this treatment ▪ Abnormal bone growth and development
*Less common with low doses #Only with very high doses ^Toxicity may occur later			

Ifosfamide can significantly increase the risk of premature menopause in females and infertility in males and females. The likelihood increases with exposure to high doses or a high cumulative dose.

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>