



WEB EXCLUSIVES

Six Side Effects You May Not Expect During Cancer

BY JODY SCHOGER

Nearly every cancer therapy comes with side effects. Some are inevitable. Some are surprising. And as tumors vary in their biological characteristics, so do individual reactions to cancer treatment.

By its nature, cancer treatment is harsh, “regardless of our goal of treatment,” says Lori Lindsey, NP, a clinical consultant with The US Oncology Network. “Our role is to prepare our patients, so they can cope with side effects as they come up.”

Many chemotherapies work by damaging cells that multiply quickly, whether they are cancerous or not. Although newer, targeted therapies, which zero in on molecular processes, are more refined, they can also produce their own unique side effects. Some side effects of chemotherapy, such as fatigue, nausea and vomiting, infection risk, diarrhea and mucositis, are well-known, but here are six lesser-known conditions that can arise during treatment.

Hair Today, Gone Tomorrow

Losing the hair on your head is, for many, the most visible and, for some, the most upsetting side effect of cancer therapy. It’s also one of the most well-known effects. What you may not expect is that hair loss isn’t always confined to the scalp. Eyebrows, eyelashes, leg, arm, pubic and even the fine hair lining the nostrils (resulting in nasal drip) can fall away. Drugs such as Taxol (paclitaxel) and Adriamycin (doxorubicin) are common culprits, whereas targeted agents that are aimed directly at cancer cells shouldn’t cause any hair loss. Hormonal therapies, usually prescribed following chemotherapy, can also cause thinning hair. While cooling caps can help some people keep hair on their scalps, the results are partial and unpredictable. Unfortunately, there’s little you can do to keep the hair on your body.

[Read more on hair loss.](#)

Taste Test

Changes in taste affect about 50 percent of all patients receiving chemotherapy and can decrease appetite and lead to unwanted weight loss. Most patients find

that sweet foods taste better, and spicy foods are not as appealing as usual. Some patients become sensitive to temperature and metals. Eating with plastic utensils and glassware can help if you have sensitivity to metal. Depending on your taste changes, you may want to avoid spicy food or add spices to your meal. Experts recommend eating food cold or frozen, keeping sugar-free gum or mints on hand and rinsing with a salt and baking soda solution to neutralize bad tastes prior to meals. Chemocare.com, a website created by testicular cancer survivor and Olympic figure skating champ Scott Hamilton, has more [management tips](#) on taste changes.

[Read more on taste changes.](#)

A Pound of Cure

Possibly one of the greatest surprises for patients in treatment is weight gain. Steroids, given with chemotherapy to alleviate adverse symptoms, can increase appetite and cause fat deposits to develop and lead to fluid retention. Other factors contributing to weight gain are alterations in tastes, cravings and eating too much comfort food.

Another obvious factor is decreased exercise. In 2010, an expert panel of the American College of Sports Medicine issued new [guidelines](#) that encourage, rather than discourage, exercise during cancer treatment and beyond. Ask your doctor if physical activity is recommended for you and what types of exercises are appropriate. Enjoying a low-fat diet rich in fruits and vegetables can also help, as can consulting with a dietitian for more specific suggestions.

[Read more on weight gain.](#)

Rash Behavior

Skin changes are common, and because they can lead to bigger problems, need to be reported quickly. Sun sensitivity, especially, is heightened with certain treatments. For patients treated with Tarceva (erlotinib), Sylvia Danko, RN, OCN, Seton Healthcare Family's oncology nurse educator, says an unexpected acne-like rash is an "outward and distressing" reminder of their illness. Information presented at the 2011 meeting of the American Society of Clinical Oncology (ASCO) detailed the effectiveness of various treatments, from antifungal or antibiotic medications to retinoids, like Retin-A (tretinoin), to prevent and manage therapy-associated skin changes.

Out of Joint

Joint and muscle pain can crop up due to taxane therapies, as well as hormonal therapies, particularly aromatase inhibitors (AIs) for breast cancer. Other newer drugs that may cause joint pain include Provenge (sipuleucel-T) and Zytiga (abiraterone) for prostate cancer. About 40 percent of women taking AIs experience joint pain that ranges from moderate to severe. While

noninflammatory medications can help, so can alternative therapies, including acupuncture. A randomized study of postmenopausal women taking AIs for hormone-sensitive breast cancer found significant improvement of joint pain and stiffness with acupuncture over a placebo or sham acupuncture. Researchers find that younger postmenopausal women, who tend to benefit the most from AIs, also tend to experience the worst adverse effects.

The Not-So-Great Depression

Depression affects 15 to 25 percent of all cancer patients and impacts men and women equally. In addition to the obvious grief reactions stemming from a cancer diagnosis, depression can also be aggravated by corticosteroids used with chemotherapy, poorly controlled pain and hormone therapies used for breast and prostate cancers.

Danko says improved assessments help nurses identify depression earlier, so don't hesitate to discuss your feelings with your nurse or social worker. There may be resources and treatment options available to you through your cancer clinic, including counseling and medication, for individuals who may have more than just the blues.

[Read more on depression.](#)

Depression isn't limited to patients. Ann Gregory, 36, of Baton Rouge, La., required two bone marrow transplants to bring her acute lymphoblastic leukemia into remission. The two-year ordeal took a heavy toll on her physically, and a heavy emotional toll on her husband, Chris, who was diagnosed with clinical depression during that stressful time.

They maintained a detailed treatment diary and blog called, [Ann's Fight](#) which they began in 2007. Looking back months after her diagnosis, Ann wrote in a post: "One year ago today I was at work, feeling horrible and constantly out of breath." Early on she accepted, and now works with, the side effects that she deals with to this day. She learned how to live with them.

"I still find it fascinating that the best thing you can do is be informed," Ann says now.

"In my case to refuse treatment was to die. People die with what I have. You have to be honest. And you have to celebrate the progress you've made."

[Read more about side effects in CURE's 2011 Cancer Resource Guide.](#)