
Chlorambucil (Leukeran®)

Chlorambucil (pronounced claw-ram-bu-cil) is a chemotherapy drug that is given as a treatment for some types of cancer. It is most commonly used to treat chronic lymphocytic leukaemia, low-grade non-Hodgkin lymphoma, Hodgkin lymphoma and Waldenstrom's macroglobulinaemia. This information describes chlorambucil, how it is given and some of its possible side effects. It should ideally be read with our general information about chemotherapy and about your type of cancer, which give more information and advice.

You will see your doctor regularly while you have this treatment so that they can monitor the effects of the chemotherapy. This information should help you to discuss any queries about your treatment and its side effects with your doctor or chemotherapy nurse, as they are in the best position to help and advise you.

You may also want to discuss this information with one of the cancer support service nurses on our Freephone helpline 0808 800 1234. Lines are open Monday–Friday, 9am–8pm (an interpreting service is available). We also have details of useful organisations throughout the UK, which can offer help and support. All our information is also available online at www.cancerbackup.org.uk

We have included the following information:

- What chlorambucil looks like
- How it is given
- Possible side effects
- Less common side effects
- Additional information
- Things to remember about chlorambucil tablets
- Related Cancerbackup information

What chlorambucil looks like

Chlorambucil is available as 2mg brown tablets.

How it is given

The tablets should be swallowed whole.

Possible side effects

Each person's reaction to chemotherapy is different. Some people have very few side effects, while others may experience more. The side effects described in this information will not affect everyone who is given chlorambucil, and may be different if you are having more than one chemotherapy drug.

We have outlined the most common and less common side effects, so that you can be aware of them if they occur. However, we have not included those that are very rare and therefore extremely unlikely to affect you. If you do notice any effects which you think may be due to the drug but which are not listed here, please discuss them with your doctor or chemotherapy nurse.

Lowered resistance to infection

Chlorambucil can reduce the production of white blood cells by the bone marrow, making you more prone to infection. This effect can begin 10–14 days after chemotherapy and your lowered resistance to infection may last for a few days. Your blood cells will then increase steadily, and will usually have returned to normal levels before your next course of chemotherapy.

Contact your doctor or the hospital straightaway if:

- Your temperature goes above 38°C (100.5°F)
- You suddenly feel unwell (even with a normal temperature).

You will have a blood test before having more chemotherapy to make sure that your cells have recovered. Occasionally it may be necessary to delay your treatment if the number of blood cells (the blood count) is still low.

Bruising or bleeding Chlorambucil can reduce the production of platelets (which help the blood to clot). Let your doctor know if you have any unexplained bruising or bleeding.

Anaemia (low number of red blood cells)

While having treatment with chlorambucil you may become anaemic. This may make you feel tired and breathless. Let your doctor or nurse know if you develop these symptoms.

Feeling sick (nausea) and vomiting

Nausea may start from a couple of hours after the treatment is given. It may last until a few days after you have finished taking the course of tablets. If this happens it is usually mild. Your doctor can prescribe very effective anti-sickness (anti-emetic) drugs to prevent or greatly reduce nausea and vomiting. If it is not controlled, or continues, tell your doctor, who can prescribe other anti-sickness drugs which may be more effective.

Loss of appetite A dietitian or specialist nurse at your hospital can give advice and tips on boosting appetite, coping with eating difficulties and maintaining weight.

Less common side effects

Changes to the lungs Rarely, chlorambucil may cause some changes to lung tissue. Tell your doctor if you smoke and if you notice any coughing or breathlessness. You may have a chest x-ray done to check your lungs before you are given any chlorambucil.

Skin changes Chlorambucil may cause a rash, which may be itchy. Your doctor can prescribe medicine to help with this.

Fits or seizures There is a small risk that you will have fits while taking chlorambucil. This is more likely if you already have a history of fits. Your doctor can discuss this with you.

Your liver may be temporarily affected Chlorambucil may cause changes in the way that your liver works, although your liver will return to normal when the treatment is finished. This is unlikely to cause you any harm, but your doctor will monitor this carefully. Samples of your blood will be taken from time to time to check that your liver is working properly.

Diarrhoea This can usually be easily controlled with medicine, but let your

doctor know if it is severe or if it continues. It is important to drink plenty of fluids if you have diarrhoea.

Sore mouth and ulcers Your mouth may become sore or you may notice small ulcers during this treatment. Drinking plenty of fluids and cleaning your teeth regularly and gently with a soft toothbrush can help to reduce the risk of this happening. Tell your nurse or doctor if you have any of these problems, as special mouthwashes and medicines to prevent or clear any mouth infection can be prescribed.

Taste changes You may notice that your food tastes different. Normal taste will usually come back after the treatment finishes.

Additional information

Chlorambucil may be prescribed for conditions other than cancer. The drug dosage may be reduced and therefore the side effects may be different from those mentioned above.

Other medicines Some other medicines can be harmful to take when you are having chemotherapy. Let your doctor know about any medications you are taking, including non-prescribed drugs such as complementary therapies and herbal drugs.

Fertility Your ability to become pregnant or father a child may be affected by taking this drug. It is important to discuss fertility with your doctor before starting treatment.

Contraception It is not advisable to become pregnant or father a child while taking chlorambucil, as the developing foetus may be harmed. It is necessary to use effective contraception while taking this drug, and for at least a few months

afterwards. Again, discuss this with your doctor.

Things to remember about chlorambucil tablets

- Chlorambucil tablets should be kept dry and stored in the refrigerator.
- It is important to take your tablets at the right times. You must take them as directed by your doctor.
- Keep the tablets in a safe place where children cannot reach them, as chlorambucil could harm them.
- If your doctor decides to stop the treatment, return any remaining tablets to the pharmacist. Do not flush them down the toilet or throw them away.
- If you are sick just after taking the tablets let your doctor know as you may need to take another dose. Do not take another tablet without first telling your doctor.
- If you forget to take a tablet do not take a double dose. Tell your doctor and keep to your regular dose schedule.

Related Cancerbackup information

- Avoiding Infection when you have Reduced Immunity
- Controlling Nausea and Vomiting
- Diet and Cancer
- Fertility and Cancer
- Mouth Care During Chemotherapy
- Understanding Chemotherapy

For copies of this related information call free on 0808 800 1234, or see it online at www.cancerbackup.org.uk

Revised, updated and edited by Richard Elworthy,
Information Development Nurse.

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This factsheet has been compiled using information
from a number of reliable sources, including:

- *Martindale: The Complete Drug Reference* (35th
edition). Eds. Sweetman et al. Pharmaceutical
Press, 2006.
- *British National Formulary* (52nd edition). British
Medical Association and Royal Pharmaceutical
Society of Great Britain, September 2006.
- *The Chemotherapy Source Book* (3rd edition).
Ed. Perry. Lippincott, Williams and Wilkins,
2001.

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