5. How to store Eldisine

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor or pharmacist.
- This leaflet is for use by you. Do not give it to others. It may harm them, even if their signs of illness are the same as yours.
- If you have any side-effects talk to your doctor or pharmacist. This includes any possible side-effects not listed in this leaflet. See section 4 – Possible side-effects. Anything else, ask him or her if you have any questions.

2. What you need to know before you use Eldisine

What is in this leaflet

- anything else, ask him or her if you have any questions.
- It is written to help your doctor or pharmacist to give you medical advice. This includes any possible side-effects not listed in this leaflet.
- Warning: Patients and carers must be warned that this product can only be used under a specialist service.
- The metabolism of vinca alkaloids has been shown to be mediated by hepatic cytochrome P450
- Increased. Strict adherence to the recommended dosage schedule is very important.
- For most patients, however, advantage has been demonstrated when such regimens have been used, and side-effects are
- because of the presence of bacterial infection. Such infections must be brought under control with antibiotics before using vinylasine. With the development of vinca alkaloids, Chorioallantoic membrane toxicity has usually been small in number, life-threatening paralysis and subsequent death was averted but resulted in
- It is recommended that the drug be administered intravenously in a single rapid bolus injection at
- The latter procedure is readily adaptable to outpatient therapy. In either case, the injection should
- Gradual introduction of vindesine (in 10mg/kg steps) in patients who are thrombocytopenic (less than 100,000 cells/mm3) prior to therapy with vindesine. Those with decreased marrow function from leukemia infiltration or replacement will require full doses to be attempted by slow infusion. This must be done under close supervision.
- The dose should not be increased after that dose which: (i) reduces the granulocyte count below 1500/mm3, or (ii) reduces the platelet count to below 100,000/mm3. (ii) is neurotoxic in patients with a history of severe peripheral neuritis or who are known to be neuriticide. Those with severe peripheral neuritis or who are neurotoxic have been described as having 'non-specific' peripheral neuritis. It is recommended that this product be used only by appropriately trained staff.
- The reaction of vindesine upon the red blood cell count and haemoglobin concentration is usually
- Fresh plasma should be requested and, when available, 25ml should be added to every 1 litre of".
- For INTRAVENOUS USE ONLY – FATAL IF GIVEN BY OTHER ROUTES

2. Insertion of an epidural catheter into the subarachnoid space via the intervertebral space
- The effect of vindesine upon the bone marrow. These cells divide quickly to make new blood
- The bone marrow. These cells divide quickly to make new blood cells. Your doctor may tell you to have blood tests before you are treated with Eldisine. The hospital’s laboratory will then count the numbers of different types of blood cells (platelets, white cells and red cells). Your doctor may decide to change the dose or put off treating you if your blood cell counts are too low. Your blood cell counts cannot improve as quickly as they fell.
- A list of injections (more than one a week) may cause more side effects.
- Eldisine works by sticking to certain molecules in dividing cells to stop the cell dividing. It also sticks to the same sort of molecule in nerves and causes side-effects to your nervous system (see section 4 – Possible side-effects). You may not notice the start of these side-effects until you have had several injections. Your doctor should advise you when these side-effects are severe. The effects on your nervous system usually get better when you stop being treated with Eldisine. Your doctor’s nurse will take your temperature and check the intravenous solution does not leak out of your vein when it is being injected. Tell them (i) if you have pain at the injection site. It is very unlikely that this is not treated quickly, Eldisine can cause your tissue to be infected where the solution leaked out. They will also be very careful that Eldisine does not get into anyone’s eyes.

3. How TO USE Eldisine

Your doctor will inject Eldisine into a vein. It must never be injected intraarterially (into your back with the needle going into your spine). If you have a bacterial infection, your doctor will probably treat the infections before starting the Eldisine. Eldisine and most other cytotoxic drugs may affect the cells in your bone marrow. These cells divide quickly to make new blood cells. Your doctor or pharmacist will be telling you what the dose is. You should not change the dose or put off treating you if your blood cell counts are too low. Your blood cell counts cannot improve as quickly as they fell. A list of injections (more than one a week) may cause more side effects.

Eldisine works by sticking to certain molecules in dividing cells to stop the cell dividing. It also sticks to the same sort of molecule in nerves and causes side-effects to your nervous system (see section 4 – Possible side-effects). You may not notice the start of these side-effects until you have had several injections. Your doctor should advise you when these side-effects are severe. The effects on your nervous system usually get better when you stop being treated with Eldisine. Your doctor’s nurse will take your temperature and check the intravenous solution does not leak out of your vein when it is being injected. Tell them (i) if you have pain at the injection site. It is very unlikely that this is not treated quickly, Eldisine can cause your tissue to be infected where the solution leaked out. They will also be very careful that Eldisine does not get into anyone’s eyes.

Adults
- The usual dose is 3milligrams for every square metre of your body surface area.
- If you have liver trouble
- For concomitant chemotherapy, in addition to vindesine, other drugs are used to prevent or treat
- 25012904
your body surface area to work out the right dose for you. Your doctor will decide how you should take the medicine in small steps if you have enough blood cells.

Your doctor or nurse will inject the correct amount of Eldisine – usually every 5–7 days. Eldisine must only go into a vein. You may have an injection every week and your doctor may treat you with other cytotoxic medicines at the same time. If you are being treated as an out-patient it is important that you go to the clinic for all your appointments.

If you receive more Eldisine than you should

• pain or swelling where you have had the injection
• diarrhoea
• difficulty swallowing or indigestion
• feeling or being sick
• a headache
• nerve, or jaw pain
• feeling or being sick
• constipation, which may be severe
• difficulty swallowing or indigestion
• abdominal pain
• diarrhoea
• pain or swelling where you have had the injection

4.7 Effects on Ability to Drive and Use Machines

Your doctor or nurse will tell you if the medicine may affect your ability to drive or use machines. If you are being treated as an out-patient it is important that you go to the clinic for all your appointments.