

## Fulvestrant (Faslodex®)

This leaflet is offered as a guide to you and your family. Fulvestrant is a hormonal therapy used to control breast cancer that has spread to other parts of the body (secondary breast cancer). It is used to help control the cancer and its symptoms. Fulvestrant may be prescribed as a single agent or in combination with other anti-cancer therapies.

Your clinical team will be happy to answer any questions you have about your treatment.

Hormones are substances produced naturally in the body. They act as chemical messengers and help control the activity of cells and organs. Hormonal therapies are drugs that interfere with the way hormones are made or how they work in the body. Many breast cancers rely on the hormone oestrogen to grow. This type of breast cancer is called oestrogen receptor-positive (ER positive) breast cancer.

Fulvestrant works by binding to the oestrogen receptors and stopping them working. This slows down or stops the cancer cells from growing. Fulvestrant also reduces the number of oestrogen receptors on the breast cancer cells.

### Your treatment

Fulvestrant is administered as an injection into the muscle (intramuscular) in the buttocks.

Fulvestrant is given as 2 injections, 1 into each buttock. The injections take 1-2 minutes each.

It is given as a 500mg dose every 2 weeks for the first 3 doses. Following this it is given every 4 weeks.

This treatment can have serious side effects. It is very important that you report side effects straight away. Don't delay, if you feel unwell, please ring The Christie Hotline on **0161 446 3658**. The lines are open 24 hours a day.

If you feel unwell, you have symptoms of an infection or your temperature is 37.5°C or above, or below 36°C contact The Christie Hotline straight away.



## Possible side effects

Hormone therapy can cause different side effects. Some are more likely to occur than others. Everyone is different and not everyone gets all the side effects. Most side effects are usually temporary, but in some rare cases they can be life-threatening. It is important to tell your clinical team about any side effects so they can be monitored and, where possible, treated.

## Common side effects (more than 1 in 10)

### • Injection site reactions

Fulvestrant may cause temporary pain and inflammation may occur around the injection site. This will usually last 1-2 days. Inform your clinical team if you experience this.

If you are taking an anticoagulant there may be increased risk of bruising and bleeding around the injection site. Please inform your clinical team if you are taking any anticoagulant medications.

### • Hot Flashes

Hot flushes and sweats may occur but lessen after the first few months. Cutting down on nicotine, alcohol and hot drinks containing caffeine, such as tea and coffee, can help. Dress in layers, so you can remove clothes as needed. Natural fabrics, such as cotton, may feel more comfortable. If hot flushes are a problem, tell your clinical team. Low doses of certain antidepressant drugs can help to reduce flushes.

### • Joint and muscle pain

You may have pain and stiffness in your joints, and sometimes in your muscles or back, while taking fulvestrant. Let your clinical team know if this happens. They can prescribe painkillers and give you advice. Being physically active and maintaining a healthy weight can help reduce joint pain and keep them flexible.

### • Fatigue

You may feel tired, sleepy or feel you have no energy when you start taking fulvestrant. Try to pace yourself until this improves. It's important to get the right balance of having enough rest and being physically active. Regular short walks will help you to feel less tired. If you feel sleepy, don't drive or operate machinery.

### • Sickness and diarrhoea

Any sickness or nausea is usually mild, but let your clinical team know if this happens. Fulvestrant may also cause indigestion or tummy pain. Let them know if you have any of these symptoms. They can prescribe drugs to help.

If diarrhoea becomes a problem during or after your treatment, anti-diarrhoea tablets can be prescribed by your clinical team. Ask the staff for a copy of 'Eating - Help yourself' which has some useful ideas about diet when you are having treatment.

### • Appetite and weight gain

If you don't have much appetite, try eating small, frequent meals or snacks. If problems with eating don't get better, talk to your clinical team.

### • Headache and dizziness

If you have headaches let your clinical team. They can usually be controlled with painkillers you can buy yourself. Fulvestrant may also cause dizziness. Let your clinical team know if this is a problem.

### • Skin rash and dry skin

You may get a mild skin rash or dry skin. Tell your clinical team if this happens. It's very important to contact your clinical team straight away if you get a severe skin rash.

### • Hair thinning

Your hair may become thinner while taking fulvestrant. Your hair will get thicker after treatment finishes.

- **Vaginal bleeding and dryness**

For some women fulvestrant causes vaginal bleeding. If this happens it is most likely in the first few weeks of treatment, or when you change from another hormonal therapy to fulvestrant. If bleeding continues for more than a few days, tell your clinical team.

For some women, fulvestrant causes vaginal dryness. Non-hormonal creams and gels or lubricants can help reduce dryness and discomfort during sex. You can buy these at a chemist or your clinical team can prescribe them.

- **Liver changes**

Fulvestrant can sometimes cause changes in the way your liver works. Your clinical team will arrange for you to have regular blood tests to check your liver is working properly. You are very unlikely to notice any problems.

- **Pain, numbness and tingling in hands and fingers**

These symptoms may be due to carpal tunnel syndrome, which is caused by pressure on a nerve in the wrist. It is more common in people taking fulvestrant. Tell your clinical team if you have these symptoms.

- **Constipation**

You may become constipated. Try to drink plenty of fluids and eat foods high in fibre. Tell your clinical team who may prescribe a suitable laxative. Please contact The Christie Hotline if your constipation lasts more than 3 days or you experience abdominal discomfort.

## Uncommon side effects (less than 1 in 10)

- **Allergic reaction**

Sometimes fulvestrant can cause an allergic reaction. Signs of a reaction can include a rash, feeling itchy, wheezing, shortness of breath, swelling of your face or lips or feeling unwell.

Tell your clinical team straight away if you have any of these symptoms. If you develop any of these symptoms after you get home, contact The Christie Hotline on **0161 446 3658** straight away or go to the nearest A&E department.

- **Urinary infection**

Let your clinical team know if you have pain or discomfort when you pass urine, if you need to go more often, or your urine is cloudy or smelly. Drink lots of fluids if you think you may have an infection.

- **Blood clots**

Fulvestrant can increase your chances of getting a blood clot. Let your clinical team know if you have ever had a blood clot or deep vein thrombosis (DVT).

A blood clot can cause pain, redness and swelling in a leg or arm, breathlessness and chest pain. Contact your clinical team straight away if you have any of these symptoms. A blood clot is serious but your clinical team can treat it with drugs that thin the blood. Your clinical team can give you more information.

- **Bruising and bleeding**

Fulvestrant can sometimes reduce the production of platelets which help the blood clot. Let your clinical team know if you have any unexplained bruising or bleeding, such as nosebleeds, bloodspots or rashes on the skin, and bleeding gums.

- **Nerve damage**

Fulvestrant may cause injection site related nerve damage. Contact your clinical team if you develop any of the following symptoms in your legs following a fulvestrant injection; numbness, tingling or weakness, burning pain or sciatica.

## Late side effects

Some side effects may become evident only after a number of years. In reaching any decision with you about treatment, the potential benefit you receive from treatment will be weighed against the risks of serious long term side effects to the heart, lungs, kidneys and bone marrow. With some drugs there is also a small but definite risk of developing another cancer. If any of these problems specifically apply to you, the clinical team will discuss these with you and note this on your consent form.

## Flu vaccinations

We advise that all patients receive a flu vaccination when this is offered.

## COVID-19 vaccinations

We advise that all patients receive a COVID-19 vaccination when this is offered.

However, if you're thinking of having any other vaccinations, do check with your Christie doctor first, because some vaccines should be avoided.

## Contacts

If you have any general questions or concerns about your treatment, please contact your consultant's secretary or breast cancer nurse.

Out of hours ring The Christie Hotline on **0161 446 3658** (24 hours a day, 7 days a week).

Your consultant is: .....

Your hospital number is: .....

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If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

The Christie is committed to producing high quality, evidence based information for patients. Our patient information adheres to the principles and quality statements of the Information Standard. If you would like to have details about the sources used please contact **the-christie.patient.information@nhs.net**

For information and advice visit the cancer information centres at Withington, Oldham, Salford or Macclesfield. Opening times can vary, please check before making a special journey.



Contact The Christie Hotline for  
urgent support and specialist advice  
**The Christie Hotline: 0161 446 3658**  
Open 24 hours a day, 7 days a week