

# CHEMO COMPANION™

Care Guide

TIPS AND WISDOM  
TO PREPARE FOR YOUR  
CHEMO JOURNEY

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2nd Edition





**CHEMO**  
**COMPANION**  
Care Guide

Written by  
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Second Edition

# SETTING THE COURSE

## Preparing For Chemo

The decision has been made. Chemotherapy. It may be a relief to have that part behind you, but you're probably pretty nervous about what comes next. On the following pages you will find a few things to consider before you begin.

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## ON YOUR MARK... PREHABILITATION

*A window of opportunity exists between when your cancer is diagnosed and when treatment actually begins. Prehabilitation is improving your overall health during this time. You can potentially:*

- *Lessen the severity of side effects*
- *Shorten hospital stays*
- *Decrease hospital readmissions*
- *Increase potential treatment options*
- *Reduce healthcare costs*
- *Return to the highest possible level of function afterwards*

*The goal of the initial evaluation is to:*

- *Determine your baseline physical and mental status*
- *Identify any current health problems that need attention*
- *Anticipate potential future complications*

*Each person will have a different program depending on their baseline evaluation and the type and location of their cancer. Areas that should be addressed for everyone include:*

- *Nutrition and diet optimization*
- *Exercise, such as daily walking, aerobic exercise, strength training, and stretching*
- *Breathing exercises*
- *Alcohol reduction*
- *Smoking cessation*
- *Stress management*

*Examples of things that might more specifically help your treatment and recovery include:*

- *Coughing exercises for anyone needing surgery*
- *Pelvic floor exercises prior to prostate surgery*
- *Education before surgery on how to take care of post-surgical changes, such as a breast prosthesis or ostomy bag*

*Ask your doctor what consultations will be most valuable for you:*

- *Nutritionist*
- *Physical therapist*
- *Occupational therapist*
- *Trained counselor*

*Seek out support groups for your particular kind of cancer and become a partner with your health care team.*



## SAY AH!!! DENTAL CARE

You may think that the chemo drugs will head straight for your cancer but the truth is, they detour throughout your body, including your mouth. To prevent damage to your teeth, make sure they are clean and free from disease *before* starting chemo. Make an appointment to see your dentist today and be sure to mention your upcoming chemo treatments.

A common side effect of chemo is a dry mouth, caused by the reduction of saliva. This causes tooth decay because saliva is needed to neutralize acids from food and dental plaque. Since you are more susceptible to infection during chemo, any problem areas need prompt attention by your dentist.

*The following list includes guidelines for proper oral care:*

- Have a dental checkup every 1-3 months.
- Ask your dentist about fluoride treatments.
- Brush and floss after every meal, snack and before bedtime.
- Use a soft toothbrush and soak it in water to soften it before brushing.
- Make sure your mouthwash DOES NOT contain alcohol.
- Help keep your mouth moist by using artificial saliva.
- Drink lots of fluorinated water.
- If you wear dentures, your mouth's dryness may cause them to lose their proper fit. Visit your dentist if this becomes a problem.
- Avoid eating acidic, spicy and hot foods.
- Avoid soft drinks—they are acidic.

*Do you snore? People who snore while sleeping or breathe through their mouths are particularly susceptible to a dry mouth. If this describes you, keep water and/or artificial saliva at your bedside to use when you wake during the night.*

*Note: BIOTENE® brand products specifically address dry mouth issues.*



THERE'S MORE THAN  
ONE WAY TO CONNECT.



## EXERCISE YOUR OPTIONS INTRAVENOUS (IV) ACCESS

Depending on the type of medication you receive and the length of your chemo treatment, you may want to ask your doctor if a more permanent intravenous (IV) access device is right for you. Why? When the veins in your arms are used repeatedly, they eventually get hard and become unusable, requiring multiple attempts to start an IV.

### Some options to consider:

A **portacath** is an intravenous access line that goes into a vein in the chest, with the entrance just below your collarbone or on the upper arm. It requires a small surgery to insert, but this can often be done under local anesthesia with some sedation, or at the same time as another surgery you may need for your cancer.

The portacath is hidden under the skin and only a small lump can be seen and felt. With a portacath in place, the nurses simply insert a needle into the port instead of searching for a vein, making insertion much easier and more comfortable.

A **peripherally inserted central catheter**, or a **PICC** line, is like a regular IV started in the arm. During a simple procedure, a nurse inserts a long, thin catheter into a vein in the arm and threads it until it reaches a large vein just above the heart. Medication is connected to this tubing, instead of poking you with needles. This kind of IV cannot be left in as long as a portacath because there is a higher risk of infection, but this may be an ideal option for a shorter course of treatment.

**Hickman** and **Broviac** catheters are two other options which are similar to a portacath. However, their access ports are not buried under the skin, so from a patient's perspective, they behave more like a PICC line and share advantages and disadvantages with both.

Don't worry about making this decision on your own. Talk with your oncologist about all your options so they can help you decide which one is best for you and your specific treatment.

LET YOUR FRIENDS KNOW THAT IT'S  
OK TO TALK ABOUT YOUR CANCER.  
DON'T LET IT BE THE ELEPHANT IN  
THE ROOM THAT NO ONE MENTIONS.  
PEOPLE DON'T KNOW WHAT TO SAY,  
SO GIVE THEM PERMISSION TO DO  
THEIR BEST.

