

# Patient information

## Epirubicin

### What is Epirubicin?

Epirubicin Hydrochloride instillation is a form of chemotherapy that is instilled directly into the bladder. Epirubicin Hydrochloride Instillation is part of a group of medicines called anthracyclines. These act upon cells that are actively growing, to slow or stop their growth and increase the chance that the cells die.

### Why would I need Epirubicin?

Your Consultant Urologist has referred you for treatment of your superficial non-muscle invasive bladder cancer. Non-muscle invasive cancer only affects a few layers of cells on the surface of the bladder, this can however progress if not treated effectively. The aim of the treatment is to stop re-growth by putting a chemical into the bladder; this is called intravesical chemotherapy.

### What are the alternatives?

Alternatives to this procedure include repeated cystoscopy, immunotherapy into the bladder, surgical removal of the bladder with urinary diversion or bladder reconstruction and systemic chemotherapy.

### What are the potential risks and side effects?

Most procedures have possible side effects. Because this treatment is put directly into the bladder and not into the blood stream, you will not experience the side effects often associated with other cancer drug treatments. The complications listed below are well recognised, but most patients do not suffer any problems.

#### Common (greater than 1 in 10)

- Some bladder discomfort after treatment, such as urgency, pain and frequency.
- Flu-like symptoms which can persist for 2 to 3 days.
- Discoloured urine.
- Blood in your urine.
- Debris in your urine.

#### Occasional (between 1 in 10 and 1 in 50)

- Skin rash.
- Failure to complete the course of treatment due to bladder discomfort.
- Urine infection.
- Stricture of the water pipe (urethra) following repeated use of a catheter.

#### Rare (less than 1 in 50)

- Severe pain on instillation which can persist for some time after.
- Allergic reaction to the instilled chemicals, requiring discontinuation of the treatment.
- Stricture of the urethra (water pipe) following use of a catheter.

Please note: Hospital acquired infections are always a risk factor. The rates for hospital-acquired infection may be greater in "high-risk" patients. This group includes, for example, patients with

long-term drainage tubes, patients who have had their bladder removed due to cancer, patients who have had a long stay in hospital or patients who have been admitted to hospital many times.

## **What are the expected benefits of treatment?**

When instilled into the bladder through a tube (catheter), Epirubicin Hydrochloride instillation is used to treat cancer cells of the bladder wall. It can also be used after other treatments for prevention of such cancer cells from growing again.

## **What happens when I come into hospital?**

You will be asked to come to the Urology Investigation Suite at Eastbourne DGH once a week for four weeks. You should restrict your fluid input for six hours before each treatment. Your first treatment will take up to 90 minutes.

On arrival in the clinic, you will be asked to pass urine, which will be tested for any indication of infection. If you have an infection, your treatment will be postponed for one week whilst you are treated with antibiotics.

You will have a fine plastic tube (catheter) put into the bladder by one of the nurses and the Epirubicin (approximately half a cup of fluid) will be given through it. The catheter will then be gently removed. You will be asked not to pass urine for an hour to allow the medication to treat the whole bladder lining. On your first visit, you will be asked to stay in the clinic for the whole treatment; you will be able to go home after you have passed urine. If you live near to the hospital and have your own transport, you may be allowed to go home after the remaining treatments and pass the treatment at home.

## **Preparation for treatment**

We advise you not to drink too much fluid for six hours before the treatment. One glass of water may be taken with breakfast. If you drink as little as possible the kidneys will produce less urine and thus prevent the dilution of the Mitomycin when it is in your bladder. It will also make it easier for you to retain the treatment in the bladder for the necessary amount of time.

- If you normally take water tablets (diuretics) take them after your treatment rather than first thing in the morning for your treatment days.

## **Is there any reason I shouldn't have treatment?**

You should not receive Epirubicin Hydrochloride if:

- You are allergic (hypersensitive) to Epirubicin hydrochloride or any of the other ingredients of Epirubicin Hydrochloride Injection.
- You suffer from an acute severe infection.
- You are breast-feeding.
- You have a urinary infection.
- There are tumours which penetrate the bladder wall.
- Your doctor has problems inserting a catheter (tube) into your bladder.
- You have an inflammation of the bladder.
- You have large volume of urine left in your bladder after you attempt to empty.

Tell your doctor, nurse or hospital pharmacist if any of the above applies to you. In any of the above cases, you may not be suitable for Epirubicin. If you are unsure, please discuss with your doctor or nurse.

## Will I have an anaesthetic?

You will not need an anaesthetic for the procedure.

## How will I feel afterwards?

You should be told how the procedure went and you should:

- Ask the nurse if it went as planned.
- Let the medical staff know if you are in any discomfort.
- Ask what you can and cannot do.
- Feel free to ask any questions or discuss any concerns with the nurse.
- Make sure that you are clear about what has been done and what happens next.

If you develop any of the following:

- Smelly, cloudy urine.
- Severe frequency or a burning sensation when passing urine that persists for longer than 48 hours.

It is important to contact your own general practitioner (GP) or your Uro-oncology Clinical Nurse Specialist as you may have a urine infection that requires treatment with antibiotics.

It is advisable to bring a wash bag to hospital when you come for the treatment and you should wash your hands and genitals after you have passed urine.

You are advised not to have sex for at least 24 hours after the treatment as this may cause some discomfort. It is recommended that you use a condom when engaging in sexual activity during the course of treatment.

If you are a smoker, you should stop as smoking encourages the growth of bladder cancer.

## How long will I be in hospital?

Once the treatment has been completed, you will be able to go home. We try hard to keep to your appointment time, but sometimes unavoidable delays do occur. You should feel well enough to drive yourself home after the treatment. However, if you are elderly or have mobility problems, please arrange for a friend or relative to collect you.

## What should I do when I go home?

You will need to have a supply of household bleach at home. After you have passed urine, pour a cupful of bleach into the toilet and leave it for 15 minutes before flushing. You should continue doing this every time you pass urine for the next 6 hours. You should drink plenty of fluids (two to three litres) for the few days after the treatment. Afterwards, both men and women should wash the genital area thoroughly with soap and water. Most of the drug is passed out the first time you pass urine, and after this no further precautions are required.

## Will I have to come back to hospital?

On completion of your course of treatment arrangements will be made for you to have a further cystoscopy, to look inside your bladder. It is important to examine the bladder lining to assess how the treatment has worked.

## When can I return to work?

Some people continue to work during treatment and you can do so if you feel able to.

## Consent

Although you consent for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

## Sources of information for patients

Uro-Oncology Clinical Nurse Specialists – 0300 131 4523

Macmillan Cancer Support [www.macmillan.org.uk](http://www.macmillan.org.uk)

Action Bladder Cancer UK [www.actionbladdercanceruk.org](http://www.actionbladdercanceruk.org)

Fight Bladder Cancer [www.fightbladdercancer.co.uk](http://www.fightbladdercancer.co.uk)

## Benefits Advice

East Sussex Macmillan Welfare Benefits Advice Service 01323 635989

Macmillan Cancer Support [www.macmillan.org.uk](http://www.macmillan.org.uk) 0808 808 2000

## Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

## Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: **0300 13 14 784**

or by email at: [esh-tr.patientexperience@nhs.net](mailto:esh-tr.patientexperience@nhs.net)

## Hand hygiene

The Trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

## Other formats

**If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.**

Tel: **0300 13 14 434**

Email: [esh-tr.accessibleinformation@nhs.net](mailto:esh-tr.accessibleinformation@nhs.net)

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

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## References

Guidelines for the Administration of Intravesical Therapies, The British Association of Urological Nurses 2010

Intravesical Chemotherapy with Epirubicin, The British Association of Urological Surgeons 2016

Patient Information Leaflet, Electronic Medicines Compendium 2019

The following clinicians have been consulted and agreed this patient information:

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The directorate group that has agreed this patient information leaflet: Urology,  
DAS

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