



# A patient guide to PERJETA<sup>®</sup> (pertuzumab)

The intent of this patient booklet, developed by Roche New Zealand, is to support and improve outcomes for patients prescribed Perjeta for the treatment of HER2-positive advanced breast cancer.

HER2= human epidermal growth factor receptor 2





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This booklet is as an educational resource to help you and your whanau learn more about what to expect from treatment with Perjeta. It does not take the place of individual advice from your healthcare professional. More information about Perjeta is available at [www.cancertreatments.co.nz](http://www.cancertreatments.co.nz) or in the Consumer Medicines Information at [medsafe.govt.nz](http://medsafe.govt.nz).

Models have been used throughout this booklet for the purpose of illustration only.

All words in bold like **this** are explained in the glossary at the back of this booklet on page 16.



# Understanding advanced breast cancer

When it comes to our health, we all have different information needs. Some people like to know everything about their condition, whereas others prefer to know very little. This section covers a general explanation of advanced breast cancer. Your doctor will be able to provide you with more information that is relevant to you and your cancer.



## What is advanced breast cancer?

Advanced breast cancer means the cancer has spread beyond the breast, underarm area and *internal mammary lymph nodes*.

Breast cancer is caused by *abnormal cell growth*. When the abnormal cells split and reproduce they form a tumour in the breast area.

Sometimes the abnormal cells can break away from the breast tumour and move to other parts of the body, spreading the cancer. This includes bones, liver, lungs and the brain.

The types of symptoms you experience with advanced breast cancer will depend on where the cancer has spread.

There are a number of effective treatments for advanced breast cancer available in New Zealand. These treatments can help manage symptoms and slow down the spread of advanced breast cancer. Perjeta is one of these treatments.



# What is HER2-positive breast cancer?

A lot more is known about breast cancer today. Research has shown us that there is not just one type of breast cancer. This means the abnormal cells in one tumour can look and act differently to the abnormal cells in another tumour.

HER2-positive breast cancer is an example of one type of breast cancer.

Sometimes the HER2 protein is not what causes the abnormal cell growth in breast cancer. When this happens the cancer is called HER2-negative breast cancer.

HER2 stands for: Human Epidermal Growth Factor Receptor Type 2

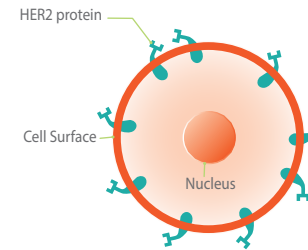
HER2-positive is often written as HER2+

HER2-negative is often written as HER2-

## What is HER2?

*HER2 is a protein found on the surface of all normal cells in your body, like the cell shown below*

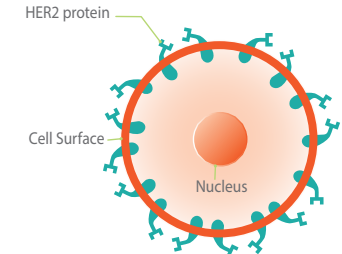
### Normal cell in your body



*The HER2 protein tells the cell how to grow and split to reproduce*

*When too many HER2 proteins grow on the surface of a cell, the cell becomes abnormal, like the cell shown below*

### Abnormal cell with too many HER2 proteins



*The extra HER2 proteins tell the cell to split and reproduce much faster than normal. This abnormal cell makes other abnormal cells and they go on to make even more abnormal cells. This process happens many times and that is how HER2-positive breast cancer develops*

## Why is it helpful to know what type of breast cancer I have?

Knowing exactly what kind of breast cancer you have will help your doctor decide which treatment is best for you. Your doctor will have done some tests to find out what kind of breast cancer you have. If you haven't been told the results of these tests and would like to know, ask your doctor.

About 1 in 5 women diagnosed with breast cancer in New Zealand are HER2-positive.



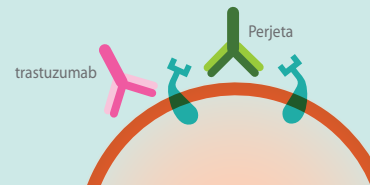


# Perjeta® for the treatment of advanced breast cancer

Perjeta also called pertuzumab (per-too-zoo-mab), is a *monoclonal antibody* that also targets HER2-positive advanced breast cancer and is used in combination with *trastuzumab* and *chemotherapy*.

**Perjeta is a HER2-targeted therapy that works by attaching to HER2 proteins on breast cancer cells. By attaching to the HER2 protein, Perjeta prevents HER2 signals which tell the breast cancer cells to grow and divide.**

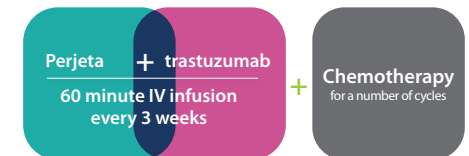
## Perjeta and trastuzumab target HER2



- Perjeta and trastuzumab target the HER2 protein in different ways
- By attaching to the HER2 protein, Perjeta and trastuzumab prevent HER2 signals, helping to stop the growth and spread of cancer cells

## How Perjeta is given

Perjeta is given in combination with chemotherapy and trastuzumab. You will only receive chemotherapy at the beginning of your treatment and your doctor will explain how long that will be. Once you have finished chemotherapy you can continue with Perjeta and trastuzumab for as long as it works for you.



Perjeta is given as an *IV infusion*, which means that the drug is administered through a needle that your nurse inserts into a vein. If you've been treated for breast cancer before, you will be familiar with this. If you haven't received an infusion before, you can ask your doctor or nurse to explain this to you in more detail.

Perjeta is usually given every 3 weeks. The number of infusions given depends on how you respond to treatment. Your doctor will discuss this with you.



# Preparing for an infusion

- Bring something to help pass the time, like a magazine or book, or music to listen to during your infusion
- If you're unsure about driving, ask a friend or family member to drive you home after your infusion



## It's important to ask questions

It is important you ask questions and fully understand the options you have before you make any decisions.

If you're not sure where to start, a sample list of questions you may want to ask your doctor is listed at the back of this booklet.

# Possible side effects with Perjeta®

**All medicines can have side effects. Sometimes they are serious, most of the time they are not. It is important to know what side effects may happen and what symptoms you should watch out for. This section of the booklet outlines some of the most common side effects you may experience while on Perjeta treatment. Because Perjeta may be used with other medicines that treat breast cancer, it may be difficult for your doctor to tell whether the side effects are due to Perjeta or due to the other medicines.**

## During an infusion

Tell your doctor or nurse immediately if you notice any of the following while receiving an infusion (particularly during the first infusion):

- swelling of your face, lips, tongue or throat with difficulty breathing,
- severe swelling of other parts of your body such as your hands or feet
- severe shortness of breath, wheezing or trouble breathing
- severe chest pain, spreading out to the arms, neck, shoulder or back
- abnormal or irregular heartbeat
- rash, itching or hives on the skin
- fever or chills
- severe coughing

These may be serious side effects. You may need medical attention.

## After an infusion

Tell your doctor immediately or go to Accident and Emergency at your nearest hospital if you notice any of the following:

- swelling of your face, lips, tongue or throat with difficulty breathing,
- severe swelling of your hands or feet
- severe shortness of breath, wheezing or trouble breathing
- severe chest pain, spreading out to the arms, neck, shoulder or back
- abnormal or irregular heartbeat
- rash, itching or hives on the skin
- fever or chills
- severe coughing

### After an infusion

Tell your doctor or nurse as soon as possible if you notice any of the following:

- any of the side effects listed above
- diarrhoea (loose or frequent stools) or constipation
- indigestion or stomach pain
- sore mouth, throat or gut
- getting tired more easily after light physical activity, such as walking
- shortness of breath especially when lying down or being woken from your sleep with shortness of breath
- nail problems especially inflammation where the nail meets the skin
- hair loss
- feeling dizzy, tired, looking pale
- hot flushes
- frequent infections such as fever, severe chills, sore throat or mouth ulcers
- nose bleeds
- eye problems such as producing more tears
- insomnia (trouble sleeping)
- weak, numb, tingling, prickling or painful sensations mainly affecting the feet and legs
- loss of appetite, loss of or altered taste
- joint or muscle pain, muscle weakness

This is not a complete list of all possible side effects. Your doctor or pharmacist has a more complete list. Others may occur in some people and there may be some side effects not yet known.

For more detailed information on side effects you can also check out the consumer medicine information at: [www.medsafe.govt.nz](http://www.medsafe.govt.nz). Ask your healthcare team if you have any specific questions on side effects with your treatment.

## Coping with advanced breast cancer and its treatment

**A diagnosis of advanced breast cancer can bring with it a wide range of emotions. You may be feeling shocked, angry, sad, scared, or alone. Or you may just be feeling numb. These are all normal emotions given your situation. We may think that if we are experiencing these so called “negative emotions” it means we are not coping. But this is not necessarily the case. These “negative emotions” are a very normal reaction to a cancer diagnosis.**

News like this can often bring quite a lot of uncertainty into your life as well. So if you are worrying or feeling anxious about the future for yourself and your family, this is also normal.

Although these feelings are normal, experiencing them can take a lot out of you. At this time you may also need to make a lot of decisions which can use a lot of mental and emotional energy. For this reason it is important for you to take extra care of yourself.

### Accept practical and emotional support from family & friends

Our family and friends don't always know the right thing to say or do at a time like this. They often like being told what would be most helpful. As Kiwis, we can struggle to reach out and ask for help but you will find when you do, most people respond in a positive way. So the next time someone asks if there is anything they can do for you, think of something small they could do such as getting the mail for you or cooking a meal.

When we do turn to someone for support, it is helpful to stop and think about what their strengths are. Not everyone is good at listening. Just like not everyone will be good at making you laugh or cooking you a meal. If we go to the wrong person for support, we can sometimes end up feeling worse when it doesn't go well. Unfortunately this can make us less likely to reach out again in the future. So have a think about the people in your life and what they are good at. It can be helpful to write a list of possible support people and their strengths. That way you can look at it when you want to reach out for some support.

# Support from your healthcare team

## Being given information

Some people like to know every detail about their diagnosis and treatment. Having all that information is what helps them to cope better. Other people just want to know the smallest amount. Knowing very little is what helps them to cope better. These are both valid ways of coping. However your doctor won't necessarily know what you prefer. So it can be helpful to think about how you would like to receive and digest information. Then you can guide your healthcare team on how much information they should give you.

## Asking questions

It is really normal for people to get into their doctor's office and then forget all the questions they had in their head. It is important for you to get the answers to those questions. So it can be helpful to write them down as they come up and then take that list with you when you see your doctor. On page 15 you can find a list of questions to ask your doctor that you may find useful.

## Talking to your doctors about non-medical things

Even though your healthcare team is there to look after your medical needs, it is also important for them to know how you are coping in general. A lot of things can change at a time like this. There might be changes to your finances, your ability to get around at home or your emotional well-being. Your doctor might not be able to help you directly, but they will probably be able to refer you on to someone who can.



### Things you can do to help yourself

- Take some time out for yourself - do something relaxing
- Don't be afraid to ask for help
- Accept support from others

## Patient Support Groups

There are a number of organisations that are available to support people with breast cancer.

### These organisations include:



**Sweet Louise**  
[www.sweetlounge.co.nz](http://www.sweetlounge.co.nz)  
0800 112 277

*Sweet Louise helps to improve the quality of life for women and men living with advanced breast cancer. They offer information, advice, support and a range of practical and therapeutic services.*



**Breast Cancer Aotearoa Coalition (BCAC)**  
[www.breastcancer.org.nz](http://www.breastcancer.org.nz)

*BCAC provides information, support and representation, empowering people with a breast cancer diagnosis, to make informed choices about their treatment and care.*



**Breast Cancer Foundation NZ**  
[www.nzbcf.org.nz](http://www.nzbcf.org.nz)  
0800 902 732

*After your diagnosis, BCFNZ offer support services like free counselling, physio and special nurse support through their 0800 BC NURSE helpline.*



**Cancer Society of NZ**  
[www.cancernz.org.nz](http://www.cancernz.org.nz)  
0800 CANCER (226 237)

*The Cancer Society of NZ provide help and support for you and your whanau through cancer diagnosis, treatment and recovery.*



## Questions to ask your doctor

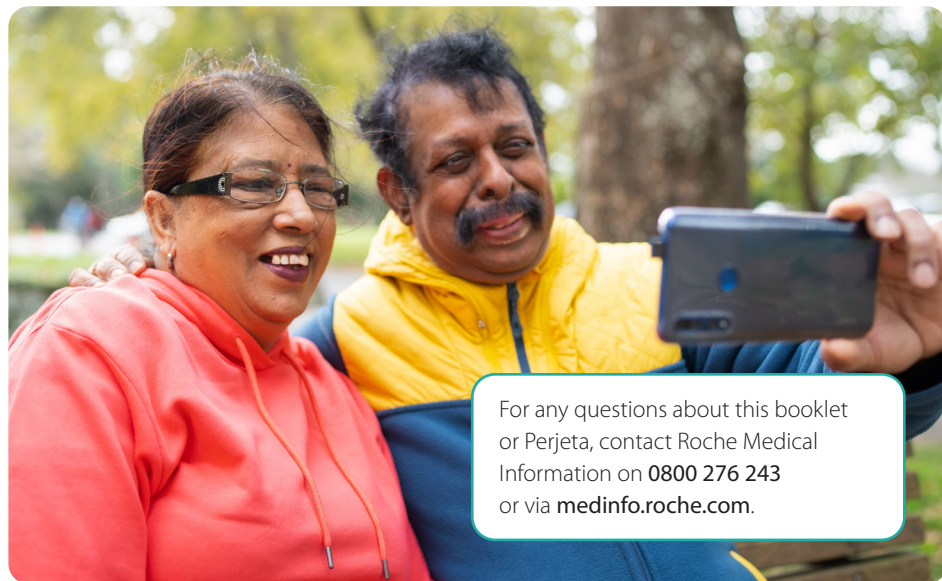
Below is a useful list of questions you may want to ask your doctor at your next appointment.

### Questions about your treatment

- + What are my treatment options?
- + How long will I need to stay on these treatments?
- + How will I know this treatment is working?
- + If I decide to have treatment, when can I start?

### Questions about treatment with Perjeta®

- + How long will I need to stay on Perjeta®?
- + What side effects can I expect to have?
- + Can I have Perjeta if I am pregnant?



For any questions about this booklet or Perjeta, contact Roche Medical Information on 0800 276 243 or via [medinfo.roche.com](mailto:medinfo.roche.com).

## Glossary

- > **Abnormal cell growth** cells that divide and reproduce without control.
- > **Advanced breast cancer** also known as metastatic or secondary breast cancer. Invasive breast cancer that has spread from the breast to other parts of the body.
- > **Chemotherapy** treatment with medicines that attack and kill rapidly growing cells, including normal cells.
- > **HER2** a protein found on all cells that helps cells grow and divide. It stands for Human Epidermal Growth Factor Receptor Type 2.
- > **HER2-positive breast cancer** a type of breast cancer that tests positive for the HER2 protein.
- > **Internal mammary lymph nodes** are lymph nodes within the breast tissue.
- > **IV infusion** also called an 'intravenous infusion'. A procedure where medicine is administered through a needle that a nurse inserts into a vein.
- > **Metastatic breast cancer** see 'advanced breast cancer'.
- > **Monoclonal antibodies** antibodies produced outside the body that are designed to target specific substances using the body's natural immune defences. For example, pertuzumab activates the body's own immune system to target the HER2 protein on the surface of HER2-positive breast cancer cells.
- > **PHARMAC** The Pharmaceutical Management Agency. This is the New Zealand Crown agency that decides, on behalf of Te Whatu Ora - Health New Zealand, which medicines and related products are subsidised for use in the community and public hospitals.
- > **Primary breast tumour** an overgrowth of cells forming a lump that has not spread beyond the breast or the lymph glands under the arm.
- > **Secondary breast cancer** see 'advanced breast cancer'.
- > **Trastuzumab** is a targeted therapy that targets and kills cancer cells that make too much HER2 protein.

If you are pregnant or plan to become pregnant, Perjeta may be harmful to an unborn baby. If there is a need for Perjeta treatment when you are pregnant, your doctor will discuss the risks and benefits to you and the unborn baby. You should use effective contraception to avoid becoming pregnant while you are being treated with Perjeta and for 7 months after stopping treatment.

If you become pregnant while receiving Perjeta or within 7 months following the last dose of Perjeta, please contact your oncologist for medical advice. Report the pregnancy to Roche Patient Safety at [nz.drugsafety@roche.com](mailto:nz.drugsafety@roche.com) or 0800 276 243.

Additional information will be requested during a Perjeta-exposed pregnancy and the first year of the infant's life. This will enable Roche to better understand the safety of Perjeta and to provide appropriate information to health authorities, healthcare providers, and patients.

For additional information, please refer to the Perjeta Consumer Medicine Information at [www.medsafe.govt.nz](http://www.medsafe.govt.nz)

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Perjeta® (pertuzumab), 420mg vial, is a **Prescription Medicine** used to treat breast cancer before surgery (neoadjuvant), after surgery (adjuvant) or metastatic (spreading) breast cancer. It is only used for patients whose tumour has tested positive to HER2.

**Tell your doctor if:** you have a history of heart problems such as heart failure, cardiac arrhythmias (an abnormal or rapid heartbeat), poorly controlled high blood pressure, or a recent heart attack; you have previously received chemotherapy treatment with medicines known as anthracyclines; you have experienced heart problems during previous treatment with Herceptin (trastuzumab); you have inflammation of the digestive tract, e.g. sore mouth or diarrhoea; you are allergic to any other medicines or any other substances such as foods, preservatives or dyes; you are pregnant or breast-feeding, or plan to become pregnant or breast-feed; you are currently taking any other medicines.

**Tell your doctor immediately or go to your nearest Accident and Emergency Centre if you notice any of the following:** swelling of your face, lips, tongue or throat with difficulty breathing; swelling of other parts of your body such as your hands or feet; shortness of breath, wheezing or trouble breathing; severe chest pain, spreading out to the arms, neck, shoulder or back; abnormal or irregular heartbeat; rash, itching or hives on the skin; feeling sick (nausea); headache; fever or chills or severe coughing. **Possible common side effects may also include:** diarrhoea (loose or frequent stools) or constipation; indigestion or stomach pain; sore mouth, throat or gut; getting tired more easily after light physical activity; shortness of breath especially when lying down or being woken from your sleep with shortness of breath; nail problems; hair loss; feeling dizzy, tired, looking pale; hot flushes; frequent infections with fever, severe chills, sore throat or mouth ulcers; nose bleeds; eye problems such as producing more tears; insomnia (trouble sleeping); weak, numb, tingling, prickling or painful sensations mainly affecting the feet and legs; loss of appetite; loss of or altered taste; joint or muscle pain or muscle weakness.

Perjeta has risks and benefits. Ask your oncologist if Perjeta is right for you. Use strictly as directed. If symptoms continue or you have side effects, see your healthcare professional. For further information on Perjeta, please talk to your health professional or visit [www.medsafe.govt.nz](http://www.medsafe.govt.nz) for Perjeta Consumer Medicine Information.

**Perjeta is a funded medicine for patients with HER2-positive metastatic breast cancer who meet pre-defined criteria.**

**Perjeta is not a PHARMAC funded medicine for the neoadjuvant or adjuvant treatment of early breast cancer.**

**A prescription charge and normal Doctor's fees may apply.**

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