Vinorelbine (Navelbine)

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1. What is vinorelbine?

Vinorelbine is a chemotherapy drug used to treat breast cancer. It’s also known by the brand name Navelbine.

Vinorelbine works by stopping cancer cells from dividing and multiplying, which blocks the growth of the cancer.

2. Who might be offered vinorelbine?

Vinorelbine is used to treat people with breast cancer that has come back after previous treatment. It’s used to treat:

- locally advanced breast cancer (also known as regional recurrence) – breast cancer that has spread to the tissues and lymph nodes around the chest, neck and under the breastbone
secondary breast cancer – breast cancer that has spread to other parts of the body, also known as advanced, stage 4 or metastatic breast cancer

3. How vinorelbine is given

Vinorelbine can be given:

- by mouth (orally)
- by drip into a vein (intravenously) in the hand or arm.

Both methods are equally effective.

You may be prescribed vinorelbine on its own or in combination with other intravenous or oral drugs.

Oral vinorelbine

When vinorelbine is given orally, you may have several capsules to take together. It's important to take them according to the instructions you're given.

Vinorelbine capsules should be swallowed whole (not sucked or chewed) with a glass of water and with some food. The capsules should be stored in the fridge.

Intravenous vinorelbine

Vinorelbine can also be given as an injection or short infusion (drip) into a vein in the hand or arm, or through a special line previously inserted into the vein. Read more information about how intravenous chemotherapy can be given.

Before treatment begins

Before starting your treatment, many hospitals will arrange a chemotherapy information session. At this appointment a nurse will discuss with you how and when your chemotherapy will be given and how side effects can be managed. Contact numbers will also be given so you know who to phone if you have any questions or concerns.
4. Common side effects of vinorelbine

Everyone reacts differently to drugs and some people may have more side effects than others. Side effects can usually be controlled and those described here will not affect everyone.

If you’re concerned about any side effects, regardless of whether they are listed here, talk to your chemotherapy nurse or cancer specialist (oncologist) as soon as possible.

**Effects on the blood**

Vinorelbine can temporarily affect the number of healthy blood cells in the body.

You’ll have regular blood tests throughout your treatment to check your blood count. If the number of blood cells is too low, your treatment may be delayed or the dose of chemotherapy reduced.

**Risk of infection**

Not having enough white blood cells can increase the risk of getting an infection.

Contact your hospital immediately if:

- you have a high temperature (over 37.5°C) or low temperature (under 36°C), or whatever your chemotherapy team has advised
- you suddenly feel unwell, even with a normal temperature
- you have any symptoms of an infection, for example a sore throat, a cough, a need to pass urine frequently or feeling cold and/or shivery

**Anaemia**

Having too few red blood cells is called anaemia. If you feel particularly tired, breathless or dizzy, let your specialist team know. A blood transfusion may be necessary during your treatment if the number of red blood cells falls significantly.

**Bruising and bleeding**

Vinorelbine can reduce the number of platelets, which help the blood to clot. You may also bruise more easily, have nosebleeds or your gums may bleed when you brush your teeth. Tell your specialist team if you have any of these symptoms.

**Nausea and vomiting**

You may experience nausea (feeling sick) and vomiting (being sick), but many people will not
actually be sick.

You’ll be given anti-sickness medication into your vein before the chemotherapy is given, and you’ll be prescribed anti-sickness drugs to take home to reduce nausea or stop it happening.

**Sore mouth**

You’ll be given mouthwash to try to reduce soreness of the mouth and gums and to try to stop mouth ulcers developing. Good mouth hygiene is very important during treatment.

It’s advisable to see your dentist for a dental check-up before chemotherapy begins and to avoid dental treatment during chemotherapy.

**Tiredness (fatigue)**

It’s common to feel extremely tired during your treatment. For some people, fatigue can last for several weeks or even months after the treatment has finished, but your energy levels will gradually return.

There are different ways of coping with fatigue.

**Skin problems**

Vinorelbine given as an infusion can irritate the veins and surrounding skin, causing redness.

If the drug leaks into the tissues around the vein (known as extravasation) it can cause damage to the skin and surrounding tissue. Therefore, it’s important to let the doctor or nurse know if you notice any stinging or burning when the drug is being given.

If the infusion is causing discomfort, you may be advised to have vinorelbine capsules instead. Alternatively, intravenous vinorelbine may be given using a different type of device.

**Bowel problems**

Vinorelbine can cause bowel problems, most often constipation.

Drinking plenty of water and eating a high-fibre diet can help make constipation less severe. If you’re constipated for more than two to three days, let your doctor know. Your specialist or GP can prescribe medication to help control it.

Sometimes vinorelbine can cause mild diarrhoea. This is usually temporary, but speak to your specialist or GP if it continues.
Liver changes
Sometimes vinorelbine may affect how well your liver works. You're unlikely to notice any symptoms, but your doctor may check how your liver is working using blood tests throughout your treatment.

Sensations in your hands or feet
You may experience numbness or tingling in your hands and feet. Let your doctor or nurse know if this happens. It's usually mild and will normally improve when treatment finishes.

5. Less common side effects of vinorelbine

Hair thinning
When used on its own, vinorelbine occasionally causes some temporary hair thinning. Very rarely, it can cause complete hair loss.

Joint or muscle pains
Sometimes joint, jaw or muscle pain may occur. Let your doctor know if this happens. They may prescribe medication for pain relief.

Allergic reaction
If you have an allergic reaction to vinorelbine, it will probably happen within the first few minutes of your treatment and is most likely the first or second time you have the drug. Reactions can vary from mild to severe, but severe reactions are uncommon.

You'll be monitored closely so that any reaction can be dealt with immediately.

Symptoms of an allergic reaction include:

- flushing
- skin rash
- itching
- back pain
• shortness of breath
• faintness
• high temperature or chills

If you have a severe reaction, treatment will be stopped immediately.

If you have a reaction, medication can be given before future treatments to reduce the risk of further reactions.

6. Sex and contraception

You’re advised not to become pregnant while you’re having treatment because vinorelbine may have a harmful effect on a developing baby.

If you haven’t been through the menopause, talk to your team about the most suitable method of contraception for you. You should continue using contraception for three months after your last dose of vinorelbine.

You can still have sex during treatment. As it’s not known if chemotherapy drugs can pass into vaginal fluids (or semen), most hospital specialists will advise using barrier methods of contraception, such as condoms.

7. Vaccinations

You shouldn’t have any live vaccines while you’re having chemotherapy. Live vaccines include measles, rubella (German measles), polio, BCG (tuberculosis), shingles and yellow fever.

Live vaccines contain a small amount of live virus or bacteria. If you have a weakened immune system, which you may do during chemotherapy, they could be harmful.

Talk to your GP or specialist before having any vaccinations.

If someone you live with needs to have a live vaccine speak to your specialist or GP. They can advise what precautions you may need to take depending on the vaccination.
Flu vaccination

Anyone at risk of a weakened immune system, and therefore more prone to infection, should have the flu vaccine. This includes people due to have or already having chemotherapy. The flu vaccine is not a live vaccine so doesn’t contain any active viruses. If you’re already having chemotherapy, talk to your chemotherapy specialist or breast care nurse about the best time to have your flu jab.

8. Blood clots

People with breast cancer have a higher risk of blood clots. Their risk is higher because of the cancer itself and some treatments for breast cancer. If the cancer has spread to other parts of the body, this also increases the risk.

Having vinorelbine increases the risk of blood clots such as a deep vein thrombosis (DVT). People with a DVT are at risk of developing a pulmonary embolism. This is when part of the blood clot breaks away and travels to the lung.

Blood clots can be harmful but are treatable so it’s important to report symptoms as soon as possible.

If you experience any of the following symptoms contact your local A&E department, GP or specialist team straight away.

• pain, redness/discolouration, heat and swelling of the calf, leg or thigh
• swelling, redness or tenderness where a central line is inserted to give chemotherapy, for example in the arm, chest area or up into the neck
• shortness of breath
• tightness in the chest
• unexplained cough (may cough up blood)

Find out more about blood clots.

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Next planned review begins 2020