MEDICINE INFORMATION

Cladribine injection (Leustat or Litak)

Patient information about injectable cladribine for hairy cell leukaemia, including blood tests and protection from infection during recovery.

At a glance

Cladribine is a chemotherapy medicine used for hairy cell leukaemia, a type of blood cancer. It is given over several days as a drip or an injection under the skin, depending on the product and plan. The medicine can lower blood counts and weaken infection defences after the course ends, so keep your blood tests and the hospital's 24-hour number.

How it is given. Cladribine is given by drip into a vein or by injection under the skin, depending on the product prescribed.

How it works

Cladribine interferes with the way some cells make and repair their genetic material, called DNA. It affects leukaemia cells and some healthy blood cells. Over time, successful treatment can allow healthy blood counts to recover. Blood counts may drop further before they improve.

Is this treatment suitable for me?

This sheet covers injectable cladribine for hairy cell leukaemia. The team considers blood counts, symptoms, infections and previous treatment. If you have an active infection, treating it first may affect when you start. Cladribine tablets used for multiple sclerosis are a different treatment plan.

Before treatment starts

Tell your team about any fever, recent infection, shingles, kidney or liver problems, previous chemotherapy and medicines that affect immunity. Expect blood tests to check your counts and how well your organs are working.

Ask whether you will need medicines to help prevent particular infections, and how long to take them. Ask who to call at night or on weekends and whether you need to tell other hospitals about any special requirements for blood transfusions.

How treatment is given

Cladribine can be given through a drip into a vein or as an injection just under the skin when that product is prescribed. Some infusions are given over several hours and others are delivered continuously. Your unit will explain the route, the number of treatment days and whether you go home between doses.

Tell staff if there is pain, swelling or leakage at the drip site. If you go home with a line or pump, keep the unit's instructions and call them if it leaks, disconnects or stops working. If an injection is missed, call the team. Do not take a double dose.

Monitoring your treatment

You will have repeat blood tests even after the last treatment day. White cells that protect against infection, red cells that carry oxygen and platelets that help stop bleeding may recover at different speeds. The team may use a later bone marrow test to assess response. Ask when it is planned and how the result will be used.

Some people need blood products or other support while counts recover. Ask about any special transfusion requirements that should be recorded on your treatment card.

If you need a blood transfusion

Cladribine affects which blood components you need during and after treatment. If you need red cells or platelets, tell the transfusion team about your treatment so they can arrange irradiated components. These are specially treated before transfusion to prevent a rare, serious reaction. Ask how long the precaution applies and whether you should carry a transfusion alert card or letter.

Side effects

Common side effects

- **Lower blood counts.** You may be more vulnerable to infection, feel tired or breathless, or bruise or bleed more easily. Keep blood test appointments even if you feel well.
- **Fever and infection.** Fever can have more than one cause during cladribine treatment. The team needs to assess it promptly because infection can worsen quickly.
- **Nausea, tiredness or headache.** Tell the team if symptoms affect drinking or daily activities. Ask which symptom medicines you can take.
- **Injection-site discomfort.** Redness or soreness can occur after an injection under the skin. Report spreading redness, swelling or pain, particularly with fever.

Important side effects

Cladribine can suppress parts of the immune system for longer than the treatment course. Tell your team about new cough, fever, burning when passing urine or a painful blistering rash. Call about a new change in strength, balance, vision or thinking. The team will check for causes, including rare nervous system complications.

When to seek urgent help

Call your hospital’s 24-hour cancer care number straight away if you have fever, shaking chills, a new sign of infection, unusual bleeding or feel suddenly unwell. Follow your hospital’s temperature instructions. If you have no written threshold, call at 37.5°C (99.5°F) or above, or below 36°C (96.8°F). Call even with a normal temperature if you feel very unwell.

Seek emergency care for severe breathing difficulty, chest pain, confusion, a seizure, bleeding that will not stop or collapse. Tell staff when you received cladribine.

Practical advice for this treatment

Prepare for the hospital schedule

Ask whether your product is given through a vein or injected under the skin. A short course can affect the immune system for considerably longer than the medicine visits. Write down your blood test dates and the name of any infection prevention medicine.

Tell other teams about transfusion instructions

Keep a record of any transplant or immune-suppressing treatment and show it to the team before a transfusion.

Plan for low counts and infection exposure

Arrange help with shopping, meals or getting to hospital if your counts are low. Call the team if someone you live with develops chickenpox or shingles or you develop fever or shaking chills. Check with the team before scheduling vaccines or international travel during immune recovery.

Other medicines and vaccinations

Check before taking any new medicine or supplement. Ask your haematology team about vaccines, including when you can have them after treatment. Live vaccines may be unsafe while your immunity is suppressed. Ask the team before stopping prescribed infection-prevention medicine.

Everyday life

Wash your hands regularly and avoid close contact with people who are unwell. Ask for advice if someone you live with develops chickenpox or shingles or if you have had a significant exposure. Keep a thermometer and your treatment details where you can find them quickly.

Balance activity with rest. If fatigue makes it difficult to manage daily tasks, ask if the team can check your blood count or help with practical support.

Fertility, pregnancy and breastfeeding

Cladribine can harm a developing baby. Talk to the team before starting about contraception for you and your partner and how long to continue after treatment. Ask about fertility preservation if relevant. Do not breastfeed during treatment and confirm the safe interval afterwards for your product.

After treatment

Keep your follow-up tests and ask when changes to infection precautions or preventive medicines will be reviewed. Tell new clinicians that you have received cladribine, especially if you need a transfusion or vaccination. Keep your transfusion instructions with your treatment information.

Frequently asked questions

Is this the cladribine tablet used for multiple sclerosis?

This guide covers injectable cladribine used for blood cancer. Check the product and route on your plan.

Is hairy cell leukaemia treated with one course?

One course may be enough for some people. Your team reviews blood and marrow recovery before deciding what else, if anything, is needed.

Can I have treatment as an outpatient?

It depends on the route, schedule, your blood counts and whether you need extra monitoring. Ask whether each visit is a day visit or an admission.

What if I already have an infection?

Tell the unit before treatment. They may need to investigate or treat the infection and review the timing.

Why might my blood count go down before it improves?

The medicine affects some healthy blood cells as well as leukaemia cells. Your team follows the trend to decide what support you need.

What if I feel well after treatment?

Keep the planned tests. Counts can be low before you notice symptoms.

How long will infection precautions last?

Ask your team when they expect to reassess your immune recovery. The timing varies and can extend beyond the course.

Can I stop preventive medicines once the injections finish?

Ask your team first. The medicines may still be needed while your immune system recovers.

What if someone at home has shingles or chickenpox?

Call the team promptly for advice and explain when the contact took place.

What if I miss a treatment day?

Call the treatment unit. They will check whether the schedule needs to be adjusted.

Could I need a blood transfusion?

Some people need blood products when counts are low. Ask whether a transfusion alert card or special blood products apply to you.

When will I know if it worked?

Your team will look at your symptoms and blood tests and may plan a marrow test after time for recovery. Ask when you can expect the review.

Can I have a vaccine after treatment?

Ask your haematology team about the specific vaccine and timing, especially for a live vaccine.

Can I travel after the course?

Discuss the timing with your team. You may need tests or urgent access to care while counts recover.

What should I tell an emergency team?

Give the name cladribine, the dates you received it, your latest blood results if available and any transfusion instructions your team gave you.

Sources and further reading

Read this guide alongside your hospital's plan. Ask your pharmacist to confirm the exact product dispensed in India and follow the instructions for that product.

Summary of Product Characteristics (SmPC) and prescribing information

- Intravenous cladribine (Leustat) - UK SmPC
- Subcutaneous cladribine (Leustat) - UK SmPC
- Subcutaneous cladribine (Litak) - EU product page with SmPC
- Leustatin intravenous cladribine US prescribing information

Clinical protocols and other references

- British Society for Haematology guideline on irradiated blood components
- Canadian National Advisory Committee recommendations on irradiated blood components

Additional sources

- Macmillan Cancer Support, cladribine
- Cancer Research UK, cladribine
- British Society for Haematology, irradiated blood components
- eviQ, cladribine for hairy cell leukaemia

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