MEDICINE INFORMATION

Paclitaxel, trastuzumab and pertuzumab

A guide to the three-medicine treatment for HER2-positive breast cancer, with practical advice for infusion visits, nerve symptoms, diarrhoea and heart checks.

At a glance

Treatment	Paclitaxel + Trastuzumab + Pertuzumab
When it may be used	For selected people with HER2-positive breast cancer, including before surgery or when the cancer has spread.
How it is given	Paclitaxel is given by drip into a vein. Trastuzumab and pertuzumab are given by drip or together as an injection under the skin if prescribed in that form.
Before you start	Ask for a treatment calendar, a plan for diarrhoea and the hospital's 24-hour number. Tell your team about any heart or nerve problems.

What this treatment is and how it works

Paclitaxel is chemotherapy that interrupts cell division. Trastuzumab and pertuzumab are targeted antibodies that attach to different parts of human epidermal growth factor receptor 2 (HER2). Some breast cancers have high levels of this protein. Blocking its growth signals can slow or stop those cells from growing.

When it may be used

This combination may be offered before surgery, an approach called neoadjuvant treatment. It can also be used for some people whose breast cancer has spread. The aim and length of treatment depend on the cancer, earlier treatment and your health. Your team can explain how your HER2 result was assessed and how it will check your response.

Before treatment

Tell the team about heart or liver problems, diabetes, any diarrhoea you already have and numbness or tingling in the hands or feet. List all medicines, including supplements. You usually have blood tests and a heart scan to measure how well your heart pumps. Ask who will arrange these tests and how often they are repeated.

Before paclitaxel, staff usually give medicines to reduce the chance of an allergic reaction. If the team gives you instructions to take a medicine at home before treatment, ask what to do if you miss it. Some pre-treatment medicines can make you sleepy. Check your transport arrangements.

How treatment is given

You usually receive paclitaxel through a drip in the day unit. The two antibodies can be given as drips. Ask which formulation your team is using. In one common plan, paclitaxel is given weekly and the two antibodies every three weeks. Your hospital may use a different schedule. Use the calendar they give you so you know what to expect at each visit.

The first visit may take longer because staff watch for reactions. Tell the nurse immediately about itching, rash, chills, chest tightness, dizziness or breathing changes, or if you have pain or swelling at the drip site.

Tests and monitoring during treatment

Blood tests help check whether your next paclitaxel dose can go ahead. Heart scans continue while you are receiving HER2 treatment. Tell the team if you become breathless doing ordinary activities, notice swelling or feel your heart racing. Keep a note of tingling, numbness and diarrhoea between appointments. Tell the team how these symptoms affect drinking, walking or using your hands.

If you are preparing for surgery, your team will reassess the cancer and arrange the operation. The results from surgery can help guide the next treatment. If the cancer has spread, scans and symptom checks help the team decide when to continue or change the plan.

Side effects

Common side effects

- **Tingling or numbness.** Paclitaxel can affect nerves in the hands and feet. Report changes early, including problems holding a pen, walking or doing up buttons.
- **Diarrhoea.** This can occur with pertuzumab. Follow your prescribed plan and tell your team promptly if you have repeated loose stools, feel dizzy or are drinking less.
- **Low blood counts.** Chemotherapy can increase the risk of infection, fatigue and bleeding. Call for fever or sudden illness and report unusual bruising.
- **Hair loss, aches and nail changes.** Ask which pain relief is suitable and tell the team if nails become painful, swollen or red.
- **Mouth soreness, nausea and tiredness.** Ask for a mouth-care plan and tell the team if pain or nausea makes it hard to eat or drink.

Less common and important side effects

The HER2 antibodies can affect how well the heart pumps. New breathlessness, swelling, sudden weight gain or palpitations need assessment. Infusion reactions can happen during treatment or shortly afterwards. Ask what signs to look for on the way home.

When to seek urgent help

Call your hospital’s 24-hour cancer care number straight away for fever, shaking chills, sudden illness, repeated diarrhoea or vomiting, trouble drinking or new breathlessness. Follow the 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 trouble, chest pain, swelling of the face or throat, collapse or bleeding that will not stop. Tell staff which drugs you are receiving and when you last had them.

Practical advice for this treatment

Confirm dates for taxane and antibody treatment

Paclitaxel may be given more often than trastuzumab and pertuzumab. Ask for separate dates for each medicine so you know which premedicines and follow-up are due. Tell your team if you miss a visit or cannot take a prescribed premedication.

Keep a record of diarrhoea and nerve symptoms

Tell the team how often you have loose stools and whether you can drink normally. Ask which symptoms mean you should call. Report tingling or numbness if it keeps you awake or affects holding small objects, walking or stairs.

Ask how long heart checks continue

Give details of any previous heart problem and new breathlessness, swelling or palpitations. Ask which heart tests continue once paclitaxel stops and whether the HER2 medicines are planned for a fixed time or will be reviewed against your results.

Medicines, interactions and vaccinations

Ask the cancer pharmacist to check new prescriptions, pharmacy medicines and supplements. If you have diabetes, discuss how steroids around treatment may affect blood sugar. Ask the team before vaccination, including whether a live vaccine needs to be delayed.

Everyday life

Keep a supply of the medicines your team prescribed for nausea or diarrhoea. Check how to reach the unit after hours. Use supportive shoes if your feet feel numb and ask for help if you feel unsteady. Report weight changes or difficulty eating so the team can suggest practical support.

Pregnancy, fertility and breastfeeding

Ask about fertility preservation before starting if it matters to you. Discuss contraception and when breastfeeding can safely resume. Get the dates in writing if paclitaxel and the antibodies finish at different times.

After treatment

If the antibodies continue after paclitaxel, ask for the updated calendar and heart scan dates. Let the team know if numbness, swelling or fatigue persists. Ask who will discuss the next step after surgery or the next scan.

Frequently asked questions

Are all three medicines chemotherapy?

Paclitaxel is chemotherapy. Trastuzumab and pertuzumab are targeted medicines for HER2-positive cancer.

Is this the same as the docetaxel combination?

Both use trastuzumab and pertuzumab. This plan uses paclitaxel, and the other uses docetaxel. Their schedules and side effects can differ.

Why might I have only paclitaxel at some visits?

The antibodies may be scheduled less often than paclitaxel. Check the written plan or ask the unit before your visit.

Can the antibodies continue after the chemotherapy?

Yes. The team may continue HER2 treatment after paclitaxel ends. The plan depends on why you are being treated and how the cancer responds.

What if diarrhoea starts between visits?

Use the instructions from your team and call early if it is repeated, you feel dizzy or you cannot drink normally.

Should I report numbness even if it goes away?

Yes. Tell the team when it starts and whether it affects daily tasks. It may become more noticeable over several cycles.

Can I skip the pre-treatment medicines?

Ask your unit first. These medicines help reduce reactions to paclitaxel, and the team can tell you what to do if you missed them.

What if I feel itchy or flushed during a drip?

Tell the nurse immediately. The team can assess your symptoms and decide whether to pause treatment.

Why do I need heart scans if I feel fine?

A scan can show changes in how your heart pumps before symptoms appear. Your team can explain the schedule.

What if my surgery date changes?

Tell your cancer team so it can confirm your remaining medicines, tests and appointment dates.

Do I need the same tests if I am only having the antibodies?

You may need fewer blood tests, but heart checks usually continue. Ask your team which checks you still need.

Can I get help with side effects between visits?

Yes. Use your hospital's contact instructions and describe when each symptom began and how it affects you.

Can my treatment be delayed because of tingling?

Your team may adjust, delay or stop paclitaxel if nerve symptoms worsen. Report them early so the team can assess them.

How will my team decide what treatment I need after surgery?

The team considers the operation results and the original tumour features alongside your health and previous treatment.

What should I check if my team switches me from docetaxel to paclitaxel?

Ask for a new calendar and check which tablets or other medicines to take before each infusion. Tell the team about any tingling or numbness from earlier treatment so it can monitor for a change.

Individual medicine guides

- Paclitaxel
- Trastuzumab
- Pertuzumab

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

- Conventional paclitaxel infusion - UK SmPC
- Trastuzumab (Herceptin) - EU SmPC
- Pertuzumab (Perjeta) - EU SmPC
- Fixed-dose pertuzumab and trastuzumab injection (Phesgo) - EU SmPC

Clinical protocols and other references

- eviQ paclitaxel, trastuzumab and pertuzumab before breast cancer surgery

Additional sources

- eviQ, paclitaxel, trastuzumab and pertuzumab before breast cancer surgery
- eviQ, paclitaxel, trastuzumab and pertuzumab for metastatic breast cancer
- Cancer Research UK, targeted treatment for breast cancer

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