MEDICINE INFORMATION

R-GDP (rituximab, gemcitabine, dexamethasone and cisplatin)

A guide to R-GDP for some people with B-cell lymphoma, with help preparing for visits, taking steroid tablets and reporting side effects between cycles.

At a glance

Treatment	Rituximab + Gemcitabine + Dexamethasone + Cisplatin
When it may be used	For selected B-cell lymphomas that have returned or continued to grow after earlier treatment.
How it is given	Rituximab, gemcitabine and cisplatin are given through a vein. You usually take dexamethasone by mouth.
Before you start	Ask for your infusion and tablet dates, instructions for drinking fluids, and the hospital's 24-hour number.

What this treatment is and how it works

Rituximab is an antibody that attaches to CD20, a protein on many B cells. This helps the immune system remove lymphoma cells that carry CD20. Gemcitabine and cisplatin are chemotherapy medicines that interfere with the genetic material cells need to grow. Dexamethasone is a steroid that helps treat lymphoma as well as being used for other purposes in cancer care. Your team will explain which steroid doses are part of the treatment.

When it may be used

R-GDP may be used for selected people with B-cell non-Hodgkin lymphoma that has returned or did not respond adequately to earlier treatment. Your doctor will consider the type of lymphoma, previous treatments and how well your kidneys are working. For some people, the response can help the team decide on a next step such as a stem cell transplant. Ask what the treatment is intended to achieve in your situation.

Before treatment

Tell the team about kidney problems, hearing loss, ringing in the ears, numbness or tingling, diabetes and any previous reaction to rituximab or platinum drugs. Bring a list of prescriptions, supplements and non-prescription medicines. Tell them if you have ever had hepatitis B. Rituximab can allow a previous hepatitis B infection to become active again, so blood tests and sometimes preventive treatment are needed.

Your team usually checks blood counts, kidney and liver function and blood salts. Ask how much fluid is suitable if you have a heart or kidney condition. Get clear instructions for your dexamethasone and blood sugar monitoring if you have diabetes.

How treatment is given

You usually have treatment in a cancer day unit. A common schedule has a longer visit early in the cycle and another visit for gemcitabine later in the cycle. Your centre may give cisplatin over more than one day. Follow the dates on your own calendar and ask which visits need blood tests beforehand.

Cisplatin is usually given with extra fluid through a drip to protect your kidneys. Your team will give anti-sickness medicines and tell you what to take afterwards. Take the steroid tablets exactly as written. Call the unit if you miss a dose or vomit after taking one.

Tell staff immediately about shivering, itching, wheezing, chest tightness, dizziness or pain at the drip site. Reactions to rituximab are more likely during the first infusion, so that visit may take longer.

Tests and monitoring during treatment

Blood tests before treatment and between visits check whether your blood counts, kidneys and blood salts can cope with the next dose. Your team may replace salts such as magnesium or change the timing of treatment. Tell them if you are passing less urine, feeling dizzy, hearing ringing or having trouble walking or using your hands.

Ask when you will have a scan and how its results may affect the rest of the plan. A delay can allow time to investigate symptoms or let blood counts recover.

Side effects

Common side effects

- **Low blood counts.** You may be more prone to infection, bruising or fatigue. Report fever, shaking chills, unusual bleeding or new breathlessness.
- **Nausea or vomiting.** Take your prescribed medicines as directed. Call if you cannot keep fluids down or are passing much less urine.
- **Tiredness, sore mouth or changes in taste.** Ask about mouth care and eating. Let the team know if mouth soreness stops you drinking or eating normally.
- **Sleep, mood or blood sugar changes.** Dexamethasone can make you feel more alert, hungry or restless. Follow your blood sugar plan if you have diabetes.

Less common and important side effects

Cisplatin can affect hearing, nerves and kidneys. Report ringing in the ears, trouble hearing, new tingling or less urine. Gemcitabine can cause flu-like symptoms, and fever still needs prompt assessment for infection. Report a new cough or breathlessness because infection or lung inflammation can occur. Rituximab can cause reactions during or after an infusion.

When to seek urgent help

Call your hospital's 24-hour cancer care number straight away for fever, shaking chills, sudden illness, new cough or breathlessness, persistent vomiting, very little urine or unexplained bleeding. 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 if you feel very unwell even with a normal temperature.

Seek emergency care for severe breathing trouble, chest pain, swelling of the face or throat, collapse or bleeding that will not stop. Tell staff you are receiving R-GDP for lymphoma.

Practical advice for this treatment

Confirm the hospital day and home medicines

Check which visits include cisplatin, which include gemcitabine, and when you take dexamethasone. Ask about fluids with cisplatin and anti-sickness tablets for several days after it. The steroid can affect sleep and blood glucose, especially if you have diabetes.

Ask about hepatitis B before rituximab

Tell the team about any past hepatitis and show it your results if you have them. It may need tests and prevention medicine to avoid reactivation. During rituximab, tell staff about chills, rash or a change in breathing.

Report hearing or kidney symptoms early

Let the team know about ringing in the ears, poorer hearing, dizziness or passing less urine. Call if you cannot keep down fluids. Ask how the team will monitor your kidney function and when it may repeat a hearing test.

Medicines, interactions and vaccinations

Ask your cancer pharmacist to check any new medicines, including painkillers and supplements. Some can affect the kidneys or change how treatment works. If you are prescribed medicine to prevent hepatitis B or another infection, ask when to start and stop it. Check vaccine timing with the team because rituximab affects the immune system after treatment as well.

Everyday life

Ask how long the first visit is likely to take and plan transport, meals and help at home around it. Keep a note of steroid days, fluid intake and any hearing or nerve symptoms. Drink the amount your hospital recommends.

Pregnancy, fertility and breastfeeding

Ask about fertility preservation before the first cycle. Discuss contraception and breastfeeding and obtain the dates on which precautions can end after the final dose of each medicine.

After treatment

Ask who will discuss scan results and whether blood tests, infection-prevention tablets or other follow-up will continue. Report ongoing hearing changes, numbness and infections.

Frequently asked questions

Does everyone get all four medicines on every visit?

No. The drugs may be given on different days. Your calendar should show what to expect at each visit.

What does the R stand for?

R stands for rituximab, the antibody treatment. GDP refers to gemcitabine, dexamethasone and cisplatin.

Why is my first visit longer?

The first rituximab infusion often takes longer so staff can check for reactions. Fluids around cisplatin also take time.

Why do I need extra fluid?

Cisplatin can affect the kidneys. Extra fluid and checks on urine and blood tests help your team manage that risk.

What if I have a limit on how much I can drink?

Tell your team before treatment. They can plan the fluids and tell you what to drink at home.

Should I report ringing in the ears?

Yes. It can be an early sign of a cisplatin effect. Tell the unit even if it comes and goes.

What if I miss a steroid tablet?

Call the unit and tell them when it was due. They can advise what to do.

Can steroids change my blood sugar?

Yes. Ask for a plan for checking it and what readings to report, especially if you have diabetes.

Why check hepatitis B if I feel fine?

An old infection can become active during or after rituximab. A blood test helps the team decide what monitoring or prevention you need.

What if I have fever on a day without treatment?

Call the hospital’s 24-hour cancer care number. Infection can develop between appointments.

Why has my treatment been delayed?

The team may need to recheck counts, kidney tests or symptoms. Ask when you should return for tests.

Can I take anti-sickness medicine before I feel sick?

Follow the instructions on your prescription. Some medicines work best when taken before nausea starts.

Does R-GDP mean I will have a transplant?

R-GDP may help control the lymphoma before another treatment. A transplant is one possible next step if the lymphoma responds and a transplant is suitable for you. Ask when the team will check the response and discuss your options.

What should I bring if I need urgent care?

Bring your medicine list and last treatment date if you have them. Get help straight away if symptoms are severe.

Individual medicine guides

- Rituximab
- Gemcitabine
- Dexamethasone
- Cisplatin

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

- Rituximab (MabThera) - EU SmPC
- Gemcitabine infusion - UK SmPC
- Dexamethasone tablets - UK SmPC
- Dexamethasone injection - UK SmPC
- Cisplatin injection - UK SmPC
- Gemcitabine - UK product information

Clinical protocols and other references

- eviQ R-GDP protocol

Additional sources

- Macmillan Cancer Support, R-GDP
- eviQ, R-GDP for non-Hodgkin lymphoma

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