MEDICINE INFORMATION

THP for HER2-positive breast cancer

Patient information about THP for HER2-positive breast cancer, with advice for treatment visits, diarrhoea and heart monitoring.

At a glance

Treatment	Docetaxel + Trastuzumab + Pertuzumab
When it may be used	In selected people with HER2-positive breast cancer, including breast cancer that has spread.
How it is given	Docetaxel 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	Check your steroid instructions, heart scan, diarrhoea plan and hospital's 24-hour number.

What this treatment is and how it works

Docetaxel is chemotherapy that interferes with cell division. Trastuzumab and pertuzumab are targeted antibodies. They attach to different parts of human epidermal growth factor receptor 2 (HER2), a protein that helps some breast cancers grow.

When it may be used

This combination is used for selected people with HER2-positive breast cancer that has spread. Your team may also discuss a related plan in another setting. Ask what the treatment is intended to achieve, how the HER2 test was interpreted and how the plan fits with treatment you have already had. THP contains three medicines. TCHP adds carboplatin.

Before treatment

Tell the team about heart disease, high blood pressure, liver problems, tingling or numbness and changes in your bowel habits. Bring a list of medicines and supplements. The team usually checks blood counts, liver tests and how well your heart pumps before starting.

Ask when to take the steroid used around docetaxel. It can reduce the risk of some reactions and fluid retention. If you have diabetes, ask how to monitor blood sugar around those doses. Have a written plan for diarrhoea and ask who to call if it continues.

How treatment is given

You receive docetaxel through a drip. Trastuzumab and pertuzumab can be given as separate drips or as one combined injection under the skin if your team prescribes that formulation. The first visit may take longer so staff can watch for reactions. A common plan repeats treatment every three weeks, with the HER2 antibodies sometimes continuing once the docetaxel course stops. Ask your team which visits include each drug.

Tell the nurse promptly if you feel hot, shivery, itchy, dizzy or breathless or if you notice redness or pain around the drip.

Tests and monitoring during treatment

Blood tests help the team decide if the next docetaxel dose can go ahead. Heart scans continue while you receive HER2 antibodies. Report new breathlessness, swelling or a change in exercise tolerance. Your team will explain how scans and symptoms are used to assess the cancer.

Side effects

Common side effects

- **Diarrhoea.** Start the plan your team gave you and call if symptoms are getting worse, you feel dizzy or you cannot keep drinking.
- **Low blood counts.** Docetaxel can lower the cells that fight infection, carry oxygen or help stop bleeding. Tell the team about fever, sudden tiredness or unusual bruising.
- **Hair loss, mouth soreness and nail changes.** Ask about mouth care and practical support. Report nail redness, pain or discharge.
- **Tingling and numbness.** Tell the team if you have trouble with balance, grip or buttons.
- **Fluid retention.** Swelling can be due to docetaxel or other causes. The team needs to assess new swelling, particularly if breathing changes.

Important side effects

The HER2 antibodies can affect how well the heart pumps. Report new breathlessness, swelling, palpitations or unexpected weight gain. An infusion or injection reaction can cause chills, rash, wheezing or dizziness. Tell staff immediately during a visit and follow their instructions if symptoms start after you leave.

When to seek urgent help

Call your hospital’s 24-hour cancer care number for fever, shaking chills, sudden illness, persistent diarrhoea or vomiting, difficulty drinking or new breathlessness. 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 if you feel very unwell even with a normal temperature.

Seek emergency care for severe breathing difficulty, chest pain, swelling of the face or throat, collapse or bleeding that will not stop. Tell staff which treatments you are receiving and when you last had them.

Practical advice for this treatment

Confirm the three medicines and how long each is planned

THP uses docetaxel, trastuzumab and pertuzumab. In some settings, the team stops docetaxel and continues one or both HER2-directed drugs, depending on response and tolerance. Ask what will trigger that decision and which tests continue.

Take the steroid and bowel instructions home

Check when docetaxel premedication is due. Pertuzumab can cause diarrhoea. Ask what medicine you may use, when to start it and what level of symptoms requires a call. Keep fluids nearby if you have loose stools and contact the team if drinking becomes difficult.

Watch for infusion reactions and heart symptoms

Tell the nurse about flushing, wheeze, pain or dizziness during treatment. Later, report breathlessness that is new or getting worse, unusual tiredness on exertion or ankle swelling. A heart check can help the team assess what treatment is safe.

Medicines, interactions and vaccinations

Ask the oncology team or pharmacist to check new medicines, including medicines for diarrhoea, pain or infection. Bring your diabetes plan if steroids affect your blood sugar. Ask which vaccines are appropriate and when.

Everyday life

Keep drinks and the prescribed symptom medicines available. Track diarrhoea, fluid intake, weight changes and any new swelling. Call early if you cannot eat or drink as usual. Ask for help with transport or household tasks around treatment if fatigue makes them difficult.

Pregnancy, fertility and breastfeeding

Discuss fertility preservation, contraception and breastfeeding with your team before treatment. Ask how long precautions continue after docetaxel and after the last dose of the targeted medicines. Request the dates in writing if treatments finish at different times.

After treatment

If docetaxel stops while trastuzumab and pertuzumab continue, ask for the new calendar, heart scan dates and contact instructions. Tell your team if nerve symptoms, breathlessness or swelling persist.

Frequently asked questions

Why are there two HER2 medicines?

Trastuzumab and pertuzumab attach to different parts of HER2. They can be used together with chemotherapy in selected breast cancers.

Is THP the same as TCHP?

TCHP also contains carboplatin. Check the names on your treatment plan because the combinations differ.

Will all three medicines continue for the same length of time?

The team may stop docetaxel and continue the two antibodies. Ask how they will decide when to do that.

What if I miss my steroid?

Call the unit before your infusion and say exactly what you took and when. They will tell you what to do.

Can the two antibodies be given as one injection?

Some teams prescribe an approved combined under-the-skin formulation. Docetaxel still needs a drip.

What if diarrhoea starts after I go home?

Follow the written advice and call early if you have repeated loose stools, dizziness or difficulty drinking.

How can I tell if swelling is from treatment?

Swelling has several possible causes. Tell the team where it is, how quickly it started and whether you are breathless.

Do I need another heart scan if the first one was normal?

Yes, if it is part of your monitoring plan. The team compares results during HER2 treatment.

Will my hair grow back after docetaxel?

Regrowth usually begins after chemotherapy stops, but the timing varies. Ask about support if hair loss or slow regrowth concerns you.

Should I report tingling that comes and goes?

Tell the team at your next assessment, or sooner if it worsens or affects daily activities.

Why might I need an injection to support white cells?

The team may prescribe it to reduce the risk of infection from low white cells. Ask who gives it and when it is due.

What happens if I feel shivery during the drip?

Tell the nurse immediately. They can stop or slow the infusion and assess you.

What should I tell an emergency doctor?

Give the names of the three medicines, the date of your last treatment and your hospital’s contact details.

How will the team check whether THP is working?

They consider your symptoms and scans together. Ask when the first review is planned.

If docetaxel stops, does that mean treatment has failed?

Stopping docetaxel can be planned after the chemotherapy part of treatment, especially if side effects are building up. Trastuzumab and pertuzumab can continue if your team thinks they are helping. Ask which medicines are next on your calendar and how the team will check your response.

Is the docetaxel in THP the same as paclitaxel?

Both are taxanes, but the schedules and premedication can differ. Check the name before using the written instructions for another treatment.

Individual medicine guides

- Docetaxel
- 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

- Docetaxel (Taxotere) - EU product page with SmPC
- Trastuzumab (Herceptin) - EU SmPC
- Pertuzumab (Perjeta) - EU SmPC
- Fixed-dose pertuzumab and trastuzumab injection (Phesgo) - EU SmPC
- Perjeta FDA prescribing information

Clinical protocols and other references

- eviQ metastatic docetaxel, trastuzumab and pertuzumab protocol
- CLEOPATRA trial of pertuzumab, trastuzumab and docetaxel

Additional sources

- eviQ, patient information on docetaxel, trastuzumab and pertuzumab
- Macmillan Cancer Support, docetaxel
- Cancer Research UK, trastuzumab and pertuzumab

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