

Patient Care Considerations Following Chemotherapy Administration

The risk of drug exposure when handling body fluids from chemotherapy patients is a common concern for staff and pet owners. Being informed of the potential risks and careful attention to detail regarding personal and environment safety should allow stress free patient care.

Excreta (saliva, urine, vomit, faeces) of treated animals may contain traces of drug or their metabolites and are therefore a potential risk.

There is no information available regarding the duration of risk periods for veterinary patients following chemotherapy administration, so data has been taken from human medicine. This information is included on the individual insert sent with each pharmaceutical and on our website, (www.chemopet.co.uk).

Although exposure of a staff member or pet owner to significant amounts of chemotherapy agents or their metabolites from routine handling of a pet is unlikely, certain people are more at risk if they are exposed. Women who are breast feeding or pregnant, children, people trying to conceive (both men and women) and immunosuppressed individuals should never handle chemotherapy drugs or potentially contaminated urine or faeces.

In hospital environment:

Most patients receiving chemotherapy will be treated on a day patient basis. For those that are hospitalised, it is important to:

- Mark the patient's kennel with clear, visible sign informing all staff that the patient has received chemotherapy. It is important to record the date, time, type of drug and route of administration in addition to the warning sign.
- Wear personal protective equipment (PPE) when nursing these patients: gloves, gown, overshoes, etc.
- Wear PPE to handle contaminated bedding. To minimize handling, consider the use of dissolvable wash bags. Contaminated bedding should be washed separately twice before re-entering general use. Consider ordering bedding of a different colour to distinguish it from the bedding in general use in the hospital.
- Avoid pressure washing/sprays when initially cleaning a kennel in order to prevent aerosolisation of drug metabolites. It is better to use disinfectant wipes/soaked paper towel. Kennels should be thoroughly cleaned following discharge.
- Walk the patient outside in a low traffic, sunlit area as most chemotherapy agents are deactivated by sunlight.
- Minimize exposure by using thermometer covers, kennel liners, disposable litter trays or liners.
- Soft waste produced during hospitalisation needs to be disposed of in accordance with your waste providers guidelines.

In home environment:

- It is important to provide written instructions for the owners, stating the drug name and route (including the site) of administration, both as a reference once home but also to other veterinary staff, if patients are treated at an emergency clinic.
- Familiarise clients with taking temperatures and potential side effects/clinical signs to watch out for e.g. altered urination following cyclophosphamide administration.

- Normal hand hygiene following contact with the pet and clean-up of waste should be recommended.
- There is no need to feed or exercise the patient separately from other pets.
- Wear gloves to pick up waste. Double bag waste, including cat litter, before disposal in an outside bin.
- If accidents occur inside, again wear gloves, use paper towel to absorb any liquids. Use a dilute bleach or detergent solution to clean the potentially contaminated area three times using paper towel. Double bag all items used in clean up before disposal in an outside bin.
- Again walk outside, away from a children's play area, picnic tables etc. Consider small pet herbivores that may be allowed out to eat grass if the patient is toileting in the garden at home.
- Any medications should be stored in the original packaging out of the reach of children and other pets. Any unused medication should be returned to the veterinary clinic for safe disposal.
- Any dietary changes should be made slowly over 7-10 days. Avoid raw food diets during chemotherapy treatment.
- Flea and worming treatment can be continued as usual during treatment.
- Vaccinations: There is evidence that pets, (dogs and cats) can still mount an immune response to a vaccine challenge. However as a patient's immune system may be compromised by both the cancer and the chemotherapy it is unknown whether patients will have the complete and normal beneficial response. For this reason, if a patient does not require vaccinations e.g. it is not going into kennels; we recommend waiting for a scheduled break in the chemotherapy before vaccinating. If the patient is going into kennels or a cattery and vaccination is obligatory, then the use of a killed or live attenuated vaccine over a live vaccine is preferred.