

Gemcitabine (Gemzar®)

Gemcitabine is a **chemotherapy drug** used to treat different cancers including cancers of the **bladder, pancreas, ovary and breast, and non-small cell lung cancer**.

On this page

- [How gemcitabine is given](#)
- [Possible side effects of gemcitabine](#)
- [Less common side effects of gemcitabine](#)
- [Other information about gemcitabine](#)
- [References and thanks](#)

This information should ideally be read with our general information about [chemotherapy](#) and the [type of cancer](#) you have.

How gemcitabine is given

[Back to top](#)

You usually have gemcitabine in the chemotherapy day unit or during a stay in hospital. A chemotherapy nurse will give it to you. It may be given on its own or with other chemotherapy drugs. During treatment, you will usually see a cancer doctor, a chemotherapy nurse or a specialist nurse. This is who we mean when we mention doctor or nurse in this information.

Before or on the day of treatment, a nurse or person trained to take blood (phlebotomist) will take a blood sample from you. This is to check it is okay for you to have chemotherapy.

You will also see a doctor or nurse before you have chemotherapy. They will ask you how you have been. If your blood results are alright on the day of your treatment, the pharmacist will prepare your chemotherapy. Your nurse will tell you when your treatment is likely to be ready.

Your nurse will give you anti-sickness drugs before you start. They give you these and chemotherapy through one of the following:

- a short thin tube (cannula), which the nurse puts into a vein in your arm or hand.
- a fine tube that goes under the skin of your chest and into a vein close by ([central line](#)).
- a fine tube that is put into a vein in your arm and goes up into a vein in your chest ([PICC line](#)).

Your nurse will give you gemcitabine as a drip (infusion) into your cannula or line over about 30 minutes. They usually run the drip through a pump, which gives you the treatment over a set time.

When gemcitabine is being given

Some people might have side effects while they are having chemotherapy.

Flu-like symptoms

Gemcitabine may cause flu-like symptoms such as feeling hot, cold or shivery, having a headache and aching. You may have these symptoms while the drug is being given or several hours later. Your nurse will tell you if this is likely to happen. They may advise you to take paracetamol. Drinking plenty of fluids will also help.

If the symptoms are severe or don't improve after 24 hours, contact the hospital.

Your course of gemcitabine

You will have chemotherapy as a course of several sessions (or cycles) of treatment over a few months. How often you have it will depend on the type of cancer you have. Your doctor or nurse will tell you more about this.

Going home

Before you go home the nurse or pharmacist will give you anti-sickness drugs to take. Take all your tablets exactly as they have explained to you.

Possible side effects of gemcitabine

[Back to top](#)

We explain the most common side effects of gemcitabine here. But we don't include all the rare ones that are unlikely to affect you.

You may get some of the side effects we mention, but you are very unlikely to get all of them. If you are also having other chemotherapy drugs, you may have some side effects that we don't list here. Always tell your doctor or nurse about the side effects you have.

Your doctor can prescribe drugs to help control some side effects. It is very important to take them exactly as your nurse or pharmacist has explained. This means they will be more likely to work better for you. Your nurse will give you advice about managing your side effects. After your treatment is over, the side effects will start to improve.

Serious and life-threatening side effects

Sometimes cancer drugs can result in very serious side effects, which rarely may be life-threatening. Your cancer doctor and nurse can explain the risk of these side effects to you.

Contact the hospital

Your nurse will give you telephone numbers for the hospital. You can call them if you feel unwell or need advice any time of day or night. Save these numbers in your phone or keep them somewhere safe.

More information about this drug

We're not able to list every side effect for this treatment here, particularly the rarer ones. For more detailed information you can visit the electronic Medicines Compendium ([eMC](#)).

Risk of infection

Gemcitabine can reduce the number of white blood cells in your blood. This will make you more likely to get an [infection](#). Your nurse can tell you when your white blood cells are likely to be at their lowest. When the number of white blood cells is low, it's called neutropenia.

Contact the hospital straight away on the contact number you've been given if:

- your temperature goes over 37.5°C (99.5°F) or over 38°C (100.4°F), depending on the advice given by your chemotherapy team
- you suddenly feel unwell, even with a normal temperature
- you have symptoms of an infection – this can include feeling shaky, a sore throat, a cough or needing to pass urine often.

You will have a blood test before having more chemotherapy. If your white blood cells are still low, your doctor may delay your treatment for a short time.

Bruising and bleeding

Gemcitabine can reduce the number of platelets in your blood. Platelets are cells that help the blood to clot. Tell your doctor if you have any bruising or bleeding you can't explain. This includes nosebleeds, bleeding gums, blood spots or rashes on the skin.

Anaemia (low number of red blood cells)

Gemcitabine can reduce the number of red blood cells in your blood. These cells carry oxygen around the body. If the number of red blood cells is low, you may be tired and breathless. Tell your doctor or nurse if you feel like this. If you are very anaemic, you may need a drip to give you extra red blood cells (blood transfusion).

Feeling sick

This may happen in the first few days after chemotherapy. Your doctor will prescribe anti-sickness (anti-emetic) drugs to help prevent or control [sickness](#). Take the drugs exactly as your nurse or pharmacist explains to you. It's easier to prevent sickness than to treat it after it has started.

If you still feel sick or are vomiting, contact the hospital as soon as possible. They can give you advice and change the anti-sickness drug to one that works better for you.

Loss of appetite

You may lose your [appetite](#) during your treatment. Try to eat small meals regularly. Don't worry if you don't eat much for a day or two. If your appetite doesn't improve after a few days, let your nurse or dietitian know. They can give you advice on getting more calories and protein in your diet. They may give you food supplements or meal replacement drinks to try. Your doctor can prescribe some of these and you can buy them from chemists.

Breathlessness

Gemcitabine can cause changes to the lungs. Always tell your doctor if you develop wheezing, a cough or a fever or if you feel breathless. You should also let them know if any existing breathing problems get worse. If necessary, they can arrange for you to have tests to check your lungs.

Changes in the way the kidneys and liver work

Gemcitabine can affect how your kidneys and liver work. This is usually mild and goes back to normal after treatment. You will have blood tests before chemotherapy to check how well your kidneys and liver are working.

Build-up of fluid

You may put on weight or your face, ankles and legs may swell because of fluid building up. Tell your doctor or nurse if fluid builds up. If your ankles and legs swell, it can help to put your legs up on a foot stool or cushion. The swelling will get better after your treatment ends.

Skin changes

Chemotherapy may affect your [skin](#). Your doctor or nurse can tell you what to expect. If your skin feels dry, try using an unperfumed moisturising cream every day. Gemcitabine can cause a rash, which may be itchy. Always tell your doctor or nurse about any skin changes. They can give you advice and may prescribe creams or medicines to help. Any changes to your skin are usually temporary and improve when treatment finishes.

Hair loss

Your hair will thin or you may lose all the hair from your head. This usually starts after your first or second cycle of chemotherapy. It is almost always temporary and your hair will grow back after chemotherapy ends. It is important to cover your head to protect your scalp when you are out in the sun. Your nurse can give you advice about coping with [hair loss](#).

Tiredness

[Feeling very tired](#) is a common side effect. It's often worse towards the end of treatment and for some weeks after it's over. Try to pace yourself and get as much rest as you need. It helps to balance this with some gentle exercise, such as short walks. If you feel sleepy, don't drive or operate machinery.

Less common side effects of gemcitabine

[Back to top](#)

Sore mouth

Your mouth may become sore and you may get ulcers. This can make you more likely to get an infection in your mouth. Gently clean your teeth and/or dentures morning and night and after meals. Use a soft-bristled or children's toothbrush. Your nurse might ask you to rinse your mouth regularly or use mouthwashes. It's important to follow any advice you are given and to drink plenty of fluids.

Tell your nurse or doctor if you have any [problems with your mouth](#). They can prescribe medicines to prevent or treat mouth infections and reduce any soreness.

Diarrhoea

Your doctor can prescribe drugs to control [diarrhoea](#). Let them know if it is severe or if it doesn't get better. Make sure you drink at least two litres (three and a half pints) of fluids every day if you have diarrhoea.

Constipation

Gemcitabine may make you [constipated](#). Drinking at least two litres of fluids (three and a half pints) every day will help. Try to eat more foods that contain fibre (such as fruit, vegetables and wholemeal bread) and take some regular gentle exercise.

Aching or pain in joints and muscles

You may get pain in your joints or muscles for a few days after chemotherapy. Tell your doctor if this happens so they can prescribe painkillers. Let them know if the pain does not get better. Try to get plenty of rest. Taking regular warm baths may help.

It is important to tell your doctor or nurse straight away if you feel ill or have severe side effects. This includes any we don't mention here.

Other information about gemcitabine

[Back to top](#)

Blood clot risk

Cancer increases the chance of a blood clot (thrombosis) and chemotherapy can add to this. A clot can cause symptoms such as pain, redness and swelling in a leg, breathlessness and chest pain. Contact your doctor straight away if you have any of these symptoms. A blood clot is serious but your doctor can treat it with drugs that thin the blood. Your doctor or nurse can give you more information.

Other medicines

Some medicines can interact with chemotherapy or be harmful when you are having chemotherapy. This includes medicines you can buy in a shop or chemist. Tell your doctor about any medicines you are taking, including over-the-counter drugs, [complementary therapies](#) and herbal drugs.

Alcohol

Gemcitabine contains alcohol. Tell your doctor, nurse or pharmacist if this is a problem for you. This treatment may affect your ability to drive or operate machinery.

Fertility

Gemcitabine may affect your fertility (being able to [get pregnant](#) or [father a child](#)). If you are worried about this, you can talk to your doctor or nurse before treatment starts.

Contraception

Your doctor will advise you not to become pregnant or to father a child during treatment. This is because the drugs may harm a developing baby. It's important to use effective contraception during and for a few months after chemotherapy. You can talk to your doctor or nurse about this.

Sex

If you have sex within the first couple of days of having chemotherapy, you need to use a condom. This is to protect your partner because there may be chemotherapy in semen or vaginal fluid.

Changes to your periods

Chemotherapy can sometimes stop the ovaries working. You may not get a period every month and they may eventually stop. In some women, this is temporary, but for others it is permanent and they start the [menopause](#).

Breastfeeding

Women are advised not to breastfeed during treatment and for a few months after. This is because there may be chemotherapy in their breast milk.

Medical and dental treatment

If you need to go into hospital for any reason other than cancer, always tell the doctors and nurses that you that you are having chemotherapy. Give them contact details for your cancer doctor.

Talk to your cancer doctor or nurse if you think you need dental treatment. Always tell your dentist you are having chemotherapy.

References and thanks

[Back to top](#)

This page has been compiled using information from a number of reliable sources, including the electronic Medicines Compendium (eMC; [medicines.org.uk](https://www.medicines.org.uk)). If you'd like further information on the sources we use, please feel free to [contact us](#).

This information was reviewed by a medical professional.