Vinorelbine (Navelbine)

1. What is vinorelbine?
Vinorelbine is a chemotherapy drug used to treat breast cancer. It’s also known by the brand name Navelbine.

2. Who might be offered vinorelbine?
Vinorelbine is used to treat people with breast cancer that has come back after previous treatment. It’s used to treat:

- Locally advanced breast cancer (also known as regional recurrence) – breast cancer that has spread to the tissues and lymph nodes (glands) around the chest, neck and under the breastbone
Secondary breast cancer – breast cancer that has spread to other parts of the body, also known as advanced, stage 4 or metastatic breast cancer

3. Before starting vinorelbine

Before starting your treatment most hospitals will arrange a chemotherapy information session. At this appointment a nurse will discuss with you how and when your chemotherapy will be given and how side effects can be managed.

You may have bloods tests and some people may have an ECG (electrocardiogram), a simple test that checks your heart rhythm. Your height and weight will also be measured, this is needed to work out the correct dose of chemotherapy for you.

Contact numbers will also be given so you know who to phone if you have any questions or concerns.

4. How vinorelbine is given

Vinorelbine can be given:

- Orally (by mouth)
- Intravenously (into a vein) in the hand or arm, over a period of 6-10 minutes

Both methods are equally effective.

You may be prescribed vinorelbine on its own or in combination with other drugs such as trastuzumab. Your treatment team will decide what dose you will need and how often.

You'll have vinorelbine for as long as your treatment team feels you're benefiting from the drug and you don't have any problems with it.

Oral vinorelbine

When vinorelbine is given orally, you may have several capsules to take together. It’s important to take them according to the instructions you’re given.

Vinorelbine capsules should be swallowed whole (not sucked or chewed) with a glass of water and with some food. Avoid taking them with a hot drink, as the capsules may dissolve in the mouth.

The capsules should be stored in the fridge.
Intravenous vinorelbine

Vinorelbine can also be given as an injection or short infusion (drip) into a vein in the hand or arm. Other intravenous methods may be used depending on factors such as how easy it is for the chemotherapy team to find suitable veins, and your preferences.

Read about the different ways chemotherapy can be given.

5. Common side effects of vinorelbine

Like any treatment, vinorelbine can cause side effects. Everyone reacts differently to drugs and some people may have more side effects than others. These side effects can usually be managed and those described here will not affect everyone.

If you’re worried about any side effects, regardless of whether they are listed here, talk to your chemotherapy nurse or treatment team.

Before starting chemotherapy you should be given a 24-hour contact number or told who to contact if you feel unwell at any time during your treatment, including at night or at the weekends.

Effects on the blood

Vinorelbine can temporarily affect the number of blood cells in the body.

You'll have regular blood tests throughout your treatment to check your blood count. Blood is made up of red cells, white cells and platelets. If the number of blood cells is too low, your next cycle of treatment may be delayed or the dose of chemotherapy reduced.

Risk of infection

Not having enough white blood cells can increase the risk of getting an infection.

Your treatment team may give you guidelines to follow for reporting signs of an infection, but generally you should contact your hospital immediately if you experience any of the following:

- A high temperature (over 37.5°C) or low temperature (under 36°C), or whatever your chemotherapy team has advised
- Suddenly feel unwell, even with a normal temperature
- Symptoms of an infection, for example a sore throat, a cough, a need to pass urine frequently or feeling cold or shivery
Before starting chemotherapy you should be given a 24-hour contact number or told how to get emergency care by your treatment team. You may need antibiotics. Sometimes your doctor may recommend injections of drugs called growth factors to stimulate the production of white blood cells to reduce your risk of infection.

**Anaemia**

Having too few red blood cells is called anaemia. If you feel particularly tired, breathless or dizzy, let your treatment team know.

**Bruising and bleeding**

Vinorelbine can reduce the number of platelets, which help the blood to clot. You may also bruise more easily, have nosebleeds or your gums may bleed when you brush your teeth. Tell your treatment team if you have any of these symptoms.

**Nausea and vomiting**

You may experience nausea (feeling sick) and vomiting (being sick), but many people will not actually be sick.

You’ll be given anti-sickness medication before the chemotherapy is given, and you’ll be prescribed anti-sickness drugs to take home to reduce nausea or stop it happening. Making sure you take oral vinorelbine with food can also help reduce nausea and vomiting.

**Cancer-related fatigue (extreme tiredness)**

Cancer-related fatigue is extreme tiredness that doesn’t go away with rest or sleep. It’s a very common side effect of breast cancer treatment and may affect you physically and emotionally. It has many causes, from psychological factors such as the stress of coping with the diagnosis, to physical ones such as the side effects of treatment or progression (growth and spread) of the cancer.

If you think you have fatigue, tell your GP or treatment team so you can be fully assessed and offered advice on how to manage your energy levels.

Find out more about managing fatigue.

**Sore mouth**
You’ll be given mouthwash to try to reduce soreness of the mouth and to try to stop mouth ulcers developing. Looking after your mouth, including your teeth and gums, is very important during treatment.

It's advisable to see your dentist for a dental check-up before chemotherapy begins and to avoid dental treatment during chemotherapy if possible.

**Bowel problems**

Vinorelbine can cause bowel problems, most often constipation.

Drinking plenty of water and eating a high-fibre diet can help make constipation less severe. If you’re constipated for more than two to three days, let your doctor know. Your specialist or GP can prescribe medication to help control it.

Sometimes vinorelbine can cause mild diarrhoea. This is usually temporary, but speak to your specialist or GP if it continues.

**Skin problems**

Vinorelbine given as an infusion can irritate the veins and surrounding skin, causing redness. If the drug leaks into the tissues around the vein (known as extravasation) it can cause damage to the skin and surrounding tissue. Therefore, it's important to let the doctor or nurse know if you notice any stinging or burning when the drug is being given.

If the infusion is causing discomfort, you may be advised to have vinorelbine capsules instead. Alternatively, intravenous vinorelbine may be given using a different type of device.

**Numbness and tingling in the hands or feet (peripheral neuropathy)**

You may have numbness or tingling in the hands and feet. This is due to the effect on the nerves and is known as *peripheral neuropathy*.

In most cases it’s mild and goes away soon after treatment stops, although in some cases it can be permanent. If it's severe, it may be necessary to reduce the dose of vinorelbine or to stop it completely.

If you have numbness or tingling, tell your treatment team so that the symptoms can be monitored.

**Hair thinning**
When used on its own, vinorelbine may cause some mild, temporary hair thinning. Very rarely, it can cause complete hair loss.

**Joint or muscle pain**
Sometimes joint, jaw or muscle pain may occur. Let your treatment team know if this happens. They may prescribe medication for pain relief.

**Liver changes**
Sometimes vinorelbine may affect how well your liver works. You’re unlikely to notice any symptoms, but your doctor may check how your liver is working using blood tests throughout your treatment.

**Other common side effects**
Other common side effects of vinorelbine include:

- Difficulty sleeping
- Headache
- Dizziness
- Taste changes

Your treatment team will be able to advise on how to manage these.

**6. Allergic reaction**
If you have an allergic reaction to vinorelbine, it will probably happen within the first few minutes of your treatment and is most likely the first or second time you have the drug. Reactions can vary from mild to severe, but severe reactions are uncommon.

You’ll be monitored closely so that any reaction can be dealt with immediately.

Symptoms of an allergic reaction include:

- Flushing
- Skin rash
- Itching
- Back pain
- Shortness of breath
- Faintness
• High temperature or chills

If you have a severe reaction, treatment will be stopped immediately.

If you have a less severe reaction, medication may be given before future treatments to reduce the risk of further reactions.

7. Blood clots

People with breast cancer have a higher risk of blood clots. Their risk is higher because of the cancer itself and some treatments for breast cancer. If the cancer has spread to other parts of the body (secondary breast cancer), this also increases the risk.

Having vinorelbine increases the risk of blood clots such as a deep vein thrombosis (DVT).

People with a DVT are at risk of developing a pulmonary embolism (PE). This is when part of the blood clot breaks away and travels to the lung. Blood clots can be harmful but are treatable so it’s important to report symptoms as soon as possible.

If you experience any of the following symptoms contact your local A&E department, GP or treatment team straight away:

• Pain, redness/discolouration, heat and swelling of the calf, leg or thigh
• Swelling, redness or tenderness where a central line is inserted to give chemotherapy, for example in the arm, chest area or up into the neck
• Shortness of breath
• Pain or tightness in the chest
• Unexplained cough (or coughing up blood)

Find out more about blood clots.

8. Sex, contraception and pregnancy

You’re advised not to become pregnant while having treatment because vinorelbine can harm a developing baby. If you haven't been through the menopause, talk to your team about the most suitable method of contraception for you. It’s still possible to become pregnant even if your periods become irregular or stop.

Men receiving vinorelbine should not father a child during treatment and up to six months after it has finished.
You can still have sex during treatment. It’s thought that chemotherapy drugs can’t pass into vaginal fluids or semen, but this can’t be completely ruled out as chemotherapy drugs can pass into the blood and some other body fluids. Most hospital specialists will advise using barrier methods of contraception, such as condoms during treatment.

Both men and women having vinorelbine should use contraception for at least three months after having their last dose of vinorelbine. Speak to your treatment team about the most suitable method of contraception for you and how long to use it for after the last dose of vinorelbine.

Find out more about how breast cancer and its treatment can affect sex and intimacy and read our tips on how to manage these changes.

**Fertility**

If you were diagnosed with locally advanced or secondary breast cancer before you started or completed a family, you may be concerned about your fertility (ability to get pregnant). Depending on your diagnosis and treatment, you may be advised not to get pregnant.

If having children of your own is important to you, and you wish to find out about any possible fertility preservation options, you can discuss this with your treatment team before starting treatment.

Find out more about fertility and breast cancer treatment.

**Breastfeeding**

You’ll be advised not to breastfeed during treatment and for at least three weeks after your last dose of vinorelbine. This is because there is a chance that your baby may absorb the drug through your breast milk, which can cause harm.

**9. Vaccinations**

If you’re planning a holiday or need to travel overseas, check with your treatment team first.

You shouldn’t have any live vaccines while you’re having chemotherapy. Live vaccines include mumps, measles, rubella (German measles), polio, BCG (tuberculosis), shingles and yellow fever.

Live vaccines contain a small amount of live virus or bacteria. If you have a weakened immune system, which you may do during chemotherapy, they could be harmful.
It's safe to have these vaccinations six months after your treatment finishes. Talk to your GP or treatment team before having any vaccinations.

If anyone you have close contact with needs to have a live vaccine speak to your treatment team or GP. They can advise what precautions you may need to take depending on the vaccination.

**Flu vaccination**

Anyone at risk of a weakened immune system, and therefore more prone to infection, should have the flu vaccine. This includes people due to have, or already having, chemotherapy. The flu vaccine is not a live vaccine so doesn't contain any active viruses. Talk to your chemotherapy team or breast care nurse about the best time to have your flu jab.

### 10. Medicines to avoid when having vinorelbine

There are a number of drugs that should not be taken with vinorelbine. Tell your treatment team about any prescribed or over-the-counter medicines you’re taking, particularly anti-coagulants (drugs used to thin the blood), anti-epileptic drugs, drugs used to treat fungal infections, or medicines that reduce your natural immune system (such as ciclosporin).

Oral vinorelbine contains sorbitol, a type of sugar alcohol. If you know you have an intolerance to sugars, tell your treatment team.

### 11. Further support

Your chemotherapy team and breast care nurse can help with any questions you have. You can also call us free on 0808 800 6000 for information and support.

On our online Forum, you can find people going through treatment at the same time as you on the monthly chemotherapy threads.

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Next planned review begins 2022