

Cancer Services - Medical Oncology Interdisciplinary Clinical Guideline

Cryotherapy for Nail Toxicity

Background:

Nail problems are a potential side effect of taxanes. In about 30% of patients receiving Docetaxel (taxotere) the nails become brittle or discoloured and in about 3 % of patients, nails may become infected and begin to fall off (onycholysis) (CCO Formulary, 2005). Patients (2%) receiving Paclitaxel (taxol) may experience nail changes and the onset of this side effect may be early or weeks to months (CCO formulary, 2005).

The nail changes may be cosmetic but they can also cause pain to the point a physician may dose reduce or a patient may quit or interrupt their treatment. Cold treatment (cryotherapy*) may prevent chemotherapy damage to the nails and skin.

Cryotherapy Procedure:

Cryotherapy*-any method that uses cold temperature to treat disease

1. Assessment using the Common Terminology Criteria for Adverse Events (Version 3.0):

1	2	3	4	5
Discoloration; Ridging; Pitting	Partial or complete loss of nail(s); Pain in nail beds(s)	Interfering with ADL	----	-----

2. Document on the Toxicity Assessment Form.
3. Prophylactically begin Cryotherapy 15 minutes before the infusion:
 - a. Cryotherapy: 15 minutes prior to infusion concluding 15 minutes after infusion
 - b. Equipment: K-basins with ice chips for fingernails and biohazard bags filled with ice chips for toenails. Comfort measures to consider include wrap a face cloth around the fingers, keeping socks on.
4. Contraindications: Raynaud's Phenomenon, Grade 2 or greater Peripheral Neuropathy.

Approved by the Breast Site 06.01.25

Reference:

Scotte F. (et al.). (2005). Multicenter study of a frozen glove to prevent docetaxel-induced onycholysis and cutaneous toxicity of the hand. *Journal of Clinical Oncology*, Jul 1, 23 (19), 4424-9.

