

# Temozolomide adverse effects

Check with your doctor immediately if any of the following side effects occur:

## Less common or rare

Amnesia

black, tarry stools

blood in the urine or stools

convulsions

cough or hoarseness

fever or chills

lower back or side pain

muscle weakness or paralysis on one or both sides of the body

painful or difficult urination

pinpoint red spots on the skin

swelling of the feet or lower legs

unusual bleeding or bruising

## Incidence not known

Abdominal or stomach pain or tenderness

blistering, peeling, or loosening of the skin

chest pain

clay colored stools

cough

decreased appetite

diarrhea

difficulty with swallowing

dizziness

fast heartbeat

headache

hives, itching, or skin rash

joint or muscle pain

nausea or vomiting

puffiness or swelling of the eyelids or around the eyes, face, lips, or tongue

red skin lesions, often with a purple center

red, irritated eyes

sneezing

sore throat

sores, ulcers, or white spots in the mouth or on the lips

tightness in the chest

troubled breathing

unusual tiredness or weakness

yellow skin or eyes

Some side effects may occur that usually do not need medical attention. These side effects may go away during treatment as your body adjusts to the medicine. Also, your healthcare professional may be able to tell you about ways to prevent or reduce some of these side effects. Check with your health care professional if any of the following side effects continue or are bothersome or if you have any questions about them:

## More common

Constipation

## Less common or rare

Anxiety

blurred or double vision

breast pain (in females)

burning or prickling feeling on the skin

confusion

diarrhea

difficulty with speaking

drowsiness

increased urge to urinate

loss of appetite

loss of muscle coordination

mental depression

runny or stuffy nose

trouble sleeping

unusual weight gain

## Bone marrow suppression

The most common side effect is [bone marrow suppression](#).

## Nausea or vomiting

The most common non-hematological adverse effects associated with temozolomide are [nausea](#) and [vomiting](#), which are either self-limiting or readily controlled with standard [antiemetic](#) therapy. These latter effects are usually mild to moderate (grade 1 to 2). The incidence of severe nausea and vomiting is around 4% each. Patients who have pre-existing or a history of severe vomiting may require antiemetic therapy before initiating temozolomide treatment. Temozolomide should be administered in the fasting state, at least one hour before a meal. Antiemetic therapy may be administered before, or following, administration of temozolomide.

## Genotoxic effects

Temozolomide is [genotoxic](#), [teratogenic](#) and [fetotoxic](#) and should not be used during [pregnancy](#). Lactating women should discontinue nursing while receiving the drug because of the risk of secretion into breast milk. One study indicated that women that have taken temozolomide without concomitant fertility preservation measures achieve pregnancy at a lesser rate later in life, but the study was too small to show statistical significance in the hypothesis that temozolomide would confer a risk of female infertility <sup>1)</sup>. In male patients, temozolomide can have genotoxic effects. Men are advised not to father a child during or up to six months after treatment and to seek advice on cryoconservation of

sperm prior to treatment, because of the possibility of irreversible infertility due to temozolomide therapy.

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## DRESS syndrome

There are minimal [reports](#) of [temozolomide](#)-induced [DRESS syndrome](#). The diagnosis can be life-threatening, which makes the [glioblastoma treatment](#) with no alternative treatment option challenging. The use of de-sensitization therapy to [temozolomide](#) has been proposed for the management of severe adverse [cutaneous drug reactions](#) <sup>2)</sup>.

Mehta et al reported a Temozolomide-induced drug rash with eosinophilia and systemic symptoms syndrome <sup>3)</sup>.

## Hepatotoxicity

### [Temozolomide Hepatotoxicity](#).

<sup>1)</sup>

Sitbon Sitruk L, Sanson M, Prades M, Lefebvre G, Schubert B, Poirot C (November 2010). "Chimiothérapie à gonadotoxicité inconnue et préservation de la fertilité: Exemple du témozolomide" [Unknown gonadotoxicity chemotherapy and preservation of fertility: example of Temozolomide]. *Gynécologie, Obstétrique & Fertilité (in French)*. 38 (11): 660-2. doi:10.1016/j.gyobfe.2010.09.002. PMID 21030284.

<sup>2)</sup>

Ambur A, Ambur L, Khan L, Nathoo R. Drug-induced hypersensitivity syndrome following temozolomide for glioblastoma multiforme and the role of desensitization therapy. *J Oncol Pharm Pract*. 2022 Apr;28(3):733-735. doi: 10.1177/10781552211062569. Epub 2021 Nov 26. PMID: 34825610.

<sup>3)</sup>

Mehta H, Gendle CS, Kumaran MS, Vinay K. Temozolomide-induced drug rash with eosinophilia and systemic symptoms syndrome. *Indian J Dermatol Venereol Leprol*. 2022 Aug 27;1-4. doi: 10.25259/IJDVL\_754\_2021. Epub ahead of print. PMID: 36332091.

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