Cancer Division

BEP Chemotherapy (3 day regimen) - Treatment for good prognosis metastatic germ cell tumour of the Testis

You have recently been diagnosed as having germ cell cancer of the testis, which has spread to other parts of the body. However, despite the fact that the tumour has spread, it remains highly curable and the blood tests, x-rays and scans that have been done to confirm that you have a high chance of cure with treatment. The standard treatment is three cycles of chemotherapy which will cure at least 90% of patients similar to you.

The internationally accepted standard form of treatment involves giving a combination of three drugs (Bleomycin, Etoposide and Cisplatin) via a drip. Each cycle will last 3 weeks (21 days) and you will have a total of three cycles. The treatment, therefore, lasts 9 weeks. The first part of the chemotherapy is given over 3 days and requires that you stay in hospital during that time. You will then need to attend the hospital on day 8 and day 15 of the cycle for an injection of one of the drugs and will see a doctor or the clinical nurse specialist for assessment prior to the chemotherapy.

At the end of the final cycle of treatment, you will have a repeat CT scan to assess response to the chemotherapy and will then be seen in the clinic the following week to discuss follow up care.

Because the drugs we use to treat the cancer are powerful, they have side effects. The most serious potential effect is a reduction in the number of your blood cells. It affects your red blood cells so you might become anaemic leaving you feeling tired and short of breath. Your platelet count can also fall which leaves you more prone to bruising and bleeding problems. The most serious potential complication is a reduction in the number of white cells which you have to fight infection. This can leave you at risk of serious infection which can be life threatening, particularly if not appropriately managed. More information will be given to you about this when you are admitted for chemotherapy so you know what to do to reduce the risk of serious complications. Please ensure you understand it fully and take it home with you. If unsure, please ask before you leave.

The other potentially very serious complication is the effect of Bleomycin on your lungs. Very rarely this can be life threatening, so you will have regular chest x-rays and examinations during your treatment and, if there is any sign that your lungs are being affected, we will discontinue the Bleomycin.
The drugs cause nausea and you will be given medication along with the chemotherapy to stop you feeling sick. They also cause temporary hair loss which you will notice approximately three weeks into treatment. Loss is relatively rapid but your hair will regrow once the chemotherapy treatment has been completed.

The drugs can cause tingling in the hands and feet, which can worsen once chemotherapy has finished. It can persist for several months, but should resolve slowly over time. Your hearing may be affected and this will be tested before you start the treatment in case of any subsequent problem. It also carries the risk of injury to the kidneys, though this is rare.

Your fertility will be reduced following the treatment but in most cases this will recover. Unfortunately, 30% of men remain infertile following this combination chemotherapy and, in order to cover this eventuality, you will be given the opportunity to bank sperm, before the chemotherapy begins.

You can be left feeling generally unwell and tired once the chemotherapy has finished but will gradually recover over a period of weeks. Most people tolerate this particular chemotherapy well and most side effects are controlled with medication.

In the long-term, patients who receive BEP chemotherapy are at an increased risk of developing cardiovascular disease and/or second cancers as a result of the treatment. The risk is almost double that of people who have not received BEP chemotherapy and is equal to that of lifelong smoking. This will be discussed with you in more detail once you have finished the treatment so we can look at how you can help reduce the risk from other factors in your life.

As stated above, the cure rate for your type of cancer with this chemotherapy is high. We are always trying to improve treatment and the doctor may discuss details of current trials with you which are an alternative to the standard treatment. If you have any questions regarding these, or the standard treatment, please do not hesitate to ask.

Your contact in the department is Linda Bavister, Clinical Nurse Specialist on 01223 256453 bleep number 152/367 (answerphone 01223 256676).
Privacy & Dignity
Same sex bays and bathrooms are offered in all wards except critical care and theatre recovery areas where the use of high-tech equipment and/or specialist one to one care is required.

We are a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

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Document history
Authors Clinical specialist nurse (testicular tumours)
Pharmacist
Department Oncology Centre, Box 193, Addenbrooke’s Hospital, Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ www.cuh.org.uk
Contact number 01223 216551/2
Publish/Review date 22/01/2013 (Reviewed without change:26/02/2019)
File name PIN1381_BEP_3days
Version number/Ref PIN1381 Rev.4 (MediaID = 12164)