

## Your Cancer Center care team.

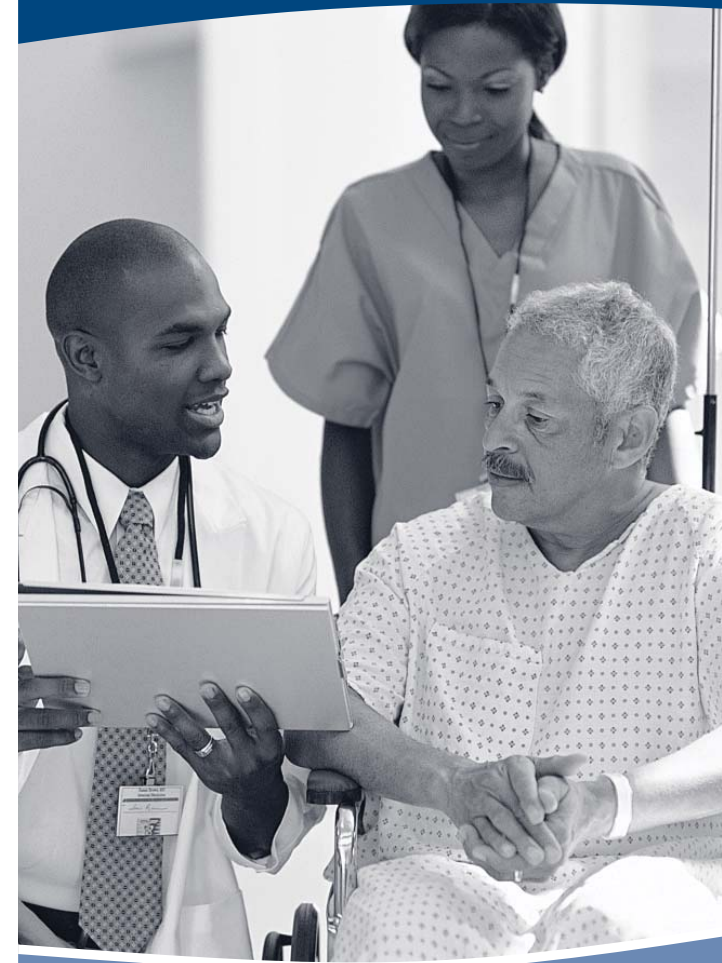
The entire Oncology Special Care Unit staff is trained in the administration of IL-2 therapy and carefully monitors each patient during his or her treatment cycles. The IL-2 cancer care team includes oncology-certified registered nurses and a medical oncologist. The nurse-to-patient ratio is usually one to one. To ensure greater physical, emotional and spiritual well-being, patients may also access the services of an Our Lady of the Lake chaplain, social worker, dietitian or physical therapist.

## Talk to us.

We want to answer your questions about Interleukin-2 therapy and any other cancer treatment options offered at Our Lady of the Lake Cancer Center. Please feel free to contact us at (225) 765-7830.

## How to find us.

Our Lady of the Lake Cancer Center is located on the fifth floor in St. Mary's Tower.



## Interleukin-2 Therapy Program



OUR LADY OF THE LAKE

CANCER CENTER

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*Franciscan Missionaries of Our Lady Health System*

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## Boosting your body's immune system with Interleukin-2.

Our Lady of the Lake is fully engaged in the fight against cancer. And when promising new treatment methods are developed, it is our commitment to bring these options — and as much information about them as possible — to patients in need and their doctors.

Today, *immunotherapy* is now regarded as a fourth major method of cancer treatment, joining surgery, chemotherapy and radiation. This highly advanced and specialized option helps the cells in your own immune system become more effective against cancer, and Our Lady of the Lake Cancer Center is pleased to offer **Interleukin-2** immunotherapy to eligible patients. Our Cancer Center is accredited by the Foundation for the Accreditation of Hematopoietic Cell Therapy (FACT) and by the American College of Surgeons.

### How Interleukin-2 therapy works.

Interleukin-2 (IL-2) is a hormone produced and secreted by **lymphocytes** — small white blood cells that help make up the body's natural defense system. It is believed that lymphocytes fight infections and cancer. A medical form of IL-2, administered into the bloodstream, can stimulate the production of more lymphocytes, as well as trigger various **defender cells** (such as T cells) into become cancer-killing cells.

### Determining eligibility for the program.

The Cancer Center provides IL-2 therapy to approved patients with melanoma or renal (kidney) cancer that has metastasized (spread to other areas of the body). These particular diseases usually respond poorly to radiation and chemotherapy, but are a good match for IL-2's ability to reach many places within the body at once. IL-2 therapy is approved by the U.S. Food and Drug Administration (FDA) and is not considered experimental for kidney cancer or malignant melanoma.

### Recommended course of treatment.

IL-2 therapy is administered intravenously (into the bloodstream) through a central line (catheter) in the upper chest or neck, generally every eight hours over the course of five days, up to a total of 14 doses. After a nine-day rest period at home, patients return for a second five-day treatment of up to 14 doses. This 19-day course is called a *cycle*. Patients normally undergo two cycles, separated by approximately four weeks of rest. Depending on the results of treatment, additional cycles may be given.

During each five-day treatment period, patients are hospitalized in the Oncology Special Care Unit. This special area of the Cancer Center is designed for



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patients receiving peripheral stem cell transplants, high-dose immunotherapy and other treatments that require closely monitored care in a highly controlled environment.

### Possible side effects.

As with most intensive treatment regimens, IL-2 therapy patients will usually encounter some side effects. The most common include capillary leak syndrome, which is swelling caused by fluid leakage from blood vessels into surrounding tissue, and flu-like symptoms, such as fever, chills and muscle and joint pain. Most side effects happen only during treatment, are quite manageable with medication and usually disappear within three days of the end of therapy.