



Patient Information Sheet

Clofarabine (marketed as Clolar)

This is a summary of the most important information about Clolar. For details, talk to your child's health care professional.

What is Clolar?

Clolar is a medicine used in children, ages 1 to 21, to treat a type of leukemia called relapsed or refractory acute lymphoblastic leukemia (ALL), only after at least 2 other types of treatment have failed. ALL is a cancer of the white blood cells. White blood cells fight infection in the body.

Clolar can reduce the number of leukemia cells in the blood. At this time we do not know if Clolar will help a child with ALL live longer.

What are The Risks?

Clolar can cause serious side effects such as:

- **Tumor lysis syndrome (TLS).** Clolar quickly kills leukemia cells in your child's blood. Your child's body may react to this. Symptoms include fast breathing, fast heartbeat, low blood pressure, and fluid in the lungs. TLS is very serious and can lead to death if it is not treated right away.
- **Bone marrow problems (suppression).** Clolar can stop your child's bone marrow from making enough red blood cells, white blood cells, and platelets. Serious side effects that can happen because of bone marrow suppression include severe infection (sepsis), bleeding, and anemia.
- **Effects on Pregnancy and breastfeeding.** Girls and women should not become pregnant or breastfeed during treatment with Clolar because Clolar may harm the baby. Girls and women who can become pregnant should avoid becoming pregnant during treatment with Clolar.
- **Dehydration and low blood pressure.** Clolar can cause vomiting and diarrhea which may lead to low body fluid (dehydration). Signs and symptoms of

dehydration include dizziness, lightheadedness, fainting spells, or decreased urination

- **Other side effects.** The most common side effects with Clolar are stomach problems (including vomiting, diarrhea, and nausea), and effects on blood cells (including low red blood cells count, low white blood cell count, low platelet count, fever, and infection. Clolar can also cause fast heartbeat and can affect the liver and kidneys.

What Should I Tell My Child's Health Care Professional?

Before your child starts receiving Clolar, tell the health care professional about all of his or her medical conditions, including if your child:

- is pregnant or planning to become pregnant
- is breast-feeding
- has liver problems
- has kidney problems

Are There Any Interactions With Drugs or Foods?

Tell your child's health care professional about all the medicines your child takes, including prescription and non-prescription medicines, vitamins, and herbal supplements. Clolar and other medicines may affect each other, causing serious side effects.

How Does My Child Receive Clolar?

- Clolar is given by I.V (in the vein) infusion.
- Your child will receive Clolar over a 2 hour infusion every day for five days. This cycle will repeat every 2 to 6 weeks.
- Your child's health care professional will do blood tests to monitor his or her blood cells, kidney function, and liver function.

Clolar FDA Approved 2004

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