[0007a] In one aspect, provided herein is a use of a pharmaceutical composition in the manufacture of a medicament for treating chemotherapy-induced diarrhea (CID) in a human subject undergoing chemotherapy and in need thereof, the composition comprising an effective amount of crofelemer to treat CID.

[0007b] In one aspect, provided herein is a use of a composition in the manufacture of a medicament for treating CID in a human subject undergoing chemotherapy for HER positive breast cancer, wherein the composition comprises crofelemer at a dose of 125 mg twice per day, wherein the chemotherapy is trastuzumab, pertuzumab, docetaxel, paclitaxel, or neratinib, or a combination thereof, with or without carboplatin.

[0008] In one aspect, provided herein are methods of treating CID in a human subject undergoing chemotherapy, particularly for cancer treatment, comprising administering to a subject in need thereof a composition comprising an effective amount of a proanthocyanidin polymer composition from *C. lechleri*, preferably crofelemer, to treat, ameliorate or prevent CID. In certain embodiments, the crofelemer is an enterically protected formulation. In certain embodiments the chemotherapy is administered to treat, ameliorate, manage or prevent cancer.

[0009] According to certain embodiments, crofelemer may be administered in combination with other chemotherapy agents.

[0010] In one embodiment, the crofelemer is administered at the same time as administration of chemotherapy to reduce or delay the onset of CID.

[0011] In certain embodiments, the subject exhibits Grade 1, Grade 2, Grade 3 or Grade 4 diarrhea in accordance with the Common Toxicity Criteria from the National Cancer Institute.

[0012] In one embodiment, the crofelemer is administered before administration of chemotherapy to reduce or delay the onset of CID.

[0013] In one embodiment, the crofelemer is administered after administration of chemotherapy to reduce the onset of or treat CID.

[0014] In certain embodiments, the crofelemer is administered to reduce the risk, incidence or severity of CID so that the human subject can tolerate a particular chemotherapy agent with CID as a side effect or a higher dose of a chemotherapy agent that has CID as a side effect.

[0015] In one embodiment, the chemotherapy agent is selected from alkylating agents, anthracyclines, cytoskeletal disruptors (taxanes), epothilones, histone deacetylase inhibitors, inhibitors of topoisomerase I, inhibitors of topoisomerase II, kinase inhibitors, nucleotide analogs and precursor analogs, peptide antibiotics, platinum-based agents and retinoids.

[0016] In one embodiment, the chemotherapy agent comprises one or more tyrosine kinase inhibitors. The tyrosine kinase inhibitor (TKI) have a target selected from epithelial growth factor receptor (EGFR), VEGFR (e.g, VEGFR-1, VEGFR-2, and/or VEGFR-3); AXL, RET, TYRO3, MER, KIT, TRKB, FLT-3, CSF-1R, anaplastic lymphoma kinase (ALK), ROS-1 (c-ros); hepatocyte growth factor receptor (HGFR), c-Met, RON, platelet derived growth factor