



Royal Berkshire
NHS Foundation Trust

Radiotherapy for cancer of the oesophagus (gullet) or stomach

Information for patients

What happens next?

In the clinic today, you and your doctor have decided that you will have radiotherapy treatment for your cancer. This booklet discusses what you can expect during and after your treatment and gives some general advice and information.

You will be given time to discuss any concerns with the radiographer (a person trained to give radiotherapy) at your planning appointment.

Please note that your appointments could be at either the Royal Berkshire Hospital or at the Bracknell Healthspace, depending upon availability.

Planning treatment

We will contact you by telephone to arrange an appointment for the CT scan that forms part of the planning of your radiotherapy treatment and which can take up to two hours. During this call, please mention if:

- You have a pacemaker or other implanted cardiac device as radiotherapy can affect some types of cardiac device.
- You have not had a blood test taken in the last 12 weeks as we may require you to take one prior to the planning scan date.
- You have any problems with travel or appointment times and we will do our best to help you.

If you have any questions regarding your CT scan appointment, then you can contact us on the number below:

Telephone: 0118 322 7872

Email: Radiotherapy.planning@nhs.net

Monday-Friday 8.30am-4.30pm

The benefits of radiotherapy for oesophageal cancer

- Radiotherapy can be given with or without chemotherapy to control the growth of the tumour. This can reduce the chance of the cancer spreading or even in some cases, lead to a cure. This type of radiotherapy is called radical (chemo-) radiotherapy. It is usually given as 20-25 daily treatments over 4 to 5 weeks.
- Radiotherapy can be given after surgery to kill off any tumour cells that have been left behind. This is called adjuvant radiotherapy. This is usually given as 25 daily treatments over 5 weeks. Adjuvant radiotherapy may also be given with chemotherapy.
- Radiotherapy can be given to treat symptoms related to the cancer, such as swallowing difficulties, pain or bleeding. Radiotherapy can relieve these symptoms by shrinking the tumour. It may be possible to control the growth of the cancer for a while with radiotherapy but it is not usually possible to get rid of it completely. This type of radiotherapy is called palliative radiotherapy. It is usually given as 5 or 10 daily treatments.

When recommending radiotherapy, your doctor will have taken into account the risks and benefits of the treatment. Although there are risks and side effects, it is felt that the advantages for you outweigh the disadvantages.

Pregnancy

Patients with child-bearing capacity must not be pregnant or become pregnant at any time during a course of radiotherapy as radiation can be harmful to the unborn child. It is important to let the radiographers know if you have missed a period or suspect that you may be pregnant before you are exposed to any radiation.

Patients with child bearing capacity will be asked to confirm their pregnancy status prior to planning the radiotherapy and again on the first day of radiotherapy treatment. This applies to all patients with

child bearing capacity between the ages of 10-56 years and is a legal requirement.

Planning your radiotherapy treatment

Before you can start radiotherapy treatment, it needs to be carefully planned. The Radiotherapy Department staff will explain what to expect and answer any of your questions.

Once you have been referred for radiotherapy, a member of the radiotherapy staff will telephone you with an appointment to attend either the Radiotherapy department in the Berkshire Cancer Centre (BCC) or the Bracknell Healthspace for a CT scan, which is the first stage in planning your treatment. If you have any problems with travel or appointment times, please mention these when we contact you about your CT scan appointment. We will do our best to help you. You may also provide a car registration number if you or a friend or relative drives you to the hospital for your appointments, this will ensure you receive free parking in the multi-storey carpark and the carpark location on London Road. Please do this at the Radiotherapy Reception desk. Whilst you have access to free parking, it does not guarantee a parking space. Parking availability at the Royal Berkshire Hospital can be very limited.

At the start of your planning appointment you will meet our specialist team who will explain what is going to happen and answer any of your questions. Our planning and treatment teams are comprised of male and female radiographers. You may also meet radiography students and apprentices involved with the delivery of your treatment under close supervision as the Berkshire Cancer Centre is a training centre.

You will have a CT scan of the area to be treated to help the Radiotherapy Team plan the exact area to be treated. During the scan you will lie on the CT couch undressed down to the waist.

You must stay very still in a particular position for the scan and radiotherapy treatment. The radiographers will use simple equipment to position you comfortably.

If you are having treatment to your upper oesophagus you may need a mask on the part of your body being treated to keep you still. If a treatment mask is necessary for you, it will be made at the same planning appointment, but before your CT scan. You will meet our specialist team who will explain what is going to happen and answer any of your questions. Once complete, you will wear the mask during the CT scan and each day for your radiotherapy treatment.

We ask that you do not eat or drink for 2 hours prior to your planning CT scan and each time you come for treatment.

This is to try to ensure that your stomach and oesophagus are relatively empty, which can improve the accuracy of treatment and limit side effects.

During the scan you will move through the

scanner; however, you will not see or feel anything. You can breathe normally throughout the scan. The scan will take approximately 2 minutes.

You may require an injection of contrast (dye) for the scan. Not everyone will have this but for some it is helpful. This involves having a cannula (a bendy tube) inserted into your arm or hand using a needle.



CT scanner with wing board and knee rest

The contrast injection may create a very warm feeling for about 20 seconds. This is often concentrated around the pelvis and groin area spreading down the thighs. It may also give you a metallic taste in your mouth. These are all common and disappear quickly.

The cannula will be removed about 30 minutes after your CT scan is finished. **Please let the team know before your scan if you have previously had a reaction to intravenous contrast.**

Your first radiotherapy treatment

When you arrive for your treatment, please check in at the treatment area reception. On your first treatment you will have a chat with one of the team of radiographers who will be treating you. They will:

- Check your details.
- Give you a list of the first week's appointment times.
- Discuss the treatment procedure.
- Outline the potential side effects.
- Answer any questions you may have.

Sometimes, this conversation will happen the day before your first appointment, on the telephone.

What happens during treatment?

Each time you attend we need to make sure we are treating the correct person. As you enter one of the treatment rooms, the radiographers will ask you to identify yourself by giving your name, date of birth and first line of your address. The radiographers will check this information against your electronic treatment record.

You may be asked to change into a hospital gown before treatment. Alternatively, you may bring your own dressing gown with you.

The radiographers will take you into the treatment room and position you on the treatment couch in the same position as you were for your planning scan.

Our treatment machines have a camera system attached which uses infra-red lights to help us get you into the correct position and will also detect movement during the radiotherapy. We will need you to remove your clothing from the waist up in order to use the camera system. You may feel a bit exposed, but it will only be your treatment team that is present with you. You will not feel anything from the infra-red light and it will not affect or hurt your eyes so you can keep them open if you wish. Please do let us know if you are light sensitive.

All the measurements for your treatment will then be set and checked.

This preparation may take quite a bit of time, and is often longer than the treatment itself. As part of this preparation, you will hear the radiographers checking some numbers and measurements. This is how they check your position. Once the radiographers are happy with your position, the treatment machine and imaging equipment will then be moved into position. The treatment machine will not touch you. It is **very important** you remain still, breathing and swallowing as normal during your treatment, as during the CT scan.

The radiographers will leave the room, take a scan to check your treatment position and then start the treatment. Although you are alone in the room, you will be monitored on a TV via cameras during your treatment. If you need a radiographer during the treatment, raise your hand clearly and a radiographer will stop the machine and come into the room.

The machine will move around you and give you treatment from different angles. This is controlled by the radiographers outside. They may enter the room during the treatment. If so, please try to keep as still as possible. You will not feel anything during the treatment, but you will hear a buzzing noise as the treatment is delivered.

The total time of your first treatment will be approximately 30 minutes. Following treatments should take between 10 and 15 minutes.

Once we have started your course of radiotherapy treatment, we aim to complete it without any breaks or days off. Treatment is usually given Monday to Friday. Sometimes, treatment is given on bank holidays.

Due to servicing of the machines it may sometimes be necessary to treat you on a different machine. Please be assured that all the machines give the same treatment.

It is very important that you do not miss treatment days as this may make your treatment less effective. If you feel you are unable to attend for any reason please discuss the problem with a radiographer, or phone your Upper GI cancer nurse specialists.

After treatment

Radiotherapy can cause side effects due to its effect on normal cells. Side effects and their intensity will vary from patient to patient – everyone is different and reacts differently to the treatment. You may notice one or more side effects gradually developing during the course of treatment but it is rare to experience all of these side effects. Most side effects will gradually start from approximately 1-2 weeks into your course of treatment and may continue for 2-3 weeks after your treatment is completed.

Radiotherapy does not make you radioactive and it is perfectly safe for you to be with other people, including children, after your treatment.

Possible side effects

- **Tiredness:** You may feel tired, especially towards the end of your treatment and this could continue for up to 6-8 weeks after treatment finishes. Try to pace your activities during the day and have a sleep or nap if needed. There is no reason why you shouldn't continue with your usual daily activities as you feel able.
- **Problems with swallowing:** Towards the end of your course of treatment, radiotherapy can make the oesophagus or stomach inflamed or sore, which can result in indigestion, heartburn or difficulty in swallowing. Tell your doctors, radiographers or specialist nurses if you have problems swallowing, as they can arrange to give you medication and painkillers to help. Some of these medicines are only available through the hospital but other painkillers can be obtained from your GP as well.
It may be uncomfortable to drink very hot or very cold drinks. Some foods may also become more difficult to manage. If you don't feel like eating, or have problems with swallowing, you can replace meals with nutritious, high-calorie drinks. These are available from most chemists and can be prescribed by your GP. We may also be able to arrange for you to speak to a dietitian, for advice about the best types of food to have. The soreness will get better by itself, but often takes a couple of weeks after treatment has finished.
- **Skin reaction:** One of the side effects that you may experience from the treatment is a skin reaction in the area we are treating. This begins as a mild reaction similar to sunburn and may become dry and itchy.
To reduce the skin reaction, we advise that:
 - After showering or gentle washing, towel dry the treatment area by patting not rubbing the skin; ideally, allow the skin to dry naturally.
 - Apply moisturising cream twice a day to the treatment area, but avoid applying cream 1 hour before treatment.

- Try to keep natural fibre clothing against your skin.
- Avoid applying hot or cold heat sources to the treatment area.
- Avoid exposing the treatment area to the sun.
- If you experience any itching in the treatment area, please let the radiographers know and they will advise you further.
- **Pain or discomfort:** If you experience any pain or discomfort, you can take painkillers, such as paracetamol, following the dosage instructions on the packaging.
- **Cough:** The radiotherapy may cause a cough during treatment. If troublesome, this can be treated with cough medicine prescribed by your oncologist. A tickly cough may be eased by sipping fluids.

Longer term side effects

- **Lung inflammation (pneumonitis):** If a lung has been in the area of treatment, radiotherapy can cause lung inflammation, which usually occurs 2-3 months after finishing the treatment. This can cause a cough, breathlessness or no symptoms at all. If you do develop these symptoms you should let your cancer team know, as you may benefit from medication. Breathing exercises can also help.
- **Lung fibrosis:** Your lung may lose some elasticity following radiotherapy and this may cause a decrease in your lung volume and cause you to become short of breath more quickly than you may have experienced previously.
- **Oesophageal stricture:** Some patients experience a narrowing of the oesophagus (gullet) after radiotherapy. Any difficulty in swallowing should be reported to your cancer team so they can make a plan to help with the symptoms.
- **Other longer term side effects:** your cancer team will discuss any other long term side effects which may apply to you.

Please ask your team of radiographers or your Upper GI specialist nurse if you have any questions or concerns. It may help to write them down and discuss them when you next visit the hospital.

Contact details

Upper Gastrointestinal (UGI) Nurse Specialists: 0118 322 7748

Radiotherapy: 0118 322 7872 (8.30am-4.30pm)

Email: radiotherapy.planning@nhs.net

Berkshire Cancer Centre Clinic: 0118 322 7890 (9am-5pm)

Macmillan Cancer Information Centre: 0118 322 8700

Further information

- Macmillan Cancer Support 0808 808 2020 www.macmillan.org.uk
- Oesophageal Patients Association 0121 704 9860
www.opa.org.uk
- Oxfordshire Oesophageal and Stomach Organization
www.ooso.org.uk
- Royal Berkshire NHS Foundation Trust Patient Advice and Liaison Service (PALS) 0118 322 8338 or email
PALS@royalberkshire.nhs.uk
- Macmillan – Radiotherapy for oesophageal cancer
<https://www.macmillan.org.uk/cancer-information-and-support/treatments-and-drugs/radiotherapy-for-oesophageal-cancer>

Notes

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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BCC Radiotherapy

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