



Royal Berkshire
NHS Foundation Trust

Radiotherapy to the pelvis for gynaecological cancers

What happens next?

In the clinic today, you and your doctor have agreed that you are going to have radiotherapy treatment for your cancer. This booklet explains 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 first appointment.

The Berkshire Cancer Centre is a training centre, so you may meet radiography students who may be involved with the delivery of your treatment under close supervision.

Planning treatment

You will be contacted by telephone to arrange an appointment for the CT scan that forms part of the planning of your radiotherapy treatment. You are likely to be in the department for up to 2 hours. During this telephone call please mention if:

- You have not had a blood test taken in the last 3 months as we may require you to take one prior to the planning scan date.
- You have been admitted into hospital since your last blood test was taken.
- You are diabetic.
- You have any kidney problems.

If you have not been called by the Radiotherapy Planning Department within a week of today's appointment, then you can contact us on the number below, leaving a message on the answer phone if asked.

Telephone: 0118 322 7872

Monday-Friday 8.30am-4.30pm

If you have any problems with travel or appointment times, please mention these when you are contacted about your planning scan appointment and we will do our best to help you. Please allow two hours for this planning appointment.

What are the benefits of radiotherapy?

Radiotherapy works by using high energy x-rays to kill cancer cells. Our bodies consist of different cells and all cells have the ability to divide and grow. If radiation hits a cell that is dividing, it will be damaged. Unlike normal cells, cancer cells are much less able to repair the damage, meaning that more of them will be destroyed.

Depending on the nature of your illness, you will have been prescribed between **25 and 28 treatments**. Treatment will be given daily and your oncologist will discuss with you the number of treatments you need.

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 those with child-bearing capacity between the ages of 12-55 years and is a legal requirement.

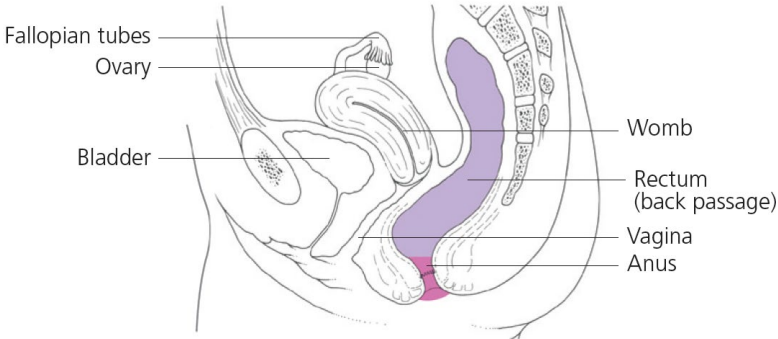
Consent to treatment

After discussing your treatment options with you your doctor will complete a consent form. You will be asked to sign this form once you have had some time to think about these treatments, your signature confirms that you are willing to continue with this treatment plan.

The areas being treated

This diagram may be useful to help you understand where your cancer is and the area to be treated with radiotherapy. Your doctor may draw on it to help explain your treatment.

Female pelvis - side view



Chemotherapy

Your doctor may recommend some chemotherapy as well as radiotherapy. Chemotherapy is the use of drugs to treat cancer. If your doctor feels you might benefit from this treatment, he or she will discuss this with you. The staff will give you a leaflet with specific information about the type of chemotherapy that you are going to have.

CT scan – your planning appointment

Before the scan starts, one of the radiographers will explain what is going to happen and answer any questions. You will be required to have a comfortably full bladder for this procedure; however, you will be told how and when to do this by the radiographers. Tampons and menstrual cups must be removed prior to the CT scan.

During your CT scan you will lie on your back on the CT couch. The radiographers will draw some pen marks on your pelvis/ abdomen with a washable pen. Some markers are then placed on your skin which will show up on the scan. Measurements are then taken to record the position for treatment. The radiographers will then leave the room to

start the scan. 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. It will not hurt but it is very important that you stay very still during the scan. The radiographers are watching you throughout the whole procedure.

The final part of the planning procedure is to tattoo 3-4 points around your pelvis or abdomen. This involves pricking the skin with a needle, which may be a bit uncomfortable. The tattoos are very small, pinpoint sized permanent black marks, which will allow the radiographers to make sure exactly the same area gets treated each time.

Contrast injection (dye)

The doctor may have asked for you to have an injection of contrast for the scan. Not everyone will have this but for some patients it is helpful as it shows more detail.

You may have had an injection of contrast for scans before. It involves having a cannula, which is bendy tube, inserted into your arm or hand using a needle. The needle is only used to position the cannula and is removed once the cannula is in place. The cannula that is left in your vein is there to inject the contrast through. The radiographers will let you know when the injection is about to start.

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 side effects and disappear quickly.

The cannula will be removed about 30 minutes after your CT scan is finished.

If you have had an allergic reaction to contrast dye before, you must tell the radiographers before your scan.

After your CT scan you will be given the date and time for your treatment appointment. This will be approximately 2-3 weeks after your CT scan. This allows us to use your CT scan images to produce a computerized plan of your treatment.

You will be given a parking permit if you or a friend or relative drives you to the hospital for your appointments. You will also be shown where to report for your first treatment appointment.

Your first radiotherapy treatment

When you arrive for your treatment, please put your appointment card in the box in your treatment waiting area. A member of the radiotherapy team will call you in for your treatment.

On your first treatment you will have a chat with a radiographer 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.
- Tell you which day your doctor/ review radiographer will see you during the treatment.
- Answer any questions you might have.

What happens during treatment?

Each time you attend the department for treatment we need to ensure we are treating the correct person. As you enter one of the treatment areas we will ask you to identify yourself by telling radiographers your name, date of birth and first line of your address. The staff will check this information against the treatment sheet that has your radiotherapy prescription.

You will be positioned on the treatment couch as you were for your planning scan and you will need to have a full bladder for this and every subsequent treatment. 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 to remove your clothing from the waist down 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 be set and checked. The machine will then move to the first treatment position. The radiographers then leave the room to deliver your treatment. During the radiotherapy treatment it is very important you remain still, breath normally, as you did during CT scan.

During your first 3 treatments we will take a CT scan to confirm your treatment position before the treatment. This is then repeated weekly or more frequently as required. These scans are used for position checking only. They do not show us how the treatment is working. The radiographers check all the details of your treatment plan before going out of the treatment room as they operate the machine from outside of the treatment room. Although you are alone in the room, we will be watching you on CCTV. If you need a radiographer during the treatment, raise your hand clearly and a radiographer will stop the treatment and come into the room. You will not see or feel any thing during the treatment but you will hear a buzzing noise as the treatment is delivered.

The total time of your first treatment will be approx 30 minutes. Subsequent treatments should take between 10 and 15 minutes. Once we have started treatment we aim to go through it without any breaks or days off. However, we know that circumstances do sometimes arise where either you cannot come for treatment or for technical reasons (e.g. a machine breakdown) we are not able to deliver to the original schedule. If any treatments are missed, then they will be added to the end of the course. This will not change the effectiveness of treatment and in the event of repeated delays you will be given more information. If there are any short notice changes of appointments times we ask for your understanding and patience while staff work hard to rearrange your appointment.

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

After treatment

Possible side effects

Side effects and their intensity will vary from patient to patient – everyone is different and reacts differently to treatment. It is important to let the radiographers know of any side effects you experience.

Most side effects will gradually start from approximately 2 weeks into your course of treatment and may continue for 2-3 weeks after your treatment is completed.

Skin reaction:

You may experience a skin reaction on the area we are treating. This begins as a mild reaction similar to sunburn and may become dry and itchy. In some cases, the reaction may become more severe, similar to bright red sunburn. A reaction is quite likely in the natural skin folds, for example in the groin area.

To reduce the skin reaction, we advise that you:

- Apply any moisturising cream twice a day to moisturise the treatment area although you should avoid applying the cream one hour before your treatment. You should avoid creams containing Sodium Lauryl Sulphate.
- Only use non-perfumed soaps such as simple soap or baby soap in the treatment area.
- Towel dry the treatment area by patting not rubbing the skin, ideally, where possible, allow skin to dry naturally.
- Avoid applying hot or cold heat sources to the treatment area.
- Avoid exposing the treatment area to the sun.
- Try to keep natural fibre clothing against your skin.

If you experience any itching in the treatment area please let the radiographer know and you will be referred to review radiographer for guidance.

You may find that you lose some of the hair in the area being treated. This usually grows back but sometimes hair loss can be permanent.

If you experience any pain or discomfort, you can take painkillers, such as paracetamol, following the dosage instructions on the packaging.

Tiredness:

Radiotherapy can make you feel tired as can the anxiety and travelling for the treatment. The tiredness may start whilst you are having treatment and continue for a number of weeks after the treatment has finished. Many patients continue to work throughout their treatment but if tiredness becomes a problem you may need to take time off work.

If necessary, you should allow extra time for a rest, for example an afternoon nap. If possible spread your chores out over the week.

There is no reason why you shouldn't continue with your usual daily activities if you feel able and many people find it beneficial to maintain gentle exercise each day throughout their course of radiotherapy.

Keeping hydrated by drinking 6-8 cups of water per day, limiting caffeine such as tea and coffee (or replace with decaffeinated versions) can also help to keep you alert.

Urinary symptoms:

During your treatment the sensitive lining of your bladder may become irritated by the treatment. This may cause a burning feeling when you pass urine. You may need to pass urine more frequently and with a greater sense of urgency. This usually improves when you have finished your treatment. This can be helped by ensuring you increase your fluid intake but try and avoid excess tea, coffee and alcohol.

Some patients find that drinking cranberry juice and lemon barley helps to settle this irritation. If you are taking the drug Warfarin, avoid cranberry juice as it can have an effect on the drug.

If the pain increases or you are unable to pass urine you must tell the radiographers as soon as possible.

Changes in bowel habits:

Changes may involve the need to go urgently and frequently, diarrhoea, straining, general feeling of discomfort in the rectum, bleeding or mucus from the bottom. These symptoms may be caused by the radiotherapy affecting healthy cells, making them irritated, sore and inflamed (proctitis).

Nausea:

Very occasionally you may feel sick during your radiotherapy treatments, your taste changes or you go off your food. This is more likely to happen if you are having chemotherapy. Let the nurses or doctors looking after you know because they can suggest things that may help.

Vaginal side effects:

This treatment causes infertility which is permanent and very likely to induce the menopause during the next 3 to 4 months after treatment in women who are still having regular periods. Your doctor may advise you to start hormone replacement therapy (HRT) if your symptoms are troublesome.

If infertility is an issue for you and your partner, please let the doctor who is planning your treatment know so that this can be discussed further with you. If appropriate they can arrange for you to see a fertility specialist urgently.

Radiotherapy treatment can affect the vagina causing changes, these include: vaginal scarring (fibrosis), shortening and tightening of the vaginal space (stenosis) and the walls of the vagina may stick together (adhesions). To prevent these occurring the radiographers will explain the use of vaginal dilators towards the end of treatment. An information sheet about this will also be given to you. Some long term side effects that may occur less frequently are development of a small hole in the vaginal wall (fistula).

You must make sure you avoid using tampons or menstrual cups throughout your course of radiotherapy treatment.

Sexual relations:

During your treatment with radiotherapy, the top of your vagina can become inflamed and women may find intercourse uncomfortable. We recommend that you do not have intercourse while you are having radiotherapy and for at least 2 to 3 weeks afterwards to allow the area to heal. However, a course of radiotherapy is the equivalent of a major operation, and it may be some months before you feel interested in the physical aspect of your relationship and your vagina is fully healed and comfortable. Many women find that their vagina is a little dry and at first, it may be helped by using a lubricant such as Replens for day-to-day dryness and/or Sylk lubricant during intercourse or with a dilator. Both Sylk and Replens can be purchased from pharmacies or are available on prescription. If these problems last for months after treatment, please discuss this with your doctor at the follow-up visits as we would like to help you get back to your normal life-style. Sex is not harmful to you and will not make the cancer return.

Radiotherapy videos

The Trust has produced a set of useful videos explaining the process for people undergoing radiotherapy treatment.

Visit <https://www.royalberkshire.nhs.uk/wards-and-services/radiotherapy-videos.htm>

Contact details

Lisa Clarke Gynae Nurse Specialists: 0118 322 8195, Pager: 40600

Lisa Revans Gynae Review Radiographer: 0118 322 8869

Berkshire Cancer Centre: 0118 322 7888 (9am-5pm)

Radiotherapy 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

Hospital Patient Relations: 0118 322 8338

For more information about the Trust, visit our website at

www.royalberkshire.nhs.uk

Notes:

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This document can be made available in other languages and formats upon request.

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