

Having radiotherapy treatment for cancer of the cervix

Your treatment decision

The choice of treatment for cancer of the cervix is based on evidence, research and experience. This includes individual factors such as the size and position of the tumour, as well as your general personal fitness. Your case, including any scans you have had, has already been discussed in a meeting with the specialist doctors and surgeons responsible for your care. Your doctors have recommended that you have treatment using chemoradiotherapy.

This factsheet provides information about your **radiotherapy treatment** so that you know what the treatment involves and what the possible side effects are. We will ask you to sign a consent form that confirms that you wish to receive this treatment. You can change your mind at any time; however it is strongly recommended that you complete a course of treatment once you have started as you would risk the radiotherapy failing unless the full course is completed. You will receive a separate factsheet about your chemotherapy.

What is radiotherapy?

Radiotherapy is a type of radiation treatment using x-rays. The treatment is given using a machine called a linear accelerator and treatment delivery is completely painless. It takes approximately 10 minutes to deliver each treatment.

How does radiotherapy work?

Radiation damages cells that grow and divide rapidly. Only the cells in the area of the body receiving treatment are affected and modern treatment methods mean that we can avoid treating normal cells as much as possible. The healthy, normal cells can repair while the abnormal, cancer cells cannot recover.

The aim of giving chemoradiotherapy is to completely destroy the tumour on your cervix and also any cancer cells that may have moved to the lymph nodes in the pelvis. Treatment is completed by giving a boost using radiation delivered inside your body. This is called brachytherapy and there is a separate information sheet and consent for this part of the treatment.

Planning your radiotherapy treatment (pre-treatment)

Before starting the radiotherapy, we will need to take a CT scan while you lie in the treatment position so we can design the radiotherapy according to your individual needs. Please see The Royal Marsden factsheet *Having a CT scan for radiotherapy planning* for further information and to check what time you need to arrive before your scheduled appointment. Once you arrive, we can explain about the scan and make any other preparations needed.



You will need a moderately full bladder for your scan and each day for treatment. When your bladder is moderately full, it will push part of your small bowel out of the treatment area. This may help to reduce some of the side effects from the radiotherapy. Please see The Royal Marsden factsheet *Preparing your bladder before radiotherapy to your pelvis (or anus/rectum)* for further information.

The treatment will be planned specifically for you, to make sure that the cancer is accurately targeted with the least amount of normal tissues included. This planning can sometimes take up to four weeks to complete, and involves physicists, radiographers and doctors. Your treatment start date will be the earliest time that we can safely get the treatment ready. After your planning session, we will confirm a time and date to start the radiotherapy treatment.

Radiotherapy treatment

You will need to report to the receptionist in the Radiotherapy Department on arrival each day. The receptionist will let the radiographers working on your machine know that you have arrived. On the day prior to your first visit, the radiographers will telephone you to talk you through the treatment and will answer any questions you may have.

You will receive your radiotherapy treatment every day, Monday to Friday. A course of treatment usually lasts up to six weeks. We aim to treat every patient within 30 minutes of their appointment time and we expect to inform you if your treatment is delayed by more than 30 minutes. Treatment is not usually given on bank holidays, although sometimes an extra treatment day is arranged instead.

At each visit the radiographers will take you into the treatment room and position you on the treatment couch as you were for the planning scan. The radiographers will explain what they need to do or ask you to make small movements so that the marks that were put on your skin during the planning stage, line up with laser lights in the treatment room. When they are happy with the position, the staff will leave the room to deliver the treatment.

The radiographers can see and hear you when you are in the treatment rooms. If you have any problems, they will advise you to call out or raise your hand for attention and they will come in to help you. **Please refer to our policy on monitoring in radiotherapy in The Royal Marsden booklet *Radiotherapy; your questions answered*.**

Some treatment machines have background music playing to help you feel more comfortable. The radiotherapy machine will move around you but it will not touch you and although you can hear a buzzing noise when the treatment is being delivered, you will not be able to feel anything happening. It is important that you have a moderately full bladder for each treatment.

Care during your course of treatment

The radiographers who you see each day can give you advice if you have any problems. They can also contact someone from the Radiotherapy team to come and see you for specialist advice. Other members of the team include the clinical nurse specialists for gynaecological tumours, dietitians and the radiotherapy nurses. Every week you will be asked to have a blood test, and you will be seen in the clinic to make sure that you are managing your treatment well without too many side effects.



If your blood result shows that you have too few red cells (anaemia) then you may need a blood transfusion. This will usually take place during the day and you will not need to stay overnight.

Research has shown that radiotherapy is less effective if you smoke. Smoking will also increase the side effects of radiotherapy. Please ask if you want help to give up smoking during your treatment.

Side effects of radiotherapy

Side effects can occur during the treatment or can appear several months and years after the treatment.

Early side effects

- **Fatigue** (tiredness) – is common and can often be made worse by having to travel to hospital each day and from any chemotherapy you are having. The tiredness will slowly improve after your treatment has finished.
- **Diarrhoea** – both the chemotherapy and the radiotherapy can affect your bowels, and you may experience diarrhoea. If necessary, we can prescribe medication. (If you develop problems at the weekend, you can take Imodium which can be bought from any chemist).
- **Skin reaction** – the skin in your treatment area may become pink or, if you have more pigmented skin, it will become darker. You may develop dry and itchy skin. Sometimes there is superficial blistering of the skin. You will be given advice on how to care for your skin when you start treatment.
 - **The area from the vulva at the front to the anus (perineum)** – if this area is included in the treatment, it will become very sore. You will be seen by one of the radiotherapy nurses for advice on how to manage this type of skin reaction. Your doctor will have told you if this is expected.
- **Urinary frequency or cystitis** – you may notice discomfort as you pass urine or that you need to go more often. Drinking plenty of water often helps this. If it is more uncomfortable, we can send a sample of urine for testing to see if you have a bladder infection needing medication.
- **Nausea** – this is not common, but you may feel nauseous if you are having chemotherapy as well or if we have included treatment to your abdomen. You may be prescribed an anti-sickness drug to take before radiotherapy if nausea is expected.

All these symptoms will settle within a few weeks of completing the treatment.

Late side effects (three months onwards)

- **Infertility** – it will not be possible to carry a pregnancy after chemoradiotherapy treatment to the pelvis.
- **Menopause** – your ovaries will stop producing hormones and you will experience menopausal symptoms (although you can be offered hormone replacement therapy if necessary).
- **Sexual difficulties** – you may experience vaginal dryness and tightening. Advice will be given during the radiotherapy, if appropriate, on how to minimise these problems (see The Royal Marsden factsheet *Feminine care for women having pelvic radiotherapy*). If you develop sexual problems, you can be given advice when you attend the follow up clinics.



- **Skin** - the skin that has had treatment may become darker with time.
 - **Perineum** – if this has been treated, there may be swelling and thickening of the tissues of the vulva and the surrounding area and the development of telangiectasia (appear as broken blood vessels).
- **Urinary frequency** is possible in the long term due to a smaller, shrunken bladder. This is not common.
- **Alteration in bowel function** is common in the long term. Up to 50 in 100 of patients may notice a change in bowel pattern compared with before treatment, usually with increased frequency.
- **Severe rectal side effects** such as severe diarrhoea or rectal bleeding occur in less than five in 100 patients. If they do occur, investigations will be carried out to establish the cause and appropriate treatment will be advised.
- Formation of a false passage from the bowel or bladder into the vagina (**fistula**) is another very rare side effect and usually only occurs in patients who have very advanced local disease.

Remember these are **possible** side effects and you may not experience any of them.

Follow up after your treatment

You will be seen in clinic four weeks after completion of treatment and then every three months for two years. You will have a scan three months after treatment and another a year later.

Contact details

Please make sure you ask any questions you need to and you feel comfortable with what you have been told. If you want any explanation repeated, the radiotherapy team is happy to do this – there is a great deal to take in during one session.

If you have any questions or concerns about this treatment you can contact:

Chelsea: 020 7808 2581

Sutton: 020 8915 6020

We can arrange for one of the team to speak with you.

Your consultant is: _____

Alternatively, please call:

The Royal Marsden Macmillan Hotline: 020 8915 6899

(available 24 hours a day, 7 days a week)

If you need to change your radiotherapy appointments, please phone the radiotherapy bookings team on 020 8915 6018 (Monday to Friday, 9am-5pm)

