

Palliative (hypofractionated) brain radiotherapy for malignant gliomas

You will shortly be starting radiotherapy. This factsheet provides information about the preparation and what to expect during treatment. It also outlines other factors that you need to be aware of, although it is not intended to include everything. Some of the words used may be unfamiliar or you may have further questions after you have read this. If there is anything you do not understand, please ask your doctor, nurse or radiographer.

What is hypofractionated brain radiotherapy?

Hypofractionated radiotherapy refers to radiotherapy treatment which is used for the treatment of malignant gliomas (brain tumours). The aim of the radiotherapy is to control the tumour and to achieve this with a short and well-tolerated treatment.

What happens to me before radiotherapy?

The preparation for radiotherapy takes up to two weeks. We know that this delay can cause anxiety to both you and your family. However, the preparation process is important to ensure that the treatment is given accurately on each occasion.

On your first visit to see the doctor in the outpatients department, we will give you a start date for your radiotherapy treatment and appointments for the preparation of the treatment. These will include visits to the mould room and CT scanner. We will provide a list of telephone numbers of people to contact should you have any queries, as well as booklets about radiotherapy and hair care. These will also be available online via [The Royal Marsden Patient Information library](#).

Treatment preparation

Mould room

The first appointment before you start treatment will be for the mould room. At this visit we will make an impression of your head and face to make an accurately fitting face mask. This mask is made of plastic netting which becomes soft when soaked in warm water. This is not painful or uncomfortable; it feels like a warm flannel is being placed over your face. The radiographer will then shape the plastic netting to your face to create a mask. The whole process will take around 20 minutes. The mask is put on before each treatment to make sure that you lie in the same position each time.

Computerised Tomography (CT) scan

You will have a CT scan with the mask in place so that we can plan your treatment. You may or may not have contrast (injection of dye) for this procedure. If you do need an injection, we will ask



you **not** to eat or drink for one hour before the scan. This is to reduce the risk of being sick. Please tell the radiographer before the investigation if you have any known allergies to contrast or to iodine. You may require a blood test in preparation for this scan. Please note that this is not a diagnostic scan.

What happens to me during treatment?

Your radiotherapy will be given in six treatments over a two-week period or 15 treatments over a three-week period (excluding weekends and bank holidays). Each visit to the department will take approximately 30 minutes. Most of the time in the treatment room is spent making sure that you are in the right position.

The radiographers will then leave the room. Although you will be alone during the actual treatment, the radiographers are able to see, hear and talk to you by means of a TV monitor and intercom system. The radiotherapy treatment itself takes a few minutes. The radiotherapy machine may move and make different noises during treatment; this is normal and nothing to worry about. While you are having treatment you should not feel anything; it is a painless procedure.

Side effects after treatment

Following radiotherapy to the brain you are most likely to lose your hair, notice some skin changes and feel tired. Nausea (feeling sick) is not generally associated with radiotherapy to the brain. However, if you feel sick, please mention it when attending for treatment or when you are seen in clinic.

Hair loss

It is usual to lose hair after brain radiotherapy. Your hair will start to fall out 10 – 14 days after finishing treatment. However, this should be temporary and should grow back. For more information, please contact the PALS help centre.

Skin changes to the scalp

Skin changes due to radiotherapy only happen in the area being treated. Your scalp may become red, as though you have been sitting out in the sun. It may feel hot and itchy.

This is usually followed by dry and flaky skin. It may appear unsightly to you, but this is part of normal skin healing. During this stage it is best to apply an unperfumed moisturising cream, such as aqueous cream or E45. For a short time, the skin on your head will be more sensitive to the sun after radiotherapy. You should protect your head from direct sunlight with a scarf or a hat and sunscreen containing sun protection factor (SPF) should be used indefinitely after radiotherapy.

Tiredness

Radiotherapy may make you feel exhausted and you may find that your energy levels are lower than before. The tiredness can last for six to eight weeks after finishing radiotherapy. We tend to call this feeling 'somnolence'. During this period, have frequent rests, drink plenty of fluids and try not to overexert yourself.



Effect of radiation on the brain

You may be concerned about the potential damage from radiation. Radiotherapy is given to the tumour and a margin around the tumour, in small doses over a period of time. This is to minimise any damaging effect of radiation to the brain.

Support

At times, it may be necessary to involve other members of the hospital or community such as the community palliative care team, physiotherapists, district nurses or occupational therapists. This is to ensure that all necessary support is there for you during and after treatment.

We will always discuss changes in your care with you and any change to the services provided will not be introduced unless you agree. Please ask to see the nurse specialist working with your medical consultant to discuss other issues relevant to your care.

Additional information

Steroids

If you are taking dexamethasone tablets (a steroid), please take them with food or with a milky drink. It helps not to take them late in the day (no later than mid-afternoon) as they may keep you awake at night. Do not stop taking steroids without medical advice. Always bring a list of your medications when attending clinic.

Driving

If you have had a brain operation, a brain tumour and/or epilepsy (also known as fits or seizures) you must not drive until the DVLA allows you to. Please contact the DVLA to let them know about your condition and ask the clinic staff to discuss this with you in more detail if needed.

Finance

If you take anti-epileptic medication (anticonvulsants), have cancer or have a continuing physical disability which means that you cannot go out without the help of another person, you are entitled to free NHS prescriptions. Ask at the chemist or pharmacy for an exemption certificate form FP92 and ask your doctor to sign this.

You may be entitled to other benefits. Please discuss this with the nurse specialist who can refer you to the welfare benefits officer. It may also help to keep a list of questions that you may wish to ask when attending treatment or clinic.

Follow up

You should have a follow up appointment for a medical review when you finish your radiotherapy. If you do not have one, please ask.

If you need to change any of your appointments for any reason, please telephone the radiotherapy reception.

Neuro-oncology team contact details

Please see separate sheet.

