

Having radiotherapy treatment to the pelvis (long course)

Your treatment decision

Your doctors have recommended that you have treatment to your pelvis using radiotherapy (which may be combined with chemotherapy).

This factsheet provides information about your radiotherapy treatment so that you know what the treatment involves and the possible side effects. 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. We will give you a separate factsheet about any chemotherapy you might have.

What is radiotherapy?

Radiotherapy is a type of anti-cancer treatment using x-rays. The treatment is given using a machine called a linear accelerator and you cannot feel treatment delivery. It takes approximately 10–20 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. However, the healthy, normal cells can repair themselves while it is hoped that the abnormal cancer cells cannot recover.

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 factsheet *Having radiotherapy CT planning* for further information and to check what time you need to arrive before your scheduled appointment.

You may 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 factsheet *Preparing your bladder before radiotherapy to your pelvis (or 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 for. After your planning session, a time and date to start the radiotherapy treatment will be confirmed.



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 your first visit, the radiographers will set aside some time to talk you through the treatment. They will answer any extra questions you may have, so please arrive 20 minutes before your treatment time on that day.

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

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 will 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 at all times when you are in the treatment room.

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. Some treatment machines have background music playing to help you feel more comfortable.

The radiotherapy machine will move around you into different positions but it will not touch you. Although you can hear a buzzing noise when the treatment is being delivered, you will not be able to feel anything happening.

Please see our policy on monitoring in radiotherapy in The Royal Marsden booklet *Radiotherapy; your questions answered*.

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.

Research has shown that smoking will 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 (during and immediately after your course of treatment)

- **Fatigue** (tiredness) – is common and can often be made worse by having to travel to hospital each day. The tiredness will slowly improve after your treatment has finished.



- **Diarrhoea** – both chemotherapy and radiotherapy can affect your bowel habit, and you may experience diarrhoea. If necessary, we can prescribe medication for you.
- **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 a patch of dry and itchy skin.
 - For females - the area from the vulva at the front to the anus (perineum)
 - For males - the area from the scrotum at the front to the anus (perineum)

If this area is included in your treatment, it may become very sore with blistering and break down. Your doctor will have told you if they expect this reaction to happen, as it depends on the area they aim to treat and the amount of radiation delivered to it. One of the radiotherapy team will see you for advice on how to manage this type of skin reaction.

- **Urinary frequency or cystitis** – you may notice discomfort as you pass urine or feel 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** – you may feel more nauseous if you are having chemotherapy as well as radiotherapy.
- **Hair Loss** – you may lose some or all of your pubic hair temporarily or permanently.

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

Late side effects (from one month after treatment)

- **Alteration in bowel function** – this is common in the long term. Up to 50 in 100 patients (50%) 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 (less than 5%). If they do occur, investigations will be carried out to establish the cause and appropriate treatment will be advised.
- **Urinary frequency** - this is possible in the long term due to a smaller, shrunken bladder and is not common.
- **Infertility** – this can occur in both men and women. Sperm banking and egg collection may be offered before treatment, if appropriate. For women, it will not be possible to carry a pregnancy after radiotherapy treatment to the pelvis.
- **Sexual difficulties** – men may become impotent and women may experience vaginal dryness and tightening. Both men and women who develop sexual problems can be given help when they attend follow up clinics.
- **Menopause in women** – your ovaries will stop producing hormones and you will experience menopausal symptoms (although you may be offered hormone replacement therapy if appropriate).
- **Lymphoedema (fluid retention) of one or both legs** – this can lead to uncomfortable, swollen leg/s and is more common if you have had surgery to remove your lymph glands.
- **Skin reaction** - the skin that has had treatment may become darker with time. In addition, red or purple dilated veins on the skin surface (telangiectasia) may develop. These are not harmful.



- **Perineum** – if this has been treated, there may be swelling and thickening of the tissues of the area and the development of telangiectasia.
- **Bone thinning** in the area treated which can result in fracture.
- **Formation of a false passage in women** - this occurs 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. If any occur, please discuss with your oncology team as treatment is usually available.

Follow up after your treatment

You will be seen in clinic four weeks after completion of your treatment. We will discuss further follow up at that time.

Contact details

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

The Royal Marsden switchboard:	020 7352 8171	(Chelsea)
	020 8642 6011	(Sutton)

Your Radiotherapy Consultant is

To contact your Consultant’s team, please phone the switchboard number above and ask to be put through to your Consultant’s secretary.

Alternatively, please call:

The Royal Marsden Macmillan Hotline: (available 24 hours a day, 7 days a week)	020 8915 6899
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Appointments

If you need to change your radiotherapy appointments, please phone:

The radiotherapy bookings team:	020 8915 6018
(Monday to Friday, 9am – 5pm)	

