

Having radiotherapy to your head and neck area

Your treatment decision

Your doctors have recommended that you have treatment using radiotherapy. This can be given on its own or with chemotherapy or other drugs. The aim of giving radiotherapy is to completely eradicate your tumour and also any cancer cells that may have moved to the lymph nodes in your neck.

This factsheet provides information about your radiotherapy treatment, 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 additional drug treatment that has been advised for you.

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 do not feel anything whilst you are having the treatment. It takes approximately 10-20 minutes to deliver the treatment.

How does radiotherapy work?

Radiation damages cells that grow and divide rapidly such as cancer cells. Only the cells in the area receiving treatment are affected. Modern treatment methods mean that we can avoid treating normal cells as much as possible, which reduces the side effects. Before starting radiotherapy to your mouth or throat, you should see a hospital dentist or oral surgeon, a dietitian and a speech and language therapist (SALT).

You may need to have any damaged teeth removed before starting radiotherapy. Your SALT will give you exercises for your swallowing to practice throughout your treatment. The dietitian will provide you with advice on how the treatment will impact on what you can eat and ways to help you maintain your weight during treatment.

Planning your radiotherapy treatment (pre-treatment)

Mould room appointment

We will need to make a radiotherapy mask for your head and shoulders. This will help to keep you in the correct position during your treatment and will have marks on it to guide the treatment. Please see the factsheet *Having a radiotherapy shell (or mask) made* for how this is done.

Usually the following day you will have a CT scan whilst wearing the mask so that we can tailor the treatment according to the location of your tumour. Please see The Royal Marsden factsheet



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

The treatment will be planned specifically for you, to make sure that the area is accurately targeted with the least amount of normal tissues included. This planning can sometimes take two to four weeks to complete. Your treatment start date will be the earliest time that we can safely get the treatment ready, and often will be combined with a chemotherapy session. Some patients also have an MRI scan while wearing the mask.

The CT planning session will usually take about 30 minutes. 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 every day when you arrive. 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 and answer any extra questions you may have, so please arrive twenty minutes before your treatment time on that day.

You will be given radiotherapy treatment every day, Monday to Friday. A course of treatment usually lasts about four to six weeks (20 to 30 treatments or 'fractions'). At each visit, the radiographers will take you into the treatment room and position you on the treatment couch wearing your mask as you were for the planning scan.

The staff will leave the room to deliver the treatment. You will be alone in the room for a few minutes while the radiotherapy machine is switched on. The radiographers can see and hear you so if you have any problems, you can call out or raise your hand for attention and they will interrupt the treatment to 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 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.

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 Head and Neck cancer, dietitians, speech and language therapists and the radiotherapy nurses. You will have regular blood tests and will be seen in clinic each week to make sure that you are managing your treatment.

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 (during and immediately after your course of treatment)

- **Skin reaction:** The skin in the treatment area may become pink or, if you have more pigmented skin, it may become darker. It may also feel dry and itchy - this is common. You can use a light moisturiser on the skin in the treatment area. Avoid using very thick or medicated creams. We will give you more skin care information when you start your treatment.
 - **Skin blistering** - Sometimes the skin in the treatment area can become moist and blister. The skin can feel very sore and you will need specialist skin care advice.
- **Sore mouth and mouth ulcers:** Keeping your mouth clean during treatment is very important. We suggest that you use a soft toothbrush and we may recommend using certain mouthwashes. Please discuss with your team before using any mouthwashes that have not been prescribed.
- **Pain and discomfort when swallowing:** Try to avoid very hot, acidic spicy or rough foods. Avoid alcohol and smoking. We will prescribe medication to help with the pain.
- **Loss of taste:** This can affect your appetite. A dietitian can help with suggestions for maintaining a healthy diet and you may need liquid dietary supplements.
- **Difficulty swallowing:** Sometimes we will advise that you have a feeding tube inserted either into your nose or through your skin directly into the stomach to help you maintain your food intake. If this is necessary your team will discuss this with you.
- **Thickened saliva:** This can be eased by taking frequent sips of water, using a mouthwash, inhaling steam and sometimes using a nebuliser to humidify the air you breathe.
- **Dry mouth due to lack of saliva:** Keeping well hydrated can alleviate this.
- **Bad breath:** This can be caused by a mouth infection and the clinical team can prescribe medication.
- **Altered voice:** This may happen if we are treating your larynx. Your SALT will be able to give advice if you are affected.
- **Hair loss:** This only affects hair in the treatment area and it will usually grow back a few weeks after radiotherapy has finished.
- **Fatigue (tiredness):** This side effect is common. The tiredness will slowly improve after your treatment has finished but may last for up to a year.

Late side effects (three months onwards)

If your doctor thinks you will have a long term or permanent side effect caused by the treatment, they will advise you of it as part of your consent to treatment.

- **Skin changes:** The skin that has had treatment may become darker with time. In addition, red or purple broken blood vessels on the skin surface (telangiectasia) may develop. These are not harmful.
- **Dry mouth:** You may need to use artificial saliva which is available as chewing gum, spray or lozenge.



- **Change of voice quality:** This can be permanent.
- **Difficulty swallowing:** This may be permanent.
- **Restricted neck movement and/or reduced jaw opening:** Your neck or jaw might feel stiff and you might have restricted movement.
- **Tooth decay** (if included in the treatment): Your teeth will be more prone to decay so you will need to visit a dentist regularly.
- Rarely the **bones** in the treatment area may become weakened and develop small fractures.

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

Follow up after your treatment

Your team will see you regularly after completion of treatment to monitor and support you if you have any side effects. Clinic appointments will be made as often as your doctor thinks is necessary - this may be every month. You will usually have a CT scan three months after treatment.

Please make sure you ask any questions that you need to and that you feel comfortable with what you have been told.

Contact details

Your consultant is _____

If you have any questions or concerns about your treatment, you can contact your Clinical Nurse Specialist (CNS).

You may also call The Royal Marsden switchboard on 0208 642 6011 and ask to speak to your Consultant's secretary. We can then arrange for one of the team to speak with you.

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).

