The ROYAL MARSDEN
NHS Foundation Trust

Palliative radiotherapy for rectal cancer

Patient Information

NHS

Contents

Your treatment decision

Your doctors have recommended that you have treatment to your pelvis using radiotherapy. This leaflet provides you with information about your radiotherapy treatment, including what the treatment involves and the possible side effects. If you have any questions after reading this, please do not hesitate to ask your doctor, clinical nurse specialist or radiographer.

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 it takes approximately 10 minutes to deliver each treatment. You cannot feel treatment delivery.

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 far as possible. The healthy, normal cells can repair themselves while it is hoped that the abnormal, cancer cells are less able to recover.

What is the purpose of having radiotherapy?

We have recommended radiotherapy to the rectum to either prevent or relieve your symptoms, such as bleeding, pain or discomfort. The cancer may shrink with treatment but we are unlikely to get rid of it entirely.

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 a CT scan for radiotherapy 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 such as diarrhoea. Please see the factsheet *Preparing your bladder before radiotherapy to your pelvis (anus/ rectum)* for further information. If you are unable to maintain a comfortably full bladder during treatment, please discuss this with your doctor. We will assess your bladder function and may prescribe medication to reduce the frequency of passing urine.

The treatment will be planned specifically for you, to make sure that the cancer is accurately targeted with the least amount of normal organs included. This planning can sometimes take up to 2–3 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 you.

After your scan session, a time and date to start the radiotherapy treatment will be confirmed.

Radiotherapy treatment

You will need to report to the receptionist at 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 is usually 5–8 days. We aim to treat you within 30 minutes of your appointment time and we will inform you if your treatment is delayed by more than 30 minutes. Please note that treatment is not usually given on bank holidays.

At each visit, you will be asked to change into a hospital gown. 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 in 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 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 gastrointestinal tumours, dietitians and the radiotherapy nurses.

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

Early side effects (during and immediately after your course of treatment; they may take up to 4–6 weeks to resolve)

- **Fatigue** (tiredness) – common in at least two thirds of patients (2 in 3 people) 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** – 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 darker in colour, depending on your skin tone.

  You may develop a patch of dry and itchy skin. 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. A radiotherapy team member will see you and advise 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. If it is particularly uncomfortable, we can send a sample of urine for testing to see if you have a bladder infection needing medication.
- **Nausea** – you may feel nauseous, although this is uncommon. If necessary, we can prescribe medication for you.
- **Temporary worsening of symptoms** – your symptoms may flare up temporarily due to inflammation from the radiotherapy. Medications and dressings can be prescribed and advice will be given on how to manage this.

Late side effects (from 3 months to years after treatment)

Radiotherapy can also cause long term side effects which may occur many months after treatment. The risk of late side effects with palliative radiotherapy is low and usually outweighed by the benefits of giving treatment – to help with your symptoms and/or control the tumour with the aim of improving your quality of life. Your doctor will discuss with you any late side

effects they feel are relevant to your case. If you have any questions or concerns, please ask your clinical nurse specialist or speak to your doctor.

Longer term side effects, most commonly affecting bowel, bladder and sexual function, can occur but are unusual in the palliative setting.

Remember these are all **possible** side effects and you may not experience any of them. If you do, please seek medical advice by contacting your clinical nurse specialist.

Follow up after your treatment

We do not always routinely organise a follow up appointment with the radiotherapy team after completion of pallative radiotherapy. However, please feel free to contact your clinical nurse specialist for advice if you have any concerns after your treatment.

Contact details

Please make sure you ask any questions you need to and that 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 or 020 8642 6011

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: 020 8915 6899
You can ring the hotline 24 hours a day, 7 days a week.

St George's Hospital Macmillan Hotline: 078 3114 7653
(available 24 hours a day, 7 days a week)

Appointments

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

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

References

This booklet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this booklet are available on request from:

The Royal Marsden Help Centre
Telephone: Chelsea 020 7811 8438 / 020 7808 2083
Sutton 020 8661 3759 / 3951
Email: patientcentre@rmh.nhs.uk

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Should you require information in an alternative format, please contact The Royal Marsden Help Centre.

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