



Lynda Jackson Macmillan Centre

for cancer support & information

... supporting people affected by cancer...

Mount Vernon Cancer Network **NHS**

This leaflet forms part of a series of publications produced by the Lynda Jackson Macmillan Centre (LJMC).

If you would like further information about any aspect of cancer and its treatments, please drop in to the centre or call the Helpline.

The LJMC is staffed by healthcare professionals and trained volunteers and is part of the Mount Vernon Cancer Centre.

- Drop-in centre for support and information
- Telephone Helpline
- Benefits Advice *
- Pre-treatment visits
- Complementary therapies *
- Relaxation classes
- Counselling *
- Support groups
- Look Good...Feel Better™ beauty workshops

* These services are available to patients under the care of an NHS oncologist based at Mount Vernon Cancer Centre.

Guide for Patients having Radiotherapy to the Abdomen and/or Pelvis at Mount Vernon Cancer Centre

Opening hours: Mon - Fri: 9.30am - 1.00pm & 2.00 - 4.30pm

Lynda Jackson Macmillan Centre

situated between the Cancer Centre and Gate 3 (White Hill)

Mount Vernon Hospital, Northwood, Middlesex HA6 2RN

Telephone Helpline: **01923 844014**

www.ljmc.org

Patient Information Series No 12

Consent

It is a legal requirement to have a signed Consent Form from you before the start of your treatment.

If you have already been given one of these forms, please bring the completed form with you when you come for your first appointment.

If you have not been given a form, this will be discussed with you at your first appointment.

Pregnancy/fathering a child

Female patients must not be pregnant or become pregnant and male patients must not father a child during a course of radiotherapy or for some months afterwards. Please discuss this with your cancer specialist.

If you think there is a chance, however small, of you or your partner being pregnant during treatment, it is extremely important that you discuss this with your oncologist, radiographer or nurse as soon as possible.

Female patients will be asked to confirm their pregnancy status prior to radiotherapy. This applies to all women between the ages of 12 - 55 years. This is a legal requirement.

Identification

Please note that it is a legal requirement for the staff to check your name and details against your treatment sheet every time you attend.

Counselling aims to provide individuals and families with an opportunity to understand and manage these new experiences.

The Lynda Jackson Macmillan Centre (LJMC) provides support and information, and has details of local support groups. It offers a range of services including counselling, complementary therapies and relaxation sessions. To find out more, either drop in or call the LJMC. Details are on the back of this leaflet.

If you would like to use any of the Helpful Hints sheets mentioned in this leaflet, please drop in to the LJMC or print them from www.ljmc.org (you will find them under Links).

Contacts

Radiotherapy Clinic Nurses: 01923 844267
Mon - Fri 9am-5pm

Radiotherapy Clinic Radiographers:..... 01923 844548
Mon - Fri 9am-5pm

Dietitian: 01923 844366
Mon - Fri 9am-5pm

Specialist Nurse:

Lynda Jackson Macmillan Centre: 01923 844014
(see back cover for more details)

Follow-up care

You will be seen regularly during your treatment by a doctor (from your Oncologist's team), radiographers or nurses. When your treatment is over, you will have regular follow-up appointments.

These follow-up appointments may be with your Mount Vernon Oncologist or a doctor within his/her team, either at the Cancer Centre or at the District General Hospital nearer your home. Some patients will be followed-up by clinic radiographers via telephone. In some cases your own family doctor (GP) will take on the routine monitoring of your condition.

If, between your follow-up appointments, you are worried by any skin changes, lumps, or any pains that you cannot explain, then make a special appointment to see either your own GP or Oncologist. The team will do their best to help deal with the problems, or put your mind at rest.

Additional help and support

People who have had cancer will say that throughout their illness they experienced a range of emotions, expected and unexpected. Many find it to be a stressful, anxious and confusing time, both as individuals and within relationships.

Some patients find it harder to make decisions or to face up to things, feeling overwhelmed and unable to focus on positive aspects within their lives.

If you have difficulty making sense of your feelings or can relate to any of these experiences, you may find it helpful to talk to a trained health professional, who may refer you for counselling.

Guide for Patients having Radiotherapy to the Abdomen and/or Pelvis at Mount Vernon Cancer Centre

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This leaflet has been written in collaboration with oncologists, health professionals, patients and carers at Mount Vernon Cancer Centre.

If you have difficulty reading this size of print, a version of this leaflet or any of our leaflets can be produced for you in a larger print.

Introduction

This booklet is designed to provide a general guide for patients receiving radiotherapy to the abdomen and pelvis at Mount Vernon Cancer Centre.

We hope it will provide answers to a number of commonly asked questions. However, if there is anything in this leaflet which is unclear, or there are still questions which it does not answer, please contact a member of the team caring for you to get more advice.

Radiotherapy is one of a number of treatments which may be offered to patients in the management of abdominal or pelvic cancer.

The choice of treatment is determined by a number of individual factors and it is important that you have an opportunity to discuss your specific treatment with your Consultant Oncologist¹ (cancer specialist). As there are many different forms of abdominal and pelvic cancer, the length of treatment and ways in which radiotherapy is given can vary.

The type of radiotherapy used to treat cancer of the abdomen and pelvis is external beam radiotherapy. This means that a programmed course of radiation therapy is applied at regular intervals to your pelvis using an external radiation beam or beams.

External beam radiotherapy does not make you radioactive. It is perfectly safe for you to be with people, including children, as usual.

After you are referred you will be invited to a planning session.

¹ Throughout this leaflet the term 'oncologist' will refer both to your cancer specialist and any doctors working within his/her team

Can I choose my appointment time?

Yes you can. To request an appointment time you need to call the Radiotherapy booking line on 01923 844300 within 48 hours of receiving this leaflet to ensure that you get the treatment time you prefer.

Please note that this booking line telephone number is an answering machine so please speak slowly and clearly leaving the following details:

- your full name (please spell your family name)
- your date of birth
- your daytime telephone number (in case we need to contact you)

Please let us know your preference for appointment times:

- 9am to 10am
- 11am to 2pm
- 3pm to 5pm

Appointment times will be confirmed at your planning session.

Please also let us know if you have any holidays booked and we will try to accommodate your request to the nearest possible time.

Please note that, if your preferred appointment time is not available, we recommend you accept the first available appointment to avoid any possible delays in your treatment.

Bowels

If you have had to make other changes to your diet, during your treatment, you are advised to continue with these changes for a week or two, before gradually returning to your normal foods.

If you have been following a low residue diet, you can return to a normal diet once you have finished your radiotherapy, unless advised otherwise.

During the weeks after your treatment has finished your bowels should start to return to normal.

If unsure please speak to the clinic radiographer.

If you have previously had surgery to your bowel or bladder, you should talk to your specialist nurse and/or dietitian to discuss your particular dietary needs. This can easily be arranged through either the radiographers and nurses, or the health professionals working in the Lynda Jackson Macmillan Centre (LJMC).

Swimming

It is perfectly safe to resume swimming after treatment once your skin reaction has settled down.

Sunbathing when treatment is finished

It is unwise to become sunburnt on any part of your body. Do not expose the treated area to the sun whenever possible. It will be necessary to apply a high protective factor sun cream to the treated area for the first year after your treatment if you cannot avoid exposing it.

What does planning mean?

Before you begin your radiotherapy you will be asked to visit the Radiotherapy Department to have your treatment planned. This appointment may take some time, and waiting times at this stage may vary. You may be in the department for several hours.

The planning session will take place in one of two areas. This will be in either a CT Simulator (CT machine) or another Simulator (x-ray machine) which imitates the treatment machine.

You will be asked to strip below the waist (you may find it easier to wear separates).

You will be asked to lie in the position in which you will have your treatment. This position should be comfortable enough to maintain for around 30 minutes. It is therefore important for you to say if any aspect of the treatment position is uncomfortable.

The radiographers will draw some marks on your abdomen or lower back. These are made with felt tip pens, and will wash away. For this reason and with your permission, the radiographers will make a few tiny permanent marks on the skin. These are very small and done by pinpricking the skin with some special dye. The permanent dots are important as they enable accurate positioning and treatment delivery each day.

As the tiny permanent dots will remain, you may wash as normal. Once your treatment begins certain care of your skin is advisable. This is explained in further detail in this leaflet.

Before you leave the centre on your planning day, you will be given details of your treatment appointments.

What happens during treatment?

A member of the team will talk to you before you go in the treatment room. They will explain clearly what will happen and you will have a chance to ask questions.

You will be asked to undress below the waist and lie on the couch in the same position as you did when you were in the simulator. The room lights will be dimmed, and then the radiographers will position the machine to line up with the marks put on your skin when your treatment was planned.

When all the adjustments have been made and you are in the correct position, the radiographers will make sure you are comfortable before leaving the room to deliver your treatment.

The treatment will last only a few minutes and, although you will be alone in the room during that time, the radiographers will be able to see you at all times through a closed circuit television. You won't feel anything as radiotherapy is completely painless. It is similar to having an X-ray picture taken, except instead of taking a picture, the machine delivers X-ray treatment.

You will be asked to breathe normally. The radiographers will explain in advance how to alert them if you have a problem. It is possible to switch off the machine and interrupt your treatment at any time if necessary.

Sexual activity

Some patients may experience sexual difficulties as a result of radiotherapy treatment. This will vary from patient to patient, and depends on the exact treatment site and dose given. Please talk to your oncologist or clinic radiographer about any sexual issues you may have.

Side-effects after treatment

There is a 30 - 40% risk of minor bowel and bladder problems continuing after a course of radiotherapy. Severe effects are rare, but may include bowel and bladder changes and also thinning of, or minor cracks in the pelvic bones, especially in patients prone to osteoporosis.

These may be specific to your treatment, and will have been explained to you by your oncologist before starting radiotherapy.

If you have any concerns please ask for advice.

What special care should I take after my treatment?

Skin Care

After your treatment has finished, you should continue to treat your skin very gently for the next 2 - 4 weeks, depending on your skin reaction. Continue with the skin care advice you have been given by your radiographers, and avoid wearing tight clothing. Any soreness will gradually go away.

Your oncologist/clinic radiographer can prescribe some medication while your symptoms last. Please speak to the radiographers before taking Imodium or any over the counter medications for diarrhoea.

We suggest that during this time it is important for you to:

- have plenty of light snacks rather than large meals
- drink 8-10 cups of liquid each day to replace lost fluids
- avoid highly spiced and fatty foods
- stop taking laxatives (unless advised otherwise)

If you have been placed on a low residue diet and find that you are becoming uncomfortable from not opening your bowels enough or are constipated then please let your clinic radiographers know so that they can help adjust your diet and/or prescribe some medication to help.

Fatigue

Radiotherapy can leave you feeling tired. Many patients also feel that the commitment of attending the hospital regularly for treatment causes them to become generally tired and lethargic, and this can continue for many weeks after treatment has finished.

Please see factsheet 'Helpful hints on Fatigue'. You can get a copy at the Lynda Jackson Macmillan Centre (LJMC).

What special care should I take during my treatment?

Eating and drinking

It is important to continue to eat as normal during your treatment, unless you have been asked to follow a low residue diet. Try to drink up to two litres of fluid a day (which is the daily recommended intake).

Fluids can include water, decaffeinated tea or coffee, fizzy drinks, squash and juices.

Skin care

We recommend that you take special care of your skin both during and up to 4 weeks after radiotherapy.

You may bath or shower, but try to avoid having the water very hot or cold. If you have a bath you should not soak in it or add bubble bath, salts, oils or any other substance to the water.

We recommend you use either baby soap or a simple unperfumed soap. Aqueous cream can also be used for washing. It is important that you apply the soap gently, using your hand (rather than a sponge or flannel), and that you rinse the area well with warm water.

When drying use a very soft towel to 'pat dry'. Try not to rub the skin. Pay extra attention to skin folds such as those between the buttocks and groins.

Aqueous cream

You will be given a tube of aqueous cream at the start of your treatment. You need to start applying the cream to the area being treated, twice daily, morning and evening, during treatment and up to 2 - 3 weeks after your treatment is completed. It is not necessary to wash it off prior to treatment, as the cream will soak into the skin. Do not use any other cream on the treated area. If you need more, please ask the radiographers, or you can purchase it from your local pharmacy.

Further skin care advice

Whilst having treatment, try wearing loose, comfortable clothing containing natural fibres such as cotton.

If the crease between your buttocks or the skin folds in your groins are included in the treated area, you may find these parts become particularly sore. For this reason, you may find it more comfortable to wear loose underwear, which won't rub these sensitive parts of your body.

Further advice

If you have a previous history of problems in the abdomen/pelvis area, for example irritable bowel syndrome or haemorrhoids, radiotherapy may aggravate these conditions. If this happens to you, please talk to the radiographers treating you, and they can arrange for you to see an oncologist or the clinic radiographer.

What are the side-effects of radiotherapy?

Nausea and loss of appetite

Some patients may feel sick or nauseous and lose their appetite at some stage during their treatment. If this happens to you ask the radiographers or nurse for the 'Helpful Hints' factsheets on 'Nausea' or 'Loss of Appetite'. There is medication available for nausea, please ask your oncologist or clinic radiographer.

Urinary frequency (Cystitis)

Cystitis is an inflammation of the bladder and can be a reaction to your radiotherapy treatment or caused by an infection. You may find that you need to urinate more often or have pain or burning when you urinate. If you have these symptoms, tell the team treating you. They will test your urine for any infection and treat it if necessary.

To help prevent cystitis, try to drink 8-10 cups of fluid each day. We encourage patients to drink some cranberry juice each day as it can help to fight the bacteria that cause bladder infections and cystitis. (If you are on Warfarin, you should not drink cranberry juice.)

Bowel frequency

It is likely that treatment will increase the number of times that you open your bowels each day. If you are passing loose stools more than four times each day then please speak to the radiographers and they can refer you to your oncologist or the clinic radiographer.