Interstitial brachtherapy

Patient Information Series PI 69

Contacts

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24 hour Acute Oncology Service
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# Introduction

This leaflet gives patients the information they need before having a course of interstitial brachytherapy. It cannot cover all the issues, but it is intended as a guide to help you understand more about this type of treatment.

There will be a team caring for you which will include doctors, nurses, physicists and radiographers. The cancer specialist is the doctor in charge of your care and in this leaflet we will refer to him/her as the oncologist.

You could be seen by both male and/or female radiographers when you have your planning and treatment.

## What is brachytherapy?

Brachytherapy is a form of radiotherapy given by introducing a radiation source directly to the part of your body that is to be treated. Interstitial brachytherapy is used to treat cancers growing in the breast, the anal region, the cervix, vulva or the vagina. The treatment is delivered through temporary applicators implanted in the area to be treated. The source of radiation is a small iridium “pellet” that delivers the radiation dose as it passes through the applicators within the treatment area.

For some patients brachytherapy implants are the best way of delivering high dose radiation as it concentrates the radiation on the treatment area so that healthy sensitive parts of the body nearby receive a much lower dose.

Implants may be used as the main (primary) treatment or may follow a course of external beam radiotherapy. The number of brachytherapy treatments and whether you need external beam radiotherapy, will depend on your cancer. Your oncologist will discuss with you the best treatments for you.

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Your brachytherapy implant

**Before the implant**
The applicators are placed while you are under general anaesthetic, so you will be admitted to the ward the day before the procedure. You may need blood tests, an ECG and a chest X-ray if you have not had these tests done recently. These are to check that you can safely have a general anaesthetic. You will not be allowed to eat or drink from midnight, so you are ready for theatre in the morning. If the area being treated is the anal region, the cervix, vulva or the vagina you may be given some medication to clear your bowels.

**The implant**
On the day of your implant you will be taken to theatre where you will be given a general anaesthetic. Fine plastic treatment tubes (applicators) will be passed into the area to be treated. The number of applicators placed will depend on the size of the area to be treated. An average implant requires 5-20 applicators.

When you wake up from the anaesthetic you will be aware of the applicators. Your skin in the area may feel a little stiff as the tubes are held in place by a template which is usually a flexible piece of plastic held on the skin by tape adhesive and stitched at the edges.

If the area being treated is the anal region, the cervix, vulva or the vagina then a catheter will also have been placed into your bladder to drain urine.

After the implant
When you have recovered from your anaesthetic you will be taken to a CT scanner or MRI scanner or both so that scans can be taken of the area to be treated. This is so that your oncologist can check that the applicators are in the correct position. After your scans you will be taken back to the ward where you will need to stay in bed.

Over the next few hours our physicists will calculate how long the radiation source needs to remain in each of your treatment applicators. Once this has been done, your brachytherapy is ready to be given.

First treatment
The first treatment is usually given later in the afternoon of the day on which you have the treatment applicators inserted. You will be taken to the brachytherapy suite on a trolley where you will be given your treatment.

The treatment applicators are measured to ensure that they have not moved. As long as they are still in the correct position, they are connected to a set of tubes which join them to the machine containing the radiation source (the brachytherapy machine).

Once this has been done the staff will leave the room and the treatment will start. They will watch you on a TV monitor in the control area nearby and they will be able to hear you by an intercom.

The brachytherapy machine will pass the radiation source down each treatment applicator in turn, for the calculated length of time that is needed to deliver the radiation dose you need. This usually takes a few minutes. You should not feel any discomfort during the treatment.


After each treatment

At the end of the treatment, the connecting tubes are removed from the treatment applicators, which will remain in place in your body until your course of treatment has been completed. You will then return to the ward.

It is important that you do not move or bend the area with the implant in place. Usually this means that you will have to rest quietly in bed but you may be able to sit up slightly to help with eating and reading. Please let your nurse know if you have any discomfort from the continued bed rest or the treatment applicators. You can be given medication to help with this.

If the applicators are in the anal region, the cervix, vulva or the vagina then the catheter in your bladder will remain in place until your final treatment has been completed. After this it will be removed. You will be given medication so that you do not feel the need to open your bowels.

You will be able to have visitors on the ward as you are not radioactive.

Further treatments

Any more treatments will normally take place on consecutive days. Sometimes two treatments may be given on the same day with a six hour gap between them.

A CT scan or MRI scan may be done prior to each day’s treatment to check the position of the applicators.

You will be taken by trolley to the brachytherapy room and have your treatment whilst remaining on the trolley. The treatment process is exactly the same as the first day.

Follow-up after your brachytherapy treatment

After the last treatment, the applicators and the catheter (if present) are removed. You do not need any sedation for this as they are very simple to remove. Any stitches are removed and the plastic template is taken off your skin. It will feel like having a plaster removed.

There may be a little oozing of blood from the site where the applicators passed through the skin. You may find that you notice some bruising in the area for a few days afterwards.

After your treatment you will return to the ward and you may be allowed home the same day. However, if the area being treated is the anal region, the cervix, vulva or the vagina you must be urinating without difficulty before going home. These patients may also notice some blood in their urine which is normal. This should become clearer over the next few days.

You should not feel unwell after your brachytherapy but we advise you to arrange for a responsible adult to take you home as you may feel tired afterwards. Please drink 1-2 litres of fluid each day.

Some patients may develop a urine infection. If you have continued discomfort or bleeding on passing urine for more than a few days contact your GP or the ward at the cancer centre where you were treated.

What about any other side effects?

After treatment you may get a reaction to the radiotherapy. The reaction will depend on the treatment dose and area of your body treated.
Breast implant patients
Your treatment may cause the skin to redden overlying the area implanted. This area may become sore and itchy for 1-2 weeks after treatment. You may find the skin in the treatment area peels before healing. Please contact the cancer centre if you notice any discharge from the area.

Vulval and vaginal implant patients
Your treatment may result in the area around the vaginal opening becoming very sore, there may be a vaginal discharge and it may be uncomfortable to urinate. You will find that this improves over a few weeks but may require you to use a barrier cream and painkillers. Please ask your nurse about this before your discharge from hospital.

Anal implant patients
Your treatment may result in soreness around the anal region especially when opening your bowels. This will improve over a few weeks and it will be important to ensure your stool is soft and to avoid constipation during this time. Please speak with your doctor and nurse before your discharge if you have concerns about managing any pain you may get and your bowels.

Who do I contact if I have any concerns?
Once home if you have any questions or concerns about your recovery, please contact Mount Vernon Cancer Centre (see page 2).

Other help and support
The Lynda Jackson Macmillan Centre (LJMC) offers information and support to patients and their families and is located next to Chemotherapy Suite by Gate 3. The staff at the LJMC work as part of the overall team caring for you.

People who have cancer often say that during their illness they experience a range of emotions. Many find it to be a stressful, anxious and confusing time. Please feel free to drop in before, during and after any of your visits to Mount Vernon Cancer Centre to find out more about the LJMC services that you may find helpful.

The volunteers and healthcare professionals at the LJMC provide help, support and information in a relaxed setting to help patients cope with cancer and its treatment.

LJMC services include a range of complementary therapies, counselling, relaxation sessions and financial advice. You can drop in without an appointment or call the LJMC helpline on 020 3826 2555. More information is on the back of this leaflet.

If you normally pay for NHS prescriptions
People undergoing treatment for cancer do not have to pay NHS prescription charges if they have a valid medical exemption certificate. To get an exemption certificate, ask your GP for an application form.
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.

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.

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.