



Rectal spacer insertion (prostate cancer)

This information is a guide for having a rectal spacer (SpaceOAR) inserted, prior to having radiotherapy for prostate cancer. The spacer creates a space between the prostate and the rectum, which provides some protection to the rectum during radiotherapy for prostate cancer.

What is a rectal spacer?

A rectal spacer is an absorbable soft gel that is mainly made from water (hydrogel) which is safe to use in the body.

The rectal spacer increases the distance between the rectum (back passage) and the prostate. This provides some protection to the rectum during radiotherapy for prostate cancer.

The rectal spacer stays in place for three months and is gradually absorbed into the body and removed in the urine by six months.

Before your appointment

If you are taking any **anti-coagulants** (blood thinners e.g. Warfarin or Clopidogrel/Plavix), you may **not** be suitable for a rectal spacer.

Please contact the brachytherapy team on 020 3826 2629 **as soon as possible (at least 14 days) before you attend for your appointment.**

If you have asthma and use inhalers, please bring your inhalers with you to this appointment.

We would recommend you take (if you are able to do so) two paracetamol tablets 30 minutes before your appointment.

What does rectal spacer insertion involve?

You will be given an appointment to attend the Cancer Centre. The procedure to insert the spacer will take about 15 minutes, although you should expect to be in the centre for at least one hour.

The spacer will be inserted into the area between the prostate and the rectum under ultrasound guidance by a doctor in a procedure which is similar to a prostate biopsy.

You will need to remove your trousers and underpants and put on a supplied gown with the opening to the back. For the procedure you will be required to lie on your back with your knees bent and supported on pads.

A local anaesthetic will be used to numb the area through which the spacer will be inserted. This is between the anus and scrotum. An ultrasound probe will be placed into the rectum. This allows the doctor to see the area where the spacer needs to be inserted. Using a needle, a small amount of sterile fluid is injected into this area to create a gap ready for the spacer. The spacer is then inserted using a needle which is guided into position by using the ultrasound picture.

What are the possible side-effects?

The use of the rectal ultrasound and the passage of needles through the skin can be uncomfortable. For this reason **we would recommend** you take (if you are able to do so) two paracetamol tablets 30 minutes before your appointment. You may also find you have slight bruising around the area of the insertion.

There is a very small risk you may develop an infection after the procedure. If you feel unwell or have a temperature in the 48 hours following the procedure, please call the **24 hour Acute Oncology Service on 07825 028855.**

Other risks associated with the procedure include: needle penetration of the bladder, prostate, rectal wall, rectum or urethra; injection of spacer gel into the bladder, prostate, rectal wall, rectum or urethra; injection of air, fluid or spacer gel intravascularly; urinary retention, rectal mucosal damage, ulcers, necrosis, bleeding, constipation and rectal urgency.

If you have any questions or concerns the doctor will discuss these with you prior to the procedure.

When will I start my radiotherapy?

Once you have had the spacer inserted you will receive an appointment, which will be approximately one week later, for your radiotherapy planning. The planning will involve a CT scan and an MRI scan which will be on the same day. Both of these scans are used to plan your radiotherapy.

There is series of short videos about treatment for prostate cancer at Mount Vernon Cancer Centre. Go to www.ljmc.org and follow the links to patient information for prostate cancer.