Information for patients

Radiotherapy to the Breast or Chest Wall

The Beatson West of Scotland Cancer Centre
1053 Great Western Road,
Glasgow G12 OYN
This leaflet is for patients with breast cancer who will have a course of radiotherapy treatment to the breast or chest wall. It describes:

- The radiotherapy planning and treatment.
- The effects you may experience during and after treatment.
- How best to cope with these effects.

The effects of treatment vary from one person to another and the information here is intended as a general guide. It does not mean you will experience all of the effects we describe.

Your doctors, radiographers and nurses will explain this further when necessary.

It is important that you understand the radiotherapy and the side effects before you give your consent for treatment. If you have any questions or problems please let us know as soon as possible.
• Before you begin your treatment we must carefully plan it. The planning takes place at the CT simulator (a CT scanner within the radiotherapy department). This CT scan is used solely to plan your radiotherapy and there will be no result from it.
• You will be asked to undress to the waist but we will cover you when ever possible.
• The radiographers will help you to lie in the necessary position for treatment and planning.
• You will be lying on a sloping board with both of your arms lifted up on a supportive arm rest.
• The radiographer or doctor will put some felt tip pen marks onto your skin. These act as a guide to the area we need to plan the treatment round. We will also tape some small markers to your skin which will show up on the scan and these will be removed when the scan is finished.
• It may be best to wear older underwear as the pen marks might rub off onto your clothes.
• We plan your treatment carefully to make sure that we are treating all of the area that needs it, while ensuring that any radiation dose to other structures like your heart or lungs is kept to a minimum. When the scan is completed we will tattoo 3 points on your skin with tiny permanent marks the size of a pin head. These are important reference marks that the radiographers will use to reproduce your treatment every day.
• We will use the information from the scan to plan your treatment. We will produce an individual computerised treatment plan which is necessary for your treatment.
• Treatment will normally start about 2-3 weeks following your CT scan.
• The radiographers will check you have been given all the correct appointments for your treatment. Sometimes your first visit to the treatment machine is to allow images to be taken of your planned treatment. Your treatment will start on the second visit. Please ask your radiographer if you are unsure.
Your appointment letter will have all your daily radiotherapy treatment appointments and also a review appointment. The review appointment is a routine appointment and is a chance to discuss any radiotherapy side effects.

**Treatment**

Radiotherapy treatment is planned and delivered by specially trained professionals called Therapy Radiographers. The treatment machine is called a linear accelerator. The radiographers will explain the treatment process to you before you start.

- You will have between 3 and 6 weeks of treatment given on weekdays. You will be advised of how many treatments you will receive during your discussion with your clinical oncologist.
- The treatment is painless and usually takes about 10 minutes.
- You will lie in the position you were in when your treatment was planned.
- The radiographers will dim the lights for a short time while they position the treatment machine. They will then leave the room to switch the machine on.
- The machine will be on for about a minute and the radiographers will be watching you the whole time on a television screen outside.
- If you are having a boost to your scar area you may move to a different treatment machine and your appointment time may change.

You should not feel any different after your treatment is finished. If you have any questions or concerns, please speak to a radiographer.
Effects of Treatment (early)

• During treatment you will be seen for an on-treatment review and assessment of your skin. This is a completely routine visit to check on your skin and how you are coping generally with treatment. Any problems or side-effects of your treatment will be dealt with then. Everyone is different and experience side-effects to different degrees; therefore this is a general guide.

• The treatment will tend to make you tired. This usually occurs 2-3 weeks into your course of treatment and may last for several weeks after it ends.

• Your skin in the treated area may become pink or red. It may also feel a little dry or itchy. In some cases the skin may peel. Again this tends to happen a couple of weeks into treatment and continues for a few weeks after the treatment ends. Often the skin becomes worse in the 10 days or so after treatment has ended, so please don’t be alarmed as this is normal and to be expected. We can give you cream to help soothe your skin.

• In some patients, towards the end of treatment, the skin in the treated area may become moist and sore in patches. If this happens our nursing staff will see you and put a dressing on it if required.

• If you have had a lumpectomy operation, the breast being treated may become a little swollen during and after treatment. Sometimes this may make the breast feel hard and irregular, and can take some months to settle.

• A small number of patients may experience a feeling of heartburn (oesophagitis). Let us know if this is a problem and we will give you something to help.
Skin Care

- You may wash the skin in the treatment area once a day, providing the water is not too hot (lukewarm). You may use an unperfumed soap, but try not to rub the treated area, particularly if it is red or itchy. Washing more than once a day will probably cause more harm to the skin. Do not use a flannel or any other abrasive cloths. We may ask you to stop using soap towards the end of treatment. Dry carefully by gently patting your skin, particularly in any skin folds.

- Please do not use deodorants, perfumes, creams or lotions on the treated area. Although they may appear to be soothing, many contain substances that can make any skin reaction from your radiotherapy worse.

- We advise you not to swim during your treatment as the chlorine may irritate your skin. You can start again after your skin has settled.

- It is best not to shave, wax or use use hair removal cream on the armpit (axilla) on the side which is being treated. If necessary an electric shaver may be used before treatment starts – this will cause the least irritation to the skin.

- You may be more comfortable during treatment if you wear loose fitting clothes, preferably with cotton next to your skin. Wearing a T-shirt or soft cotton cropped-top can be very comfortable. If you prefer to wear a bra, then try to wear one that will not rub or chafe.

- If you have had a mastectomy operation, you may already be wearing a permanent breast prosthesis. However you might find that the soft prosthesis given to you at the time of your operation is more comfortable to wear during radiotherapy treatment, especially if you develop a skin reaction. If you have been fitted with a self supporting breast prosthesis, please do not wear it attached to your skin until you have completed your radiotherapy treatment and any skin reaction has settled down.
• It is best to avoid sun exposure to the treated area during and soon after treatment has finished as this could make your reaction worse. Once the reaction has settled it is advisable to use a total sun block as the treated area will be more sensitive to the sun.

General Advice during Treatment
There is no reason to change your lifestyle during treatment but it may help to:
• Try to get enough rest and sleep, especially when the treatment begins to make you tired. It is also important that you try to continue some of your normal daily activities. A sensible balance between rest and activity may be most beneficial. Indeed some people manage to continue working during treatment.
• Accept offers of help from family and friends if you need help around the house for example.

Late Effects of Treatment
• We believe that the benefit of your radiotherapy treatment far outweighs any risks involved. However, there are potential long-term effects that may affect a small number of people. It is important to point out again that effects can vary from person to person and your doctor will explain specific individual issues to you personally.
• The following is a general guide.
• It is common to notice a slight skin discoloration some months after treatment has been completed. This is usually very mild and does not cause any problems. Less commonly, there can be a more obvious change to the skin. This is called telangectasia, where tiny blood vessels called capillaries are visible under the skin. This appears to be more common in patients who have had radiotherapy following a mastectomy. Although these changes are permanent, they do not cause any health risk or problem.
• Lymphoedema is a swelling in the arm that can sometimes develop due to a build up of fluid. Usually small amounts of fluid in the arm or hand tend to come and go, that is, sometimes the hand is swollen and sometimes the problems is more severe. The chances of developing lymphoedema will depend on the type of surgery you have had and the radiotherapy technique used. If you do experience this swelling, even mildly, please discuss with our staff who will be able to advise you further.

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• Following a lumpectomy and radiotherapy, scar tissue (fibrosis) may form in the breast. It tends to be more noticeable close to the site of the surgery. Over months and years it may progress, making the tissues pull in so that the breast becomes a little firmer, smaller and higher.

• The changes in the breast may cause some discomfort that is not usually severe. A quite rare effect is a general ache and tenderness of the breast. More rarely again, is soreness of the joints that lie between the ribs and the breast bone (costochondritis). These pains usually respond to simple pain killers.

• An extremely rare effect is of damage to the nerves that run from the neck down to the arm (brachial plexus injury). This can cause pain, numbness and weakness in the arm. It may occur if shoulder and neck area need to be given radiotherapy.

• With treatment, the underlying ribs, breast bone and collar bone may receive some of the radiotherapy dose. Over the years these may become more brittle and cracks may appear. Although this may cause some pain, often patients are unaware of it. Again this effect is very rare.

• There has been worry in the past about radiotherapy effects on the heart and lung. The possibility of this is very rare, particularly because modern techniques reduce the risks.
• Very rarely radiotherapy can cause tumours. Although this is a serious possible consequence of your treatment it is important to bear in mind that the effect is very rare. If it does happen it is likely to be years after initial treatment.

Remember, you should consider the possibility of these risks against the potential problems of not having the treatment that has been recommended by your doctor.

**After treatment ends**

As we mentioned earlier please remember that any skin reaction is expected to reach a peak for up to 10 days after treatment has ended. This is perfectly normal. If the skin begins to blister or peel we advise that you seek out advice from your own GP practice nurse who will advise on appropriate creams/gels and skin care.

Generally any skin symptoms that have developed during, and in the 10 days or so after treatment has ended will wear off after a few weeks, however the tiredness may take a little longer. You may begin washing normally once your skin no longer looks red or feels itchy. If your skin has peeled or become moist and sore, this may take a little longer. Your radiotherapy doctor will arrange to see you 6-8 weeks after treatment ends, either at the Beatson or the hospital where you first met him/her. This appointment is simply to check how your radiotherapy side effects has settled down now and how you are generally now your treatment has ended.
Where Can I get Help?
All the staff are here to make sure your treatment goes as smoothly as possible and will try to help with any questions or problems you may have.

Further specialist help and information is available from:-

- Specialist Breast Radiographer Tel: 0141 301 7426
- Information and Support Radiographer Tel: 0141 301 7427
- Breast Clinical Nurse Specialists Tel: 0141 301 7636/7639
- Information Radiographer and Counsellor Tel: 0141 301 7423
- Information Centre Tel: 0141 301 7390
- Transport Desk Tel: 0141 531 3737

The Beatson Cancer Centre has a Radiotherapy Advice Line available for patients who have completed treatment. It is an answerphone service. Please leave your name and telephone number with a short message and we will call you back.

Tel: 0141 301 7432

Counselling and Clinical Psychology Service
This leaflet deals with the physical aspects of your treatment, but your emotional well being is just as important to us. Being diagnosed with cancer can be a distressing time for you and those closest to you. At times it can also be difficult coping with treatment. Within the department we have a counselling and clinical psychology service that may be able to help with worries and difficulties you might be having, before, during or after treatment. If you think this may be helpful to you, please ask staff to put you in touch.
There are various other organisations providing information and support.

These include;

- **Breast Cancer Care**: 0808 800 6000 - National freephone helpline or Scotland and Northern Ireland Helpline 0845 077 1892 - provides information, practical assistance and emotional support for anyone affected by breast cancer.

- **Macmillan Cancer Support**: 0808 808 0000
  www.macmillan.org.uk Providing practical, medical, emotional and financial advice for those affected by cancer.

- **Maggie’s Centre**: 0141 330 3311

- **Maggie’s Centre, Wishaw General Hospital**: 01698 358 392 Provides information and support with a regular programme of courses. Counselling service available

- **Cancer Support Scotland Tak Tent**: 0141 211 0122
  Provides information and support, including complementary therapies. Counselling service available.

- **Macmillan Welfare Rights Benefits Project**: (within the Beatson) 0141 301 7374. Provides free and confidential advice for people affected by cancer and their carers.

- **Beatson Cancer Centre**: – if you want to find out more about our Centre please visit www.beatson.scot.nhs.uk
This leaflet is for general information only. For personalised information please ask a member of clinical staff.

Leaflet approved by L. Webster
Revised by L. Webster & A. Armstrong - May 2012
Review Date: April 2014