

Patient Information

Radiotherapy to the Prostate Bed After Prostatectomy

This leaflet provides information for men receiving radiotherapy to the prostate bed after having their prostate gland removed. It describes radiotherapy planning and treatment, the effects that you may experience during and after treatment, and how best to cope with them.

We treat each patient as an individual and the effects of treatment may vary from one person to another. Your doctor, radiographer, and clinical nurse specialist will explain specific aspects of your treatment.

Radiotherapy may be offered soon after surgery where there is a strong suspicion that all the prostate cancer has not been removed or later if your PSA blood test results rise.

What is Radiotherapy?

Radiotherapy is the use of carefully measured doses of radiation to treat cancer. It damages the cells and stops them dividing and growing. You will be treated using a high energy beam of x-rays delivered to a precise area by a machine called a linear accelerator.

Radiotherapy to the prostate bed is usually given in 20 or 33 treatment visits from Monday to Friday but not at weekends.

Therapy radiographers operate the radiotherapy planning and treatment machines and will be able to answer any questions or concerns that you may have.

You will receive a list of appointments which will include planning, treatment and weekly review dates and times.

If you are in doubt about anything or have any questions or problems, please let us know as soon as possible.

Preparing for your radiotherapy appointments

The position of your prostate can vary daily depending on the fullness of your bladder and rectum. To help minimise this, you will be given instructions to follow before your scan and treatment. This can help to:

- Limit the amount of bladder and bowel in the treatment area. This may help reduce any side-effects you may experience.
- Ensure treatment accuracy each day.

If you have any questions or problems, please speak to your radiographer.

Bowel preparation for radiotherapy planning and treatment

We will give you a supply of small enemas to use. These will be posted out with your radiotherapy appointment letter.

- **CT planning Scan:** You will need to use 2 enemas before your CT scan. You should use the enemas at home. Please use 1 the evening before your planning scan, and 1 on the day of your scan, 1 to 2 hours before your appointment time.
- **Treatment:** Please use 1 enema each day for your first 7 treatments. You should use the enema at home, 1 to 2 hours before your appointment time.

To use the enema

- Pull or twist the cap off the tube.
- If you want to lubricate it before inserting, squeeze a drop of liquid out onto the nozzle.
- Insert the full length of the nozzle into your back passage.
- Gently squeeze the tube until it is empty.
- Keep squeezing the tube as you remove the nozzle from your back passage.
- Wait for the enema to work, approximately 10-15 minutes.
- If you have no bowel movement within 15 minutes it means your rectum is already empty. Do not strain.

Bladder preparation for radiotherapy planning and treatment

When you arrive in the department, your radiographers will ask you to empty your bladder and then drink **500ml of water**. This helps to ensure you have a comfortably full bladder. It is important that you drink the water quickly. You will then wait **30 minutes** before having your scan or treatment.

As it is important that these instructions are followed, please remember the following:

- You will need to be well hydrated before coming to these appointments. Try to drink at least 2 litres of fluid every day.
- Avoid caffeinated drinks-tea, coffee, energy drinks and some fizzy juices. Try decaffeinated options.
- Limit your alcohol intake.
- You will need to be in the department at least 30 minutes before your appointment time.
- If you are coming to the department with hospital transport, please arrange to be brought in half an hour before your appointment.
- When you arrive in the department your radiographers will tell you when to use the enema and when to start drinking. Please do not do either until you are asked.
- Once you drink the water you should not empty your bladder until after you have had your scan or treatment.

Before your course of radiotherapy begins, we produce an individual plan for you.

Part of the planning process involves a CT scan of your pelvis which helps us determine the position of the prostate bed and surrounding tissues.

A special x-ray scan will be taken with you lying flat on your back with a shaped rest under your legs and feet. This helps to keep you in the correct position. This will allow us to plan your treatment accurately.



CT Simulator

When you are in the planning or treatment room your radiographers will ask you to remove your trousers. This makes it is easier to lie in the correct position and is more comfortable. Once you are lying on the CT couch, we will also ask you to slip your underwear down to uncover the area that is being treated. Your radiographers will ensure your dignity is maintained by covering you whenever possible.

You may need to have an injection of contrast (dye) that will help us to see the area we want to treat more clearly. Your doctor or radiographer will put a small hollow tube (cannula) into a vein. It is inserted using a fine needle which is removed once the cannula is in place. We will tape the cannula in place to keep it in position during the scan. We will inject the contrast (dye) through this tube. It may feel a little cold but you should not feel any discomfort.

Contrast (dye) is only ever used at the planning appointment.

Some people can have an allergic reaction to the contrast. This is rare but we will ask some questions before beginning to ensure it is unlikely to happen to you. Your radiographers will keep a close check on you during the injection and scan, so if you feel anything unusual please tell us.

It is important that you stay as still as you can during the scan.

The scan takes 10-15 minutes.

Following your CT scan we will put 3 tiny permanent marks called tattoos on the skin on your pelvis. These marks are barely visible but will help the staff to position you correctly each time you are treated.

Treatment

When you start treatment your radiographers will position you just as you were in the CT simulator. The lights in the room will dim for a few minutes while they position you. An x-ray image is taken each day to check your position for treatment. Your radiographers have to leave the room while the machine is on but you will be monitored on closed circuit TV. The treatment machine moves around you but does not touch you. Each treatment lasts no more than 10 minutes, is painless and you will feel no different immediately afterwards.



Linear Accelerator

Please check with your radiographers if you have any questions or problems.

General advice during treatment

There is no reason to change your lifestyle during treatment but it may help to:

- Try to get plenty of rest, especially if you feel tired, although it is important that you try to continue your normal daily activities and interests. We would, however, advise that you avoid cycling during your treatment.
- A sensible balance between rest and activity is best. Some people are happy to continue to work during their treatment.
- The radiation from radiotherapy does not stay in your body so it is safe to be near other people, including children and pregnant woman.
- It is important to drink plenty of fluids throughout your treatment to keep hydrated. You should try to drink at least 2 litres of fluid every day.

Early effects of radiotherapy treatment

Each person may react differently to radiotherapy treatment.

During radiotherapy the area being treated will gradually respond in a way similar to an 'inflammation'. This area will include the prostate bed, part of the bladder, part of the back passage (rectum/anus) and occasionally the skin. The effects usually start a few weeks after the start of treatment and settle 3-4 weeks after treatment ends.

Some of the effects you **may** experience are:

- **Tiredness:** You may begin to feel quite tired during treatment. This tends to start 2-3 weeks into your course of treatment and will last a number of weeks afterwards.
- **Bladder:** After about two weeks of treatment, the inside of your bladder may become inflamed (like cystitis). You may need to pass urine more often than usual and have a burning sensation when passing urine. Let us know if this is a problem. Drinking plenty of water and reducing your intake of caffeine and alcohol can help. Some men may have a slight leakage of urine.
- **Rectum (back passage) -** Your back passage may become inflamed and you may feel the urge to go to the toilet more often during the day and perhaps at night. If you have piles (haemorrhoids), or have had these treated in the past, they may get a little worse during treatment.
- **Bowel -** You may notice a change in your bowel movements. You may need to move your bowels more frequently and the stools you pass may be softer. You may also pass more wind than usual which may be accompanied by colicky pains. A few men may develop diarrhoea which may be accompanied by an urge or feeling of incomplete emptying. You may pass a clear jellylike mucous from your back passage or may experience bleeding when moving your bowels. Avoiding very spicy foods can help.

- **Sexual Activity** - Your radiotherapy will cause a general inflammation in the area treated. If you are still sexually active after your operation you may notice some discomfort during sexual intercourse. It may be best to avoid sexual intercourse until the effects of radiotherapy settle down after the end of treatment. After treatment a small number of men find that ejaculation is uncomfortable. Sexual intercourse during radiotherapy will not harm your partner.
- **Skin** - The skin in the treated area may become more sensitive. Please tell us if this happens to you. Skin irritation can be treated, but it is very important that you use only products given to you by Beatson staff.
- **Hair** - You may lose some body hair in the treated area. This is usually temporary, although in some patients it may not regrow.

During your treatment a radiographer, nurse or doctor will be available each week to review you if you have any problems. They will assess and treat any side effects, give advice and answer any questions you may have.

Diet

During your treatment it is important to eat well and choose from a wide variety of foods to help you feel stronger. Keep to a normal diet at the start of your treatment although it is best to avoid foods that may make your bowels move unduly (e.g. prunes, rhubarb, hot spicy foods etc.).

Skin Care during Treatment

Radiotherapy only affects the skin in the area being treated.

- You may bath or shower during treatment, provided the water is not too hot. Pat the skin in the treated area dry with a soft towel.
- You may find that you are more comfortable if you wear loose fitting clothes, particularly with cotton next to your skin.

After Treatment Ends

Most symptoms that you develop during treatment will settle down a few weeks after radiotherapy is completed. Tiredness can persist longer than other symptoms.

An outpatient appointment will be arranged for 8 -12 weeks after your treatment ends, either at the Beatson or at your local hospital. You will be seen regularly thereafter. It would be helpful to ask your GP practice to check your PSA blood test one week before the date of the appointment.

Late effects of treatment

We believe that the benefits of radiotherapy treatment outweigh any longer term risks involved. You should be aware of some **potential** long-term effects which **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.

- Occasionally the diarrhoea or the slight discharge of mucous that can occur during treatment does not settle down afterwards. Long term medication may be needed to control it. Some people may notice an urge to move their bowels more often, particularly in the morning.
- About a year after treatment is finished, small blood vessels can form in the lining of the bowel and bladder. These vessels are more delicate than normal and may break down causing bleeding from the back passage or in the urine. If this happens it may seem very frightening at first, but is not usually serious. You should let your GP or specialist know as they may wish to arrange some tests to identify the cause of the bleeding.
- A small number of patients may develop some uncontrolled leakage of urine (urinary incontinence) after treatment.

- After radiotherapy to the prostate bed there is a small risk of a narrowing of the urethra (tube that takes urine from the bladder). If this develops, the flow of urine will be reduced and there may be dribbling or spraying. A small operation may correct this.
- Some men experience impotence following surgery. If you have maintained sexual function, radiotherapy may cause a decline in the ability to achieve and maintain an erection. Please let your own GP know if this becomes a problem, or discuss with your team at the Beatson. There are a number of treatments available.
- There is a **very small** chance radiotherapy could increase your risk of bladder or bowel cancer. Although this is a serious possible consequence of radiotherapy, it is important to bear in mind that this is very rare. If this does happen then it is likely to arise many years after treatment.

Remember that these risks should be balanced against the consequences of not having radiotherapy.

Where Can I Get Help?

Information and Support

All our 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 is available from:

- Uro-Oncology Nurse Specialist
Tel: **0141 301 7614**
- Information and Support Radiographer
Tel: **0141 301 7427**
- Macmillan Information Radiographer & Counsellor
Tel: **0141 301 7423**

The Beatson Cancer Centre has a Radiotherapy Advice Line available for patients who have completed treatment. This is an answer phone service, which is available Monday - Friday. Please leave your name, contact telephone number, hospital number or date of birth and a brief description of your concern. We will return your call as soon as possible. Tel: **0141 301 7432**

The Cancer Centre also has a Cancer Treatment Helpline for urgent calls. This is for patients on or within 6 weeks of treatment who have urgent or severe symptoms such as -

- Shivering or flu-like symptoms.
- Temperature greater than 37.5C.
- Gum/nose bleeds or unusual bruising.
- Worsening or sudden breathlessness.
- Leg weakness/difficulty walking.
- Severe nausea/vomiting/diarrhoea/constipation.
- Sudden increases or uncontrolled pain.
- Other concerning symptoms associated with your cancer treatment.

The line is available 24 hours for emergencies, although it would be helpful if you called early in the day if this is at all possible.

For Urgent Calls:

Beatson 8am-8pm Tel: 0141 301 7990

National 8pm-8am Tel: 0800 917 7711

The Macmillan Information & Support Centre is on Level 1 at the main entrance of the Beatson. They offer emotional support, information and signposting to services within and near to the Beatson and in your own local area. Open Monday to Friday 8.15am to 4.15pm. Please visit or phone on **0141 301 7390**.

Counselling and Clinical Psychology

This leaflet deals mainly with the physical aspects of your treatment, but your emotional wellbeing is just as important. Being diagnosed with cancer can be deeply distressing for you and those close to you. We have a counselling and clinical psychology service that can help with worries and difficulties you might be having. If you think this may be helpful to you, please ask staff to put you in touch.

There are also voluntary organisations providing information and support. These include;

- **Prostate Cancer UK:** Helpline: **0800 074 8383**. There are support groups throughout the country. Please check the website to find your local group. www.prostatecanceruk.org or call **0141 314 0050**.
- **Macmillan Cancer Support.** **0808 808 0000**
www.macmillan.org.uk Provides practical, medical, emotional and financial advice for those affected by cancer.
- **Maggie's Glasgow (Gartnavel Hospitals)** Tel: **0141 357 2269**
- **Maggie's Lanarkshire (Monklands Hospital)** Tel: **01236 771199**
- **Maggie's Forth Valley** Tel: **01324 868069**

Maggie's Centre provides a comprehensive cancer support programme for people and their families affected by cancer.

- **Cancer Support Scotland, The Calman Centre, Gartnavel Complex.** Freephone **0800 652 4531** or **0141 337 8199**.

Provides emotional and practical support on a one-to-one basis and through community based groups. Complementary therapies are available. **www.cancersupportscotland.org**

- **Macmillan Benefits Team (within the Beatson)**
Tel: **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**
- **NHS 24 111**
- If you are interested in finding out about becoming more active, please visit: **www.nhsggc.org.uk/getactive**

Written by H. Reid / E. Stewart May 2017

Reviewed by H. Reid, K. Nash, G. Buchanan, F. Birrell and M. Thomson September 2020

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