

Information for patients having radiotherapy for a gynaecological cancer



This leaflet is for patients receiving radiotherapy to the pelvis for a gynaecological cancer. It describes:

- What is Radiotherapy?
- How we plan and deliver your treatment.
- The effects that you may experience during and after treatment, and how best to cope with them.
- Who to contact if you have any questions or worries.

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. Most patients having radiotherapy are treated using a high energy beam of X-rays delivered to a precise area.

Radiotherapy is typically given in several small doses over a specific period of days or weeks. You will receive a list of appointments which will include planning and treatment dates and times.

Therapy radiographers operate the radiotherapy planning and treatment machines. They will be able to answer many questions or concerns that you may have. They can also direct you to your team if needed.

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

Depending on the fullness of your bladder and bowel, the area we want to treat can be in a slightly different position each day. To help minimise this, we will give you instructions to follow before your scan and treatment. This can help to:

- Limit the amount of bladder and bowel in the treatment area and 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. The enemas will help to empty the lower part your bowel. They will be given to you when you attend for your CT planning scan.

- **CT planning Scan:** You will need to use 1 enema before your CT scan. Your radiographers will explain how to use the enema (the instructions for use are also at the end of this leaflet).
- **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.

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 around 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. Try to drink at least 2 litres of fluid every day.
- Avoid caffeinated drinks- tea, coffee, energy drinks and fizzy juices. Try decaffeinated options.
- Limit your alcohol intake.
- You will need to be in the department at least half an hour before your treatment 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 start drinking. Please do not drink your water until we ask you to.
- Once you drink the water you should not empty your bladder until after you have had your scan or treatment.

The CT Simulator planning appointment

The first step in your treatment planning is a visit to the CT simulator. You will have a CT scan taken with you lying flat on your back. You will have a shaped rest under your legs and feet. This helps to keep you in the correct position and allows us to plan your treatment accurately. There are no results from this scan.



CT Simulator

Your radiographer will show you into a changing room where they will ask you to undress from the waist down. They will provide you with a gown to wear. You can keep your underwear on. Dignity is maintained by covering you whenever possible.

You will then be shown into the scanning room and asked to lie on the CT couch. Some small pen marks will be drawn on the skin of your pelvis. We will then place some stickers on top of these marks. Your radiographers will then move the couch in through the scanner. They will leave the room to start the scan but they are watching you at all times. It is important that you stay as still as you can. It will only take a few minutes.

Afterwards, we will remove the stickers and replace the pen marks with tiny permanent marks (tattoos) which look like freckles. These tattoos will be used to position you each day you come for treatment. The planning appointment only takes 10-15 minutes, but you are likely to be in the department for around one and a half hours. This is to allow time for the enema and also for you to drink your water.

Contrast injection

You may need to have an injection of contrast (dye) that will help us to see the area we want to treat more clearly. A doctor or radiographer will put a small needle (cannula) into a vein. We remove the needle, leaving a small hollow plastic tube in your vein. A piece of tape will be used to keep it in position during the scan. We will inject the contrast through this tube. It may feel a little cold but you should not feel any discomfort. You may need this dye for the CT planning process, but not for treatment appointments.

Some people can have an allergic reaction to the dye. This is rare but we will ask some questions when you arrive to ensure it is unlikely to happen to you. Your radiographers will monitor you during the injection and scan. If you feel anything unusual please tell us.

Treatment

Your radiographers will explain everything before treatment starts. We will check you know what to expect and how many treatments you will have. This can vary, but in general treatment lasts 5-6 weeks and is given Monday to Friday only.

You will have your treatment on a machine called a linear accelerator as shown on the next page.



Linear Accelerator

You will lie in the same position you were in during your CT scan. The lights in the room will dim for a few minutes while your radiographers make small adjustments to your position. They have to leave the room while the machine is on but they will monitor you on closed circuit TV. The treatment machine moves round about you but does not touch you. We will take some X-ray pictures and/or a scan to confirm your position before treatment starts. You may feel the couch moving slightly while we do this. It can take a few minutes but it is essential to ensure that your treatment is accurate.

Each treatment lasts 10-20 minutes, is painless, and you will feel no different immediately afterwards.

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 enough rest and sleep, especially when the treatment begins to make you feel tired. It is also important that you try to continue with some of your normal daily activities. A sensible balance between rest and activity may be most beneficial. Research has shown that gentle exercise is also helpful for people who have had a cancer diagnosis both in the short and longer term. There are programmes available that can help with this. Please let us know if you are interested in finding out more.
- The radiation from radiotherapy does not stay in your body. It is safe to be near other people, including children and people who are pregnant.
- Try to drink plenty of fluids throughout your treatment to avoid becoming dehydrated. You should aim to drink 2 litres of fluid every day.

Chemotherapy and radiotherapy

Some patients will have chemotherapy and radiotherapy together. Your doctor, clinical nurse specialist or specialist radiographer will discuss this with you before you start. We will ensure that you have all the necessary information before agreeing to treatment.

Brachytherapy

Your list of appointments may include visits for HDR. This is a specialised treatment that is performed on ward B3. You will not receive both types of treatment on the same day. If for any reason your HDR appointment is cancelled, we will try to schedule your radiotherapy that day instead.

Early effects of treatment

Each patient is an individual, and the effects of treatment will vary from person to person. Radiotherapy only affects the part of the body that is being treated.

The area being treated will gradually respond in a way similar to an 'inflammation'. This will include your bladder, bowel, part of the back passage (rectum/anus), front passage (vagina) and skin. Side effects usually start a few weeks into treatment and should settle 3-4 weeks after treatment ends. The following is a general guide to some of the effects you **may** experience.

Skin – The skin in the treatment area will be more sensitive and may become pink or red. Again, this tends to be a couple of weeks into treatment. You can treat this with creams; however it is **very** important that you only use those given or recommended by the Beatson staff. Please let us know if you have any problems. Your nurse or radiographer will spend time discussing skin care and hygiene during your treatment, but please feel free to ask if you are unsure about anything.

Bowel - After 2 - 3 weeks of treatment you are likely to develop a looseness of your bowel (diarrhoea). This may be accompanied by colicky or wind pains. If this happens, please tell your radiographers, clinical nurse specialist or specialist radiographer.

Vagina - You may also develop a mild clear discharge from your vagina. If you have a heavy, creamy, or discoloured discharge (yellow, green or brown) you should let your nurse or radiographers know. The vagina can also become inflamed which may make it more sensitive or even sore.

Bladder- You may experience a burning sensation when passing urine (cystitis). If you feel uncomfortable at any point during your treatment, it is important that you are reviewed by the clinical nurse specialist or specialist radiographer. They will assess your symptoms, and if appropriate ask you for a urine sample, or take a vaginal swab. Any medication required

to treat these symptoms will be issued to you from the gynaecology team during your treatment.

Tiredness - You will begin to feel quite tired during treatment. This tends to start 2-3 weeks into your treatment and will last a number of weeks afterwards.

Hair - There will be a loss of hair **only** in the treated area. This is usually temporary, although in some people it may not re-grow.

Diet - When you are having radiotherapy, it is important to eat well and choose from a wide variety of foods. There may be certain groups of food which you may not tolerate during your radiotherapy. These include certain fruits & vegetables, high fibre foods & spicy foods. Your appetite may be affected. If you are having chemotherapy along with your radiotherapy, you may also experience taste changes. Problems you have with food may only be temporary. The review staff will speak to you in more detail about your diet and give you advice.

Skin care during treatment

Radiotherapy only affects the skin that is in the area being treated and instructions on what to avoid apply only to that area.

- 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.
- Do not use any personal feminine hygiene products on the treated area as these may irritate your skin.
- You will find that you may be more comfortable if you wear loose fitting clothes, preferably with cotton next to your skin.

During your treatment, if you are attending as an outpatient, you will have a weekly review with a nurse or specialist radiographer. They will assess and treat any side effects, give advice and answer any questions you may have.

You will also have access to the **Cancer Treatment Helpline** (telephone number can be found in 'Where can I get help')

section) during your treatment and for six weeks after completion of treatment. We would encourage you to call this number if you have any concerns regarding treatment side effects. This helpline is available 7 days a week and 24 hours a day. Please do not wait until you come in for treatment to report any treatment side effects.

Late effects of Radiotherapy

We believe that the benefit of your radiotherapy treatment outweighs any longer term risks involved. However, you should be aware of potential long-term effects which **will** 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 effects are a general guide:

- Unfortunately, pelvic radiotherapy affects the ovaries. This means that if you are still having periods, the treatment will make you go through the menopause ('the change'). Your periods will stop and you will become infertile. You may also have symptoms such as hot flushes and dry skin. Your doctor may suggest you take hormone replacement therapy (HRT) or other treatments to reduce these symptoms.
- The cervix and womb lie very close to the bladder, bowel and rectum. All care is taken to reduce the chance of damage to these organs during your treatment. This can help to reduce the severity of any side effects. However, some people may still experience late effects including:
 - Diarrhoea or loss of control of your bowels. These symptoms will be discussed in detail with you during your weekly review and at your follow up appointments.
 - Rectal bleeding (blood from the back passage). This may seem very frightening at first but is not usually serious. As with any bleeding, you should inform your GP or specialist. They may wish to arrange some tests.

- Scarring in the bowel or narrowing of urethra (the tube that carries urine). This may cause a narrowing or even blockage, and surgery may be necessary to correct this.
- A small proportion of patients can develop urinary problems due to shrinkage of the bladder. You may experience irritation and the need to empty your bladder more often. Avoiding caffeinated or fizzy drinks and alcohol can help. You should also aim to drink 2 litres of fluid a day to keep hydrated. Sometimes a little blood may be seen in the urine. If this persists you may be referred to a Urologist for an examination.
- Soreness in the lower back or pelvis can occur due to fine cracks in the bones. This is managed with pain killers and usually settles over several weeks. Some people may also find physiotherapy helpful.
- Narrowing and shortening of the vagina after radiotherapy. Also, small fragile blood vessels can appear in the vagina which can burst easily resulting in spotting.

Your doctor will follow you up regularly, so it is important that you let them know of any changes in your bladder or bowel habit.

Remember, we believe that the benefits of radiotherapy far outweigh the risks described here, but this can be discussed in detail with your doctor.

Sexual activity

If you wish to be sexually active during your treatment, it is important to use a barrier method of contraception (condom).

Your treatment tends to make the vagina more sensitive and sometimes even sore. It may also feel drier. Please discuss this with your doctor, clinical nurse specialist or specialist radiographer if you would like further advice. Do not feel embarrassed about asking as this is part of the routine advice and care we offer. There are other professionals available who would be pleased to talk to you. Ask your doctor, specialist nurse or specialist radiographer to put you in touch.

Radiotherapy can cause some scarring in the tissues of your vagina, which can make it feel firm or tight. You may be given vaginal dilators which can gently stretch the vagina. This should allow sexual intercourse to be more comfortable. It will also allow future examinations to be easier and more comfortable.

Sexual intercourse may not be easy at first. You may feel nervous and uncomfortable. Your vagina may be a little dry and sore. Lubricants may be helpful e.g. Sylk lubricant. Your partner should also try to be helpful and understanding. It might help to let your partner read this leaflet. Sympathetic support from your partner will go a long way to help. You may also benefit from hormone replacement therapy (HRT) but this must be discussed with your consultant or GP first.

Once you have completed your treatment, our aim is to get you back to as full and normal a life as possible. This is a private and personal issue for each patient; therefore, we would be happy to give you individual advice. Please ask if you have any questions or problems in this area.

You will be seen by your consultant for follow up 6-8 weeks after your treatment is finished. By then you should be able to start thinking about resuming intercourse if you had stopped due to treatment. Ask your doctor or nurse about this if they forget to discuss it with you.

After treatment ends

In most cases, symptoms that have developed during treatment will wear off a few weeks after it ends; however the tiredness will take a little longer.

If on completion of treatment you are experiencing any ongoing symptoms (late effects) and feel they are not improving, please speak to your oncology team or GP.

Sometimes these symptoms can be a result of pelvic radiation disease (PRD). If your oncology team think you have PRD, you will be referred to the PRD late effects team at The Beatson

West of Scotland Cancer Centre. If this is not offered to you, please ask your team to refer you.

You can find out more about the PRD late effects clinic here:

🌐 <https://www.beatson.scot.nhs.uk/patients-and-visitors/information-support-services/late-effects-pelvic-radiation-disease/>

The Pelvic Radiation Disease Association (PRDA) is a charity which provides useful information, including:

- What would be considered a late effect?
- How can I manage these effects?
- When should I seek help or support?

Please visit their website for more information:

🌐 www.prda.org.uk

Nutrition - If diarrhoea persists, please follow previous nutritional advice until your bowel activity returns to normal. Your radiotherapy doctor will arrange to see you 6-8 weeks after treatment ends.

Instructions for using the enema

- Pull or twist cap off the tube.
- If you want to lubricate the nozzle before inserting it, 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 pull the nozzle out of your back passage. This is to stop the medicine from being drawn back into the tube.
- Wait for the laxative to work (5-15minutes).
- If you have no bowel movement in 15 minutes this means your rectum is already empty. Do not strain.

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:

- Gynaecological Nurse Specialist - Tel: ☎ 0141 301 7615
- Specialist Radiographer - Tel: ☎ 0141 301 7449
- Information and Support Radiographer Tel: ☎ 0141 301 7427

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**. Tel: ☎ 0141 301 7390

The Beatson Cancer Centre has a **Radiotherapy Advice Line** available for patients who have completed treatment. This is an answer phone service run by experienced radiographers. Please leave your name and telephone number and a radiographer will call you back 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.
- Worsening or sudden breathlessness.
- Leg weakness/difficulty walking.
- Severe nausea/vomiting/diarrhoea/constipation.
- Sudden increased or uncontrolled pain.
- Other concerning symptoms associated with your cancer treatment.

The line is available 24 hours for emergencies.

For Urgent Calls:

Beatson 8am-8pm Tel: ☎ 0141 301 7990

National 8pm-8am Tel: ☎ 0800 917 7711

Counselling and Clinical Psychology

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 deeply distressing time for you and those closest to you. Within the department, 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:

- **Macmillan Cancer Support. ☎ 0808 808 0000**
🌐 www.macmillan.org.uk
 - Providing practical, medical, emotional and financial advice for those affected by cancer.
- **Maggie's Gartnavel: ☎ 0141 357 2269**
- **Maggie's Lanarkshire, Monklands Hospital ☎ 01236 771199**
- **Maggie's Forth Valley: ☎ 01324 868069**
 - Maggie's Centre provides a comprehensive cancer support programme for people and their families affected by cancer.
🌐 www.maggies.org
- **Cancer Support Scotland - The Calman Centre, Gartnavel Complex. Freephone ☎ 0800 652 4531.**
 - Provides emotional and practical support on a one-to-one basis and through community based groups. Complementary therapies available.
🌐 www.cancersupportscotland.org

- **Beatson Cancer Charity Wellbeing Centre.**
☎ 0141 301 7667
 - Located on Level 4 in the Beatson. Provides a space to relax and offers various services including complementary therapies, podiatry and wig fitting/hairstyling. Ask staff members for further details.
Open Mon-Fri 9am-9pm, and Saturday 10am-5pm.
- **Macmillan Benefits Team (within the Beatson)**
☎ 0141 301 7374
 - Provides free and confidential advice for people affected by cancer and their carers.
- If you are interested in finding out about becoming more active, please visit: 🌐 www.nhsggc.org.uk/getactive
- **Beatson West of Scotland Cancer Centre** - if you want to find out more about our Centre please visit:
🌐 www.beatson.scot.nhs.uk
- **NHS 24** ☎ 111

Care Opinion

We welcome your comments and feedback about our service.



If you would like to give us feedback please go to:

🌐 www.careopinion.org.uk

or telephone ☎ 0900 122 3135

or scan the QR code:

