

# Information for patients and carers

# Radiotherapy for Prostate Cancer

# **Details of your treatment**

This leaflet is designed for patients who are receiving radiotherapy to the prostate and/or lymph nodes or prostate bed. If you have recently been diagnosed with prostate cancer, it is normal to experience a wide range of emotions.

Your partner, family or friends might also find this leaflet useful to understand what you are currently experiencing so that they can help to support you.

# What is radiotherapy?

Radiotherapy is a specialised treatment which uses precise, carefully measured doses of radiation to treat cancer.

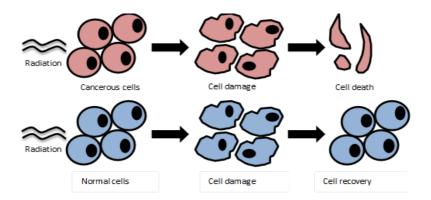
Treatment is given by highly trained radiographers, using specialised machines known as linear accelerators. The radiographers and planning staff work closely with your consultant to plan and deliver your treatment.

## How does radiotherapy work?

Radiotherapy uses high energy X-rays to treat prostate cancer. The X-ray beams are directed at the treatment area and cause damage to cells in the treatment area.

Normal healthy cells can recover from this damage, whereas abnormal cancer cells cannot.

Radiotherapy is therefore given to kill the cancer cells in the targeted area and reduce the chances of your cancer recurring (coming back) or delay its progression. The treatment itself is painless and there is nothing to feel



#### Will I be radioactive?

If you are having external beam radiotherapy you <u>will not be</u> <u>radioactive</u>. It is safe to be in close contact with people, including pregnant people, babies, and children.

# When will my radiotherapy start?

After your consultant or specialist nurse has discussed your treatment options with you, you will receive an appointment to attend your radiotherapy planning scan appointment. You will be given your first radiotherapy treatment appointment when you attend for your planning scan.

The planning scan appointment is used to plan your radiotherapy treatment; this can take up to 3 weeks. Please do not be alarmed if you feel there is a long time between these appointments, this is due to the complex nature of the planning process.

Some patients may be required to start a course of hormone therapy before they can start radiotherapy treatment. If this is relevant to you, your consultant or specialist nurse will discuss this with you.

If you require certain times and/or hospital transport, please let a member of staff know before you start treatment. The radiotherapy appointment team will do their best to accommodate your request, however this cannot always be guaranteed.

# **Before your treatment**

#### **Pre-treatment**

At the planning appointment you will have a CT scan of your pelvis. The treatment planning team use this scan to accurately plan your radiotherapy treatment, whilst ensuring that surrounding areas close to the treatment area do not receive more radiation than necessary.

Before the planning scan can take place, we may ask you to use micro enemas, which will be explained to you prior to this appointment. You may be asked to use micro enemas in the days leading up to your scan and the day of your appointment approximately 1 hour before your scan. If you have any concerns or questions regarding the use of enemas, please speak to a radiographer.

Some patients may also be required to drink water or to empty their bladder prior to the scan, the radiographers will inform you of this before your first appointment.

You may need to have a dye injection for the scan, known as contrast. Your radiographer will discuss this with you if it is required. Please note that if you need to have the dye injection, we ask that you stay in the department for up to 30 minutes afterwards. This is to ensure you are feeling ok after the dye injection. This will not be required for treatment.

# **During the scan**

For the scan radiographers will position you as required for treatment, which includes lying on your back with your arms on your chest. Support will be given under your head and knees to aid comfort. It is important you can manage this position for around 15 minutes. The radiographers need to access your pelvis area, but you will be covered as much as possible, and radiographers will always maintain your dignity.

After the scan, radiographers may give you four small permanent marks, no bigger than a freckle, using a small needle and some ink. They are used to help the radiographers get you in the correct position for treatment every day and ensure accuracy of the treatment.

# **Radiotherapy Treatment**

Prior to your treatment a radiographer will discuss the treatment process and answer any questions you may have, as well as giving you your full list of appointments.

For the first 5 treatments we ask that you do a micro enema approximately 1 hour before your treatment time, this is to help ensure your bowels are the same as when you came for your planning scan. If you did any bladder preparation for your planning scan, you will need to do this before treatment as well. Please speak to a radiographer if you are unsure.

It is always advised to give yourself enough time before your appointment to undertake the pre-treatment preparation e.g. micro enemas.

It is very important that you do not miss any of your radiotherapy appointments, as this may make the treatment less effective. If you are feeling too ill to attend your treatment, please call the department and speak to a member of the team to see if we can assist.

For your radiotherapy treatment, you may be asked to change into a gown in a changing cubicle. You will then lie down in the same position as when you came for the planning scan.

The radiographers will then make sure you are in the correct position for treatment. Once the radiographers have completed their checks, they leave the room to start the treatment. Only the patient can be in the treatment room when the machine is delivering treatment, but staff will monitor you via CCTV.

The radiographers will firstly complete a CT scan, to verify your position and you may feel the bed move as they make minor adjustments.

The radiographers will then begin treatment from outside of the room, this will only take several minutes and there is nothing to see or feel during treatment. The whole treatment process takes approximately 15 minutes.

#### Treatment reviews

Depending on your treatment regime, you may have scheduled review clinics with your consultant or the review team, within the department or over the phone.

These review clinics are for you to discuss any concerns or side effects that you may be experiencing from treatment.

The review clinics are scheduled on specific times and days and will be scheduled on your treatment appointment list.

## Staff you will meet

We are a mixed gender department and treatment will be given by male and female staff members.

Royal Preston Hospital is a teaching hospital which means that we train and support undergraduate and postgraduate radiotherapy students and medical students. Students take an active part in treatments and are closely monitored by qualified staff.

#### Side effects

Most people will experience side effects of radiotherapy, although the severity will vary from person to person.

Side effects do not usually happen straight away but may start to develop around a week into your treatment, and they will continue after treatment finishes.

You will be given advice by the review team and treatment radiographers on how to manage any side effects.

#### Short term side effects

Short term side effects start during or shortly after radiotherapy and usually resolve within two to six months. These side effects vary in frequency and will be explained in more detail during the consent process.

- Fatigue
- Increased frequency/urgency passing urine
- Increased frequency/urgency emptying bowels
- Changes to your usual bowel habits
- Rectal bleeding
- Skin reactions

#### Late side effects

- Changes to skin such as discolouration.
- Bowel symptoms including bowel frequency, urgency.
- Mild/ moderate bowel incontinence.
- Sexual dysfunction.
- Urinary symptoms.
- Pelvic bone thinning.
- Small risk of developing a second cancer due to radiotherapy.

The late or long-term effects of radiotherapy can occur several months and years after the radiotherapy has finished. This is dependent on your treatment site and will be monitored and managed at your routine follow-up appointments. Long term side effects also vary in frequency and this will also be explained during the consent process.

#### **Diet**

As changes to your bowels are common during radiotherapy you may be asked to adjust your diet during treatment. This will be discussed with you by radiographers or the review team and there is a separate information leaflet available. Please ask a member of staff if you would like a copy of 'Dietary Information for patients undergoing Radiotherapy to the pelvis.'

#### **Hormones**

Some patients may be required to undertake hormone therapy before, during and after radiotherapy treatment. Patients can experience side effects from these as well. If you have any questions about hormone therapy, you can speak to anyone from your clinical team.

# After your treatment

After you have completed your course of radiotherapy your consultant or review team will explain your follow-up procedure. It is important to be aware any side effects can continue to worsen after treatment but should have improved by your follow up appointment which is usually 6-8 weeks after treatment finishes.

You will receive an appointment through the post to see your consultant or specialist nurse around 6-8 weeks after completion of your radiotherapy. You may be asked to have a blood test to check your PSA and/or testosterone levels before your follow up; this will be explained to you at your last on treatment review.

Please remember that you are free to contact the department at any time after your treatment has finished should you have any concerns or questions. You will be given a summary letter towards the end of your radiotherapy treatment containing contact information for the department.

Returning to normal life takes time and it is a gradual process which involves a period of readjustment, all of which will be individual to you. It is not possible to be specific about the amount of time it will take for each person. You can return to work as soon as you feel well enough. This can vary between patients depending on how physically demanding your job is.

# **Smoking**

It has been proven that smoking can make your radiotherapy side effects worse and reduce the effectiveness of the treatment. It is important that you reduce or stop smoking whilst on treatment.

We understand that this may be difficult at such a stressful time and staff are very open to discussing this with you and offering you the support you may need.

#### **Contact details**

Should you require further advice or information please contact:

Radiotherapy Reception (01772) 522923

Appointments (01772) 522931

Transport (01772) 522295

If you would like to watch a short information video about radiotherapy, please scan the QR code below.



#### Sources of further information

www.lancsteachinghospitals.nhs.uk

<u>www.nhs.uk</u>

www.accessable.co.uk

#### Stop smoking services

https://www.nhs.uk/better-health/quit-smoking/find-your-local-stop-smoking-service/

#### **Macmillan at Rosemere Cancer Centre**

https://tinyurl.com/38z3d2fy

#### (01772) 523709

Lancashire Teaching Hospitals is a smoke-free site. Smoking is not permitted anywhere on any of our premises, either inside or outside the buildings. Our staff will ask you about your smoking status when you come to hospital and will offer you support and advice about stopping smoking this will include Nicotine Replacement Therapy to help manage your symptoms of withdrawal and the opportunity to speak to a nurse or advisor from the specialist Tobacco and Alcohol Care Team.

Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

www.lancsteachinghospitals.nhs.uk/cancer-patient-information-leaflets

**Department**: Radiotherapy

**Division**: Surgery

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