The Royal Wolverhampton
NHS Trust

Internal Radiotherapy (Brachytherapy)

Oncology

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- **Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available**
- **If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111**
- **Keep the environment clean and tidy**
- **Let's work together to keep infections out of our hospitals and care homes.**

Introduction

Your doctor has suggested a course of internal radiotherapy for you. This leaflet has been written to give you more information and to answer some of your questions about the treatment that you have been offered.

What is internal radiotherapy?

An applicator (this can be a plastic tube or three metal tubes) is inserted into the vagina and if still present, through the cervix and into your uterus (womb). The machine feeds a radioactive seed into the applicator which remain in the tube during treatment.

Consent

We must seek your consent for any procedure or treatment beforehand. Your doctor will explain the risks, benefits, and alternatives where relevant before they ask for your consent. If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to ask for more information.

What are the benefits of having the treatment?

This treatment can be given alone or alongside other treatments. It aims to kill all your cancer cells. The choice about which treatment is best for you will be made together with your doctor. This will be based on the risks and benefits of the treatments and your individual circumstances.

Are there any alternatives to having internal radiotherapy and what would happen if I decided not to have this treatment?

Your doctor will discuss with you any other treatment options that may be available to you. Your doctor will also discuss with you what would happen if you decided not to have radiotherapy treatment.

Are there any risks involved in having the treatment?

Yes. Here are some of the side-effects that may occur when having internal radiotherapy;

- **Scar tissue formation (adhesions)**
  When you have had vaginal radiotherapy you may develop scar tissue on the walls of your vagina. This sometimes happens as part of the healing process, in order to reduce the risk you will need to use vaginal dilators. You will be supplied with a letter for your GP to prescribe dilators and taught how to use them
- **Hardening & shrinking (stenosis) of your vagina**
  In order to reduce the risk you will need to use vaginal dilators. You will be supplied with these and taught how to use them. You will be given a contact number for the Oncology Clinical Nurse Specialist along with an appointment for approximately six weeks. You can contact your Clinical Nurse Specialist at any time if you have any concerns. You can continue with normal sexual relations unless advised otherwise
- **Alteration of bowel habits**
  You may find your bowel pattern changes, varying between constipation and diarrhoea. You may need medication to help manage this. They should then settle. However, your bowels may never return to the pattern before treatment. If your bowel habits continue to cause you concern, please contact your GP
- **Irritation of your bladder**
  Radiotherapy can irritate your bladder and lead to symptoms of cystitis. We recommend that you drink plenty of fluids to help prevent this. Drinking lemon barley can also help
- **Tiredness**
  It is usual to feel tired after this treatment for several weeks. Try to rest when you can. Sometimes a small amount of gentle exercise can help. Ask family and friends to help if you can. There is an information leaflet available to help with this

- **Vaginal discharge or bleeding**
  You may have a vaginal discharge or some light bleeding following treatment. This is normal and to be expected. However if the bleeding becomes too heavy or the discharge smells, contact your doctor or nurse
- **Skin soreness and chaffing**
  How your skin reacts to the treatment depends on your own skin type and the area treated. Some people have no skin reactions at all. Common reactions you may see are reddening and dryness in the area treated. The radiographers look out for these reactions and will give you advice on how to cope with any skin changes

You may find it helps to follow these instructions when washing;

- Gently wash the area in warm water
- Pat the skin dry with a soft towel
- Expose the treated area to the air when you can
- Avoid rubbing the skin
- Do not apply heat to the treatment area and protect the skin from the sun
- Please let your radiographer know if you feel any soreness

You should not use any other creams, ointments or lotions in the treatment area unless these are prescribed by your radiotherapy doctor or given to you by a radiographer. Any skin area not treated should be washed as normal.

Two to four weeks after radiotherapy skin reddening usually subsides after which you can go back to normal washing. If you have any other questions about skin care please ask your radiographer.

Radiation risk

There is no radiation risk; once your treatment is over you are not radioactive in any way. This means that you do not have to worry about keeping away from other people when you go home.

What can I expect before the treatment starts?

Depending on your age and circumstances, you may require a pregnancy test as radiotherapy is dangerous to the unborn child.

What will happen the day before the treatment?

You will need to come into hospital the night before your treatment begins. You will be given an enema on this day and another early the next morning before theatre. This is to help empty your bowel. Our aim is to prevent you opening your bowels during treatment.

We will advise you on what diet you can eat during your treatment.

Because you are having an anaesthetic you will not be able to eat or drink anything after midnight, the night before you go to theatre.

What will happen on the day of the treatment?

In order for us to be able to deliver the treatment the doctor will put the applicator into your uterus (womb) and vagina and secure it in place ready for the radioactive seed. Before putting the applicator inside you the doctor has to examine you to ensure that the applicator will fit correctly. This is done in theatre and is done either under a general anaesthetic (where you will be asleep) or epidural or spinal anaesthesia (numb the area but you will still be awake).

They will also put another tube called a catheter into your bladder. This means that you will not need to worry about passing urine while you are having the treatment. Following insertion of treatment applicator you need to remain still and will be unable to get out of bed until the applicator has been removed

On your return from theatre once you are fully awake you will have both a CT scan and an MRI scan to check the position of the applicator and to enable us to plan your treatment.

You will be brought down from the ward on your hospital bed to the radiotherapy department for your treatment.

What can I expect when the treatment starts?

You are connected to the machine via some tubes. You will feel no sensation from the treatment, much the same as when you have an X-ray picture taken. The treatment can be between approx six mins and 15 mins.

How long will the treatment take?

As soon as your treatment has been planned, we will be able to tell you how long your treatment will take. As every patient's treatment is individually tailored to their needs; each patient's treatment will take a different amount of time to deliver. The brachytherapy staff can see you during treatment via a camera.

As a rough guide you should expect to stay in hospital for about three days.

Your movement in bed will be restricted. We will occasionally ask you to lift your bottom slightly off the bed. This will help reduce the risk of your skin becoming sore.

We will encourage you to drink plenty of fluids.

Visitors will be kept to a minimum during your treatment.

You may want to bring plenty of reading material to keep you occupied.

Normally you will have two treatments. The first is late afternoon and the second the next day in the early afternoon. You will have another CT scan early on the second day to check the position of the applicators.

What can I expect when the treatment finishes?

Once the second treatment has finished the brachytherapy staff remove your applicator and catheter. This may feel uncomfortable. If this happens the nurses will give you painkillers.

After lying flat for so long you may dizzy when you sit up. Therefore we encourage you to do this slowly. A nurse will be with you. Once you have passed urine without the catheter, you maybe allowed to go home. You will need to arrange for someone to come and collect you. In most cases, the brachytherapy procedure is repeated the following week, which means you will have a total of four treatments.

Are there any long term effects from the treatment?

- **Alterations to bowel and bladder habits**
  Prolonged alteration to bowel and bladder habits is a rare complication.
- **Early menopause**
  Internal radiotherapy will lead to an early menopause if you have not already had your menopause. Symptoms can include;
  - Hot flushes
  - Night sweats
  - Joint aches and pains
  - Dryness of the vagina
  - Mood swings
  - Feeling low and anxious
  - Being less interested in sex for a time

Where can I get more information?

If you have any questions or concerns about the internal radiotherapy treatment, please speak to your doctor or contact:

The **Gynae Oncology Nurse Specialist** on **01902 695164**
(Mon - Fri 9:00am - 5:00pm)

Brachytherapy Radiographers 07825 781820

Macmillan Cancer Support
Macmillan is a national charity providing telephone advice and free written information on cancer and support services.
Telephone 0808 808 0000
www.macmillan.org.uk

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。

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