



### What will happen when I come for my radiotherapy treatment?

#### **This information is for external radiotherapy.**

The radiographer will go over your personal details and explain what is going to happen to you. You may be asked to change into a treatment gown or just remove your clothing. Radiotherapy machines are very big and are either fixed in one position or able to rotate around your body. Some people feel a little bit nervous when they first see the treatment room. This is normal but your radiographers will be able to reassure you.

The radiographers will position you carefully on the treatment table. They will move the machine above the area that is to be treated, using your skin markings to line up the radiotherapy beams. This will probably take longer than the treatment itself.

When the radiographer has both you and the radiotherapy machine in the correct position they will leave the room. You will be alone in the room when receiving your treatment but watched through a window or on a monitor by the radiographers at the control desk. You may be able to speak to them through an intercom and they may be able to speak to you. It is important that you stay very still during treatment. The machine may rotate around you during treatment. Treatment itself usually only takes a few minutes and is painless.

#### **How is internal radiotherapy given?**

Before this procedure you will usually be given a sedative to make you sleepy. A narrow, flexible tube called a bronchoscope will be inserted through your mouth or nose into your airways. A thin tube called a catheter is then passed through the bronchoscope and into your lung. The radiation is then given to the lung through the catheter. The doctor leaves it in place for a few minutes and then removes it. Giving the treatment this way means that radiation is delivered directly to the cancer cells and surrounding healthy cells are not affected. This reduces the risk of side-effects.



### **Is receiving radiotherapy painful?**

No, the treatment itself is totally painless, although you may find the treatment table hard and slightly uncomfortable. If you have internal radiotherapy it can be a bit uncomfortable when the tube is inserted, but this doesn't last long. Your doctor can prescribe painkillers if you have discomfort.

### **How do the doctors know if the radiotherapy is working?**

The treatment can go on working for many weeks after the radiotherapy course has finished, so it is sometimes difficult to know straight away whether there has been a response. Your doctor will use a combination of x-rays and scans to find out if there has been a reduction in the size of your tumour. Remember the results will never be normal as radiotherapy causes inflammation and scarring to the lungs. However, if your symptoms have improved that would indicate a response.

### **Should I change my diet during radiotherapy?**

Try to maintain a healthy diet. Avoid alcohol, very hot drinks, rough foods (like crisps or crusty bread) and strong spices, particularly if your gullet (throat) has become irritated. Try mashing foods, adding sauces/gravies, or mixing smoothies. If you experience a burning feeling in your gullet and have difficulty swallowing, there is a medicine that can be prescribed to ease this discomfort. Regular painkillers can also help. Ask your doctor or lung cancer nurse specialist for advice.

### **Am I radioactive?**

No you are not radioactive and you can still mix with family and friends.



### Are there any side-effects?

All forms of cancer treatment have side-effects of one sort or another. Radiotherapy does have side-effects, although they vary from person to person depending on the type of treatment you have and your general fitness. Not everyone who experiences radiotherapy will experience side-effects. **If you have radical radiotherapy you are more likely to have more side-effects than if you are having palliative radiotherapy.**

### Short-term side-effects

The following symptoms can begin during your treatment and may continue for a short time after your treatment has finished. Your radiotherapy nurse or doctor will see you regularly throughout your treatment and radiographers are available daily to answer any questions you may have.

- **Increase in your cough and sputum (spit)**

Don't worry, this is quite normal, but if you are having difficulties let your doctor know. Please make sure you let your doctor know if your spit is bloody or discoloured.

- **Itchy dry skin** Your skin in the treated area may become a little pink or red. It may also feel a little dry or itchy. You may bathe or shower during treatment, but do not have the water too hot. Use mild baby soap and try not to rub the treated area too hard. It's best to pat the area dry with a soft towel. Avoid perfumed talcum powder or lotion.

- **Pain in your chest in the 24 hours after the first treatment**

This is usually mild and settles down fairly quickly. Use an over-the-counter painkiller and if this does not work speak to your GP.

- **Sore throat**

This is caused by the gullet (oesophagus) becoming irritated by the treatment. There are soothing liquid medicines which can be prescribed by your doctor. However, you may find cool/lukewarm drinks or ice-cream soothing. Eat food that is soft or mushy, for example, porridge or soup.



- **Extreme tiredness following treatment (fatigue)**

This can last for a number of weeks after treatment has ended. Make sure that you take it easy and rest when you feel tired. However, please also remember that small amounts of regular exercise can help in your recovery too.

### Long-term side-effects

Radiotherapy can also cause the following long-term side-effects:

- **Scarring of the lung (pulmonary fibrosis)**

This might lead to your lung not working quite as well as it did before. You might notice a slight increase in breathlessness. If this becomes a problem, see your hospital doctor or GP, as there are medicines and breathing exercises which can help.

- **Scarring of the oesophagus (food pipe)**

This may make it difficult to swallow solid food. Occasionally, a minor operation may be required to stretch your oesophagus.

- **Spinal cord/heart damage**

As the treatment is often close to these areas there is a very rare chance they may be damaged. Your doctor will explain if you are at high risk of damage.

You will be given a contact number to phone if you experience difficulties with side-effects. This number should be used at times when it may be difficult to contact your lung cancer nurse specialist or doctor, such as during the night or at the weekend. There is space at the end of page 21 for you to write down the phone numbers.

## GIVING HELP AND HOPE

The charity has two aims:

**Supporting people living with lung cancer** - Working closely with lung cancer nurses, we provide information, run lung cancer support groups and offer telephone and online support. Our patient grants offer some financial help to people affected by lung cancer.

**Saving lives** - We fund lung cancer research, campaign for better treatment and care for people who have lung cancer, and raise awareness of the importance of early diagnosis. Our lung cancer prevention work helps people to quit smoking and encourages young people not to start smoking.

**Call us on 0333 323 7200 (option 2)**

This information has been taken from the following sources:

Lung cancer—answering your questions: Radiotherapy for lung cancer 2014