

Radiation Therapy for Endometrial Cancer

You and your doctor have chosen radiation therapy as part of your cancer treatment. This handout describes:

- What to expect.
- How to care for yourself during treatment.
- How to reduce side effects and increase your comfort during treatment.

If you have any questions, please ask your doctor or nurse.

Most often, 25 to 33 radiation (external beam) treatments are prescribed. The radiation treatment itself is just like having an X-ray. It is not painful; you will not feel anything.

Treatment Planning

Once the decision to proceed with radiation has been made, you will be scheduled for a planning session or a simulation. This session will last between 30 minutes and 1 hour.

During this session, your doctor will take X-rays that will help target the radiation treatment area.

Treatment Schedule

The treatments are given Monday through Friday. Your therapist will work with you to set up daily appointment times, each lasting 15 to 20 minutes. While the actual treatments take only a few minutes, it is best to allow an hour for:

- X-rays.
- Meetings with your doctor or nurse.
- Any unexpected delays.

X-rays are done weekly to assure the precision of your position on the table. The X-rays are not used to diagnose problems and do not assess treatment effects.

You will meet with your doctor at least once a week on _____.
Your treatment and side effects are checked during these visits. Any concerns about your disease and treatment can be discussed at this time.

After you finish your external beam treatments, your doctor will likely prescribe internal radiation to give a “boost” of radiation to the top of your vagina (vaginal cuff). This is called High Dose Rate, or HDR. HDR is done in the radiation clinic. Most often, 3 treatments are done. Your nurse or doctor will give you more information about this treatment.

Skin Marks

Often, permanent marks called tattoos are used to identify the exact location of the treatment area. These marks are freckle-sized and will not fade. You may wash your skin in this area as usual.

Sometimes, ink pen marks are used. To prevent the loss of these marks, clear medical tape is often placed over the ink. Do not remove this tape or the marks. Take care when you wash your skin so that you do not wash off the marks. If your marks start to fade, please tell your therapist. Do not redraw them yourself. If you are allergic to tape, tell your therapist or nurse.

Common Side Effects

Burning with Urination

Radiation can irritate your bladder and urethra (tube that carries the urine from the bladder out of the body). This can cause burning when you pass urine, a condition called **cystitis**.

If you develop cystitis, increase your fluid intake. By drinking more, your urine contains more water and is less irritating to your urethra. If the cystitis persists, your doctor may ask for a urine sample to test for a bladder infection. If you do have an infection, your doctor may prescribe antibiotics. If there is no infection, your doctor may prescribe some medicine that will decrease the burning.

Diarrhea

Part of your large bowel or colon may be in the treatment area. The intestine’s rapidly-dividing cells are more sensitive to the radiation. As a result, abdominal cramping and diarrhea can occur. This effect usually is seen after 10 to 14 treatments. Some patients may develop diarrhea sooner, while some never have diarrhea at all.

To help decrease the radiation to your bowel, your doctor wants you to drink 3 to 4 glasses (24 to 32 ounces) of water 30 minutes before each treatment to fill your bladder. When your bladder is full, it pushes up on your bowel and helps move it out of the treatment site. This will help decrease abdominal cramping and diarrhea.

If you have diarrhea, tell your doctor or nurse. Be sure to contact them if you have diarrhea 4 or more times in a 24-hour period as this can lead to dehydration. Your doctor or nurse may suggest a low fiber diet. If your doctor prescribes **Imodium® A-D (loperamide hydrochloride)**:

- Take 2 tablets taken with the first loose stool.
- Then take 1 tablet after each subsequent loose stool.

However, it is important that you not take more than 8 tablets a day.

Be sure to stay well-hydrated. During your treatment, you should drink at least 8 8-ounce glasses or 64 ounces of non-carbonated, non-caffeine fluids, such as water, juice, or sports drinks daily.

Nausea and Vomiting

Some times, parts of your stomach and small intestine may be included in the radiation treatment area. This can irritate the lining of your stomach and small intestine that can cause nausea. Many patients develop nausea after about 5 to 10 treatments (1 to 2 weeks). But this varies with each person. You may develop nausea sooner, later, or not at all. Nausea is often worse if radiation and chemotherapy is given at the same time.

Your nausea may or may not cause you to vomit. Some patients have nausea within a few hours after their radiation treatment. Others have nausea when they try to eat.

Let your doctor or nurse know if you start to feel queasy or vomit and at what times of the day it seems better or worse. There are many different medicines that your doctor can prescribe for you. Some you can take before your treatment to prevent nausea.

Skin Changes

During radiation, you may notice some changes to the skin folds of your groin or the , vagina and anus (perineal area). Most often the treated area may become dry and peel. Or, it may darken in color or become red and irritated. It is very important that you keep these areas clean and dry. During treatment, clean the area with:

- A bath soap made for sensitive skin. Some suggested soaps are: Basis for Sensitive Skin®, Dove for Sensitive Skin® or Neutrogena Unscented®. Avoid using soaps that are heavily scented or antibacterial.
- Lukewarm water. Hot water can further irritate the skin.

Be sure to pat your skin dry; do not rub.

Many women also notice that the elastic in underwear can worsen the irritation to the skin folds in the groin. If this is a problem, try to wear loose underwear that does not bind or rub the skin, such as boxer shorts.

If the perineal skin becomes irritated and sore, stop using toilet tissue and use baby wipes or soft, damp washcloths to clean yourself after having a bowel movement.

You may want to use a sitz bath, (found at drug stores), to help clean your perineal skin. (Your nurse can explain how to use a sitz bath at home.)

Your doctor or nurse may also suggest a special cream or lotion to help moisturize your skin in the treatment area such as Biafine Emulsion[®]. **Do not put these creams on your skin during the 2 hours before your treatment, as it will make your skin more sensitive to the effects of radiation.**

You may also notice some loss of your pubic hair. This is a normal effect of the radiation. The hair will start to grow back after your treatments are complete.

Fatigue

Fatigue is a common side effect, but varies with each patient. Stress about your illness, daily trips for treatment and the effects of radiation on normal cells may make you more tired.

Fatigue often begins after 10 treatments. It is often worse at the end of the week but seems to improve over the weekend. It may last several weeks to several months after your treatment has ended.

Plan activities early in the week, when energy levels are higher. Try to keep regular hours, getting up at the same time 7 days a week. Try to keep active and exercise if you can. It is important not to overexert yourself. If you become tired, plan for rest periods during your day.

Vaginal Discharge

It is common for women to develop some vaginal discharge during radiation treatments for cervical cancer. The discharge may be white or yellow and may be thick or thin. As needed, wear a panty liner. Tell you doctor or nurse if you:

- Have a lot of discharge.
- Notice that the discharge has an odor.

This could be a sign of a vaginal infection, which would require medication.

Vaginal Dryness and Stenosis

Radiation treatments can cause scar tissue to develop in your vagina. This decreases the size and length of your vagina (vaginal stenosis).

Scar tissue is less elastic than normal tissue. As a result, you may have discomfort during vaginal exams and intercourse. After you finish your treatments, your nurse will give you a vaginal dilator and talk about its use. The dilator will help break up any scar tissue and help decrease the stenosis.

After your treatments are completed, you may also notice some vaginal dryness Using a water-based lubricant such as K-Y Jelly[®] or Astroglide[®] can ease discomfort during intercourse.

After pelvic radiation, some women also report having a difficult time reaching orgasm. If you have any problems resuming intercourse, discuss it with your doctor or nurse. They can refer you to a trained health care provider who can assist you with your sexual concerns.

Health Information Resources

For more information, visit one of Northwestern Memorial Hospital's Health Learning Centers. These state-of-the-art health libraries are located on the third floor of the Galter Pavilion and on the first floor of the Prentice Women's Hospital. Health information professionals are available to help you find the information you need and provide you with personalized support at no charge. You may contact the Health Learning Centers by calling 312-926-LINK (5465) or by sending an e-mail to hlc@nmh.org.

For additional information about Northwestern Memorial Hospital, please visit our Web site at www.nmh.org.

Para asistencia en español, por favor llamar a el departamento de representantes para pacientes al 312-926-3112.

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