Radiation Therapy for Prostate Cancer

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

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

Most often, 25 to 40+ 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 2 hours. It involves placing a small tube (catheter) in your rectum and in the urinary bladder. This is done to help identify the exact treatment site.

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 over the 5 to 8 weeks. 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 external beam treatments, your doctor may prescribe a prostate seed implant.
For the radiation implant, very small radiation “seeds” are injected into your prostate. These seeds release radiation to your prostate over time.

As the radiation breaks down, it is given off by your body. To safeguard others from radiation you will need to take certain steps. Your nurse will review the specific guidelines with you before you have your implant.

**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 you 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**

**Changes in urination**

Radiation may cause some irritation and swelling of your prostate. Your prostate is close to your urethra (the tube that connects your bladder to the outside of your body). When the prostate swells, it can put pressure on the urethra and:

- Make it more difficult to start a stream of urine.
- Cause your urine stream to be weaker.

You may feel that you are unable to put off urinating; or not completely emptying your bladder which can cause you to:

- Urinate more often.
- Get up repeatedly during the night to urinate.

You may also see some blood in your urine.

Tell your doctor or nurse if you have any of these signs. There are medicines that your doctor can prescribe to help these symptoms.

**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 will suggest a low-fiber diet. If your doctor prescribes **Imodium® A-D (loperamide hydrochloride)**:

- Take 2 tablets with the first loose stool.
- Then take 1 tablet after each subsequent loose stool.
- 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 eight 8 oz glasses or 64 ounces of non-carbonated, non-caffeine fluids such as water, juice, or sports drinks daily.

Diarrhea combined with the radiation can cause the skin around your anus to become irritated and sore. If your skin becomes tender, it is a good idea to stop using toilet tissue. Instead, use baby wipes or soft washcloths to clean yourself after having a bowel movement. Or, you may use a sitz bath to help clean the area. (Your nurse can explain how to use a sitz bath at home.) Your doctor or nurse may also suggest a special cream or lotion, such as Remedy™ Skin Repair cream or Aquaphor® healing ointment.

**Do not put these creams on your skin less than 2 hours prior to your treatment, as it will make your skin more sensitive to the effects of radiation.**

**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.
**Health Information Resources**

For more information, visit Northwestern Memorial Hospital’s Alberto Culver Health Learning Center. This state-of-the-art health library is located on the 3rd floor of the Galter Pavilion. 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 Center by calling 312-926-LINK (5465) or by sending an e-mail to hlc@nm.org.

For additional information about Northwestern Medicine, please visit our website at nm.org.