Radiation Therapy for Endometrial Cancer

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

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

Your physician will usually prescribe 25 to 33 radiation (external beam) treatments. The radiation treatment itself is just like having an X-ray. It is not painful.

Treatment schedule

You will have 1 treatment every day, Monday through Friday. Your therapist will work with you to set up the appointment times. Each appointment lasts 15 to 20 minutes. Please allow an hour for these appointments. This will give you enough time for:

- X-rays
- Meetings with your physician or nurse
- Any unexpected delays

You will have X-rays once a week. This will help ensure you are in the right position on the table. Your care team does not use the X-rays to diagnose problems or check treatment effects.

You will meet with your physician at least once a week on ___________________________. They will check your treatment results and side effects during these visits. You will also have the chance to talk about any concerns about your disease and treatment at this time.

After you finish your external beam treatments, your physician will likely prescribe internal radiation. This will help to give a “boost” of radiation to the top of your vagina (vaginal cuff). This is known as brachytherapy. Brachytherapy is internal radiation. It takes place in the radiation clinic. There are usually 3 treatments.

Your nurse or physician will give you more information about this treatment.

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 a burning feeling when you pass urine.
If you feel burning when you pass urine, drink more fluids. Drinking more fluids will dilute your urine. This will make it less irritating to your urethra. If the burning does not go away, your physician may ask you for a urine sample to test for a bladder infection. If you do have an infection, your physician may prescribe antibiotics. If there is no infection, your physician may prescribe some medication that will ease the burning feeling.

**Diarrhea**

Part of your large bowel or colon may be in the treatment area. This part of your body is more sensitive to the radiation. As a result, you may have abdominal cramping and diarrhea. This might happen after 10 to 14 treatments.

To help decrease the radiation to your bowel, your physician will ask you to drink 3 to 4 full glasses (24 to 32 ounces) of water 30 minutes before each treatment to fill your bladder. When your bladder is full, it will push up on your bowel and move it out of the treatment site.

If you have diarrhea, tell your physician or nurse. Be sure to let them know if you have diarrhea 4 or more times in a 24-hour period. Diarrhea can lead to dehydration. Your physician or nurse may ask you to eat a low-fiber diet.

Your physician might prescribe the medication, Imodium® A-D (loperamide hydrochloride). Please follow these instructions:

- Take 2 tablets with the 1st loose stool.
- Then take 1 tablet after each loose stool after that.
- 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 full glasses (64 ounces) of non-carbonated, non-caffeine fluids, such as water, juice or sports drinks each day. You may drink beverages with caffeine, but only in addition to the recommended guidelines.

**Nausea and vomiting**

Sometimes parts of your stomach and small intestine are in the radiation treatment area. This may irritate the linings of your stomach and small intestine. This can cause nausea. Many patients have nausea after about 5 to 10 treatments (after 1 to 2 weeks). Nausea is often worse if you have radiation and chemotherapy 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 physician or nurse know if you start to feel queasy or vomit. Tell them what times of the day your nausea seems better or worse.** There are many different medications your physician can prescribe for you. There are some medications 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, vagina and/or 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.

To ease discomfort and protect your skin from more irritation, follow these guidelines:
- Clean the area with a bath soap for sensitive skin. Some suggested soaps are Basis® for Sensitive Skin, Dove® for Sensitive Skin or Neutrogena® Unscented. Avoid soaps that are heavily scented or antibacterial.
- Use lukewarm water. Hot water can irritate the skin more.
- Use a soft cloth or your hand to gently clean the area.
- Pat your skin dry. Do not rub.
- Do not shave the area that receives radiation.
- Do not use heating pads or ice packs on the treated area. Extreme temperatures can cause more damage.
- For clothing, choose cotton or soft knit fabrics. Some fabrics like wool may be irritating.

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 to help clean your perineal skin. (You can buy a sitz bath basin at most drug stores.) Your nurse can explain how to use a sitz bath at home.

Your physician or nurse may also suggest a special cream to help moisturize the affected skin, such as Miaderm® or Aquaphor®. You can apply these 3 to 4 times per day to the treated area. **Do not put these creams on your skin within 2 hours of your treatment. They 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.

If you are concerned about changes in your skin, please talk with your physician or nurse.

**Fatigue**
Fatigue (extreme tiredness) is a common side effect of radiation treatment. Daily trips for treatment combined with the effects of radiation may make you more tired. Patients most often feel lower energy after about 10 treatments.

Staying active and keeping a regular sleep schedule can help improve your energy levels. Try not to over-exert yourself. If you become tired, plan for rest periods during your day.
**Vaginal discharge**

It is common for women to have some vaginal discharge during radiation treatments for endometrial cancer. The discharge may be white or yellow and may be thick or thin. Wear a panty liner, as needed. Tell your physician 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. This would require medication.

**Vaginal dryness and stenosis**

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

Scar tissue is less elastic than normal tissue and may cause a feeling of tightness. As a result, you may have discomfort during vaginal exams and intercourse. At your first follow-up visit, your nurse will give you a vaginal dilator. They will teach you how to use it. The dilator will help break up any scar tissue and help decrease the stenosis.

After you finish the treatments, you may also notice some vaginal dryness. Use a water-based lubricant, such as K-Y Jelly® or Astroglide®, to ease discomfort during intercourse.

After pelvic radiation, some women also have a difficult time reaching orgasm. If you have any problems resuming intercourse, talk to your physician or nurse. They can refer you to a trained advanced practice provider who can help you with your sexual concerns.