RADIATION THERAPY TO THE FEMALE PELVIS
(Pre-treatment patient education sheet)

Radiation to the pelvis is used to treat cancers of the rectum, anus bladder and gynecologic cancers. The treatment is not to the full body. It is aimed at the area of the pelvis where the cancer is located. In patients who have had surgery, radiation is often given to decrease the risk of cancer returning to the area.

Before Treatment
First appointment: You will meet with your radiation oncologist, who will explain the benefits and risks of radiation treatments. You will also meet with your patient designated nurse (PDN), who will provide you with the information needed to contact your treatment team.

Treatment planning appointment: You will have a planning CT scan (computed tomography scan). You may need to drink a special liquid before the scan. You may also be asked to have an intravenous line placed temporarily in your arm/hand so that dye (contrast) can be given during the scan. This will help improve the quality of the scan. The planning CT scan appointment will last between 30 to 40 minutes. The scan is painless and only takes a couple of minutes to complete. Most of the appointment time is used to explain the procedure and making sure you are well positioned for the scan. After the scan, the radiation therapist will place small tattoos on your skin. These permanent marks are necessary to make sure you are in the right position during your radiation therapy treatments.

While preparing you for your scan, the radiation therapist will need to touch you in order to adjust your body position. In addition, you will need to be partially undressed as the area to be treated will need to be visible to the therapist.

Once your planning CT scan is done, it usually takes 1 to 2 weeks to prepare your radiation therapy treatment plan. These planning processes, along with many quality and safety checks, are needed to make sure you receive the best treatment available.

Treatment
Once your treatment plan is ready you will start your treatments. On your first day a radiation therapist or nurse will meet with you. He or she will review possible side effects and answer any questions you may have about the treatment. Plan to be at the Cancer Centre for up to 1 hour every day; sometimes delays occur.

External beam radiation treatments:
- Treatments are given five days a week (Monday to Friday) over a period of 1 to 7 weeks
- They usually take a few minutes, but you may be in the treatment room for about 15-20 minutes each day. Most of the appointment time is used to make sure the radiation is given to the exact area where the treatment is needed.

You will have an appointment with your radiation oncologist on a regular basis during your radiation treatments. Each radiation oncologist has a set day and time when they meet their patients in a “drop-in” clinic format.

Internal radiation treatments:
- See brachytherapy documentation provided by your nurse
Side effects from radiation treatment
There are two types of side effects: early side effects and late side effects. Early side effects happen sometime during your radiation treatment. Most early side effects are mild. They typically start to get better two weeks after your last treatment but they can continue for a few weeks or months after the last treatment. Late side effects usually happen a few months after your last treatment; sometimes they develop years after the treatment. The side effects that you may experience will depend mainly on the dose given. But you should be aware that even patients who receive the same dose of radiation to the same area of the body may have different side effects.

Possible early side effects of radiation therapy to the female pelvis:
- fatigue
- loose stool or diarrhea
- abdominal cramping
- urgent, frequent bowel movements
- nausea (rare)
- vaginal dryness/irritation/discharge
- urgent, frequent need to urinate
- sore anus (typically from frequent bowel movements)
- skin reaction much like a sunburn
- loss of pubic hair
- hemorrhoid flare up (if you are prone to hemorrhoids)

Possible late side effects of radiation therapy to the female pelvis:
- urgent, frequent bowel movements
- urgent, frequent need to urinate
- abdominal cramping, loose stool or diarrhea
- symptoms of menopause including hot flashes, mood swings and vaginal dryness
- infertility (discuss with your radiation oncologist to find out if going to a fertility clinic is appropriate for you)
- abdominal symptoms such as urgency and frequency of bowel movements, abdominal cramps or episodes of diarrhea
- bowel obstruction (rare)
- rectal incontinence (rare)
- rectal bleeding (rare)
- minority leakage of stool of urine (rare)
- urinary bleeding (rare)
- vaginal dryness and narrowing (management strategies will be discussed at the end of your treatment)
- difficulty with intercourse
- darkening and/or thickening of the skin covering the area treated
- thinning of the pelvic bones (increases your risk of fracture)
- development of a new cancer in the treated area many years after treatment (rare)
- nerve damage (rare)
- fistula (a hole connecting your bladder or rectum to your vagina (very rare)

Your Radiation Oncologist will explain these side effects and the risks for your particular situation.

For more information please ask a member of your radiation treatment team.

The Ottawa Hospital
Radiation Medicine Program

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