

Symptoms which should settle within a month. Rarely, permanent damage means that you need to pass water more frequently and urgently. You may pass blood in your urine. It is important to drink plenty of fluids during your course of radiotherapy.

Skin Can become sore and reddened towards the end of your course of radiotherapy. Aqueous cream can be applied to the affected skin; any itchy area may require steroid cream.

If you experience soreness in the back passage, please inform the radiographers and do not purchase 'over the counter' medication.

Erectile dysfunction (ED) Radiotherapy can damage the blood vessels controlling erection, affecting your ability to achieve and maintain an erection. You can be referred to the ED Nurse to discuss treatment options if you wish.

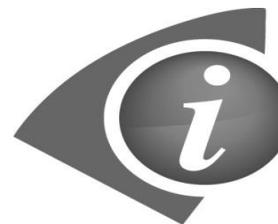
You will be closely monitored during your treatment, but if you have any concerns please inform the radiographers giving your treatment.

Parking Permit. You will be given a permit to use for one of the radiotherapy parking spaces; this has to be returned at the end of radiotherapy

Follow Up on Completion of Your Radiotherapy: Your urologist and/or oncologist will see you on a regular basis to monitor any side effects and your response to treatment. You will need to have a PSA blood test prior to your appointment. This can be done at your GP practice about one week before your hospital appointment.

If you need any further assistance or information please contact:

Prostate Specialist Radiographer	01803 655347
Macmillan Oncology Radiographer	01803 654273
Cancer Support & Information Centre:	01803 617521



**PATIENT
INFORMATION**

**Radical External Beam Radiotherapy (EBRT)
to the Prostate**

Radiotherapy information for Torbay Hospital patients

Introduction

The following information is not intended to be comprehensive, but should give you an idea of what to expect during and soon after your radiotherapy treatment here at Torbay Hospital.

There are copies of the excellent Macmillan booklets to refer to in the waiting area. These relate to specific cancers and types of treatment. Also the prostate cancer charity website (www.prostatecanceruk.org) or Freephone 0800 074 8383 is a useful source of information)

General Principles of radiotherapy

Radiotherapy means the delivery of powerful X-ray beams to destroy cancer cells. This is carefully planned to a defined area of the body containing cancer cells or where a cancer has been removed.

The type of radiotherapy you will receive is called 'external beam radiotherapy' using techniques called intensity Modulated radiotherapy (IMRT) and Image Guided Radiotherapy (IGRT). This means that radiation is delivered from a machine (linear accelerator) which generates X-rays. Radiation is only present when the machine is switched on, so you are not radioactive after your treatment.

Arrangements for your radiotherapy

It is very important that we can target the radiotherapy as accurately as possible. A CT scan with you lying in the treatment position locates the area to be treated.

You will be asked to empty your bladder 1 hour prior to your appointment and then drink $\frac{3}{4}$ -1 pint/500ml.

It is important that your back passage is empty and it may be necessary to give you an enema if your back passage is not sufficiently empty.

You will have some small permanent marks (tattoos) placed onto your skin (with your consent) which are used to help reproduce your position accurately during treatment. If you do not wish to have these permanent marks then the radiographers will discuss other options plus the additional responsibilities on your part to ensure temporary marks are not lost.

Photographs/electronic images will also be acquired, with your consent. These will be kept in your notes.

Verification: A further image may be taken on the treatment set to confirm your position prior to commencing treatment. This will be repeated during your treatment – often on a daily basis

Treatment details

Treatment is given daily, Monday-Friday but not at weekends. You will receive between 32-37 treatments in total each lasting approximately 10 minutes. (For those who have had HDR brachytherapy you will receive a short course of EBRT of 15-23 treatments). You will need to be in the same position each day for your treatment as you were for your CT scan. This includes bladder preparation as above. The radiographers will use your tattoos to adjust your position as above.

Using the linear accelerator, x-ray images will be taken daily (IGRT) during treatment to check on your treatment position.

Side effects

Radiotherapy will affect some of your normal tissues. You may feel tired, however, nausea is unusual and you will not lose your hair.

The rectum, small bowel, bladder and erectile function may be affected as follows:

Rectum A small area of the rectum will receive a high dose. This results in temporary inflammation causing you to pass small, frequent motions possibly with some blood. Treatment can be given for this and these and these effects should settle within a month. Rarely there is permanent damage to the rectum where surgery may be required.

You should not undergo bowel screening during and immediately after treatment – please ask treatment team for advice if you are sent for bowel screening.

Small bowel Any small bowel within the area treated will cause diarrhoea and abdominal cramps. Anti-diarrhoeal medication will help with this. It should settle within one month. It would be unusual for this to be permanent.

Bladder A small area of the bladder will receive a high dose of radiation leading to bladder irritation causing a burning sensation and the need to pass water more frequently. There are treatments to ease these