

Spinal Cord

The spinal cord carries the messages from the brain to the rest of the body. Particular care is exercised in the planning stages to ensure that the dose to this structure is kept within safe limits. Damage to the spinal cord is extremely rare.

Follow Up

Your Oncologist will see you on a regular basis to monitor any side effects and your response to treatment

Post Radiotherapy

If you need assistance after radiotherapy has finished please contact

Lung Nurse Specialist **01803 655069**
Macmillan Radiographer **01803 654273**

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

For further information there are booklets available **FREE OF CHARGE FROM Macmillan Cancer Support**
Freephone 0808 808 00 00 (Mon-Fri 9am-8pm)

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.

PATIENT INFORMATION

Cancer of the Lung (Short Course)

Radiotherapy Information for
Torbay Hospital Patients

Working with you, for you

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.

General Principles of Radiotherapy

Radiotherapy means the delivery of powerful x-ray beams to a carefully defined area of the body containing a cancer or from where the cancer has been removed.

The type of radiotherapy you will receive is called “external beam”. This means that the radiation is delivered from a machine, which generates x-rays, a “linear accelerator”. The radiation is only produced when the machine is turned on so once your treatment is finished you do not become radioactive.

Arrangements for your Radiotherapy

You will be telephoned with an appointment for a CT planning scan.

It is very important that we can target the radiotherapy as accurately as possible. To this end, a CT scan with you lying in the same position as for the radiotherapy itself enables us to locate the area to be treated.

You will have some small permanent tattoos placed on your skin, with your consent. These are used to help reproduce your position accurately during treatment. If you do not wish to have these 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 or stored electronically

Verification: A further image may be taken on the treatment set to confirm your position prior to commencing treatment

Treatment Details

Treatment is given daily Monday to Friday but not at weekends.

There could be 1, 2, 5, 10, 12 or 13 treatments in total, each lasting approximately 10 minutes.

Images will be taken on the linear accelerator to check your position during treatment.

Side Effects

Radiotherapy will affect some of your normal tissues. You may feel tired or nauseated; you will not lose your hair.

Oesophagus

You may experience pain or difficulty swallowing. There are medications that can help; it may be necessary to go onto a liquidised diet until symptoms settle. The radiographers and dieticians will give advice with regard to a soft diet.

In very rare circumstances the oesophagus may become scarred and the passage of food obstructed. This may require an endoscopy to relieve the narrowing if possible.

Lungs

The lungs are very sensitive to radiation and it is possible that part of the lungs will be inflamed. However the effect on you should be minimal. It could cause a slight cough or breathlessness.

Skin

The skin will become sore and reddened towards the end of your course of treatment. Moisturising cream should be applied to the area twice daily during radiotherapy. These areas will be monitored by the radiographers during your radiotherapy