



Kent Oncology Centre

Electron Beam Radiotherapy Treatment and Planning

We hope this leaflet will help you understand your electron beam radiotherapy planning and treatment, the side effects that may occur and ways to manage these effects. If you would like to speak to one of the radiotherapy team please feel free to contact them on the numbers given below:



Maidstone Hospital

Macmillan Radiotherapy Specialists
Appointment enquiries

 01622 225094
 01622 225080

Kent & Canterbury Hospital

Macmillan Radiotherapy Specialists
Appointment enquiries

 01227 766877
ext 722 2711
 01227 783010

What is electron beam radiotherapy?

Electron beam radiotherapy uses a radiation beam of particles called electrons to treat abnormal cells but does not penetrate more than a few centimetres beyond the surface of the skin. It is usually given as a series of short, daily treatments, Monday to Friday, in the radiotherapy department using a machine called a linear accelerator, also known as a 'Lin Acc'. The machine does not touch the body but you will be brought closer to it. You do not go 'into the machine' but it will be quite close to you.

Treatment is individually planned for each person so even people with the same type of cancer may have different types of radiotherapy treatment.

Each treatment is called a 'fraction'. Giving the treatment in fractions ensures that normal cells are damaged less than cancer cells. The damage to normal cells is mainly temporary, but still causes radiotherapy side effects.

Radiotherapy **does not** make you radioactive so it is safe for you to be with people, including children, after each treatment. Radiotherapy is painless, although it may gradually cause some uncomfortable side effects which will be discussed later in this leaflet.

How will I feel after treatment?

Radiotherapy affects people differently; some find that they can carry on working, only needing time off for their treatment, while others find it too tiring and prefer to stay at home. If you have a family to look after you may find you need extra help.

Don't be afraid to ask for help, whether it's from your employer, family and friends, social services, or the staff in the radiotherapy department. As your treatment progresses, you'll have a better idea of how it makes you feel, so you can make any necessary changes to your daily life

Giving your consent

Before you have radiotherapy your consultant will explain the aims of the treatment to you. You will be asked to sign a form saying that you give your permission (consent) for the hospital staff to give you the treatment; no medical treatment can be given without your consent. Before you are asked to sign the form you should have been given full information about:

- the type and extent of the treatment you are advised to have
- the advantages and disadvantages of the treatment
- any other treatments that may be available
- any significant risks or side effects of the treatment

If there is anything you don't understand let the staff know straight away so that they can explain. Some cancer treatments are complex, so it's not unusual for people to need repeated explanations. You do not have to make a decision when the treatment is first explained, you can always ask for more time to think it through.

Before you have your first treatment, staff will check again that you still give consent to have treatment and will ask whether you have any further questions. You are free to choose **not** to have the treatment, and the staff will explain what may happen as a result of that.

Pregnant?

Please tell the medical staff if you might be pregnant; radiotherapy can harm the developing baby.

Planning your treatment

Careful planning ensures that the radiotherapy is as effective as possible and that the radiotherapy rays are aimed precisely at the cancer, causing the least possible damage to the surrounding healthy tissues.

The treatment is planned by your clinical oncologist, a physicist and therapy radiographers. It is usually necessary to wait a number of days, possibly up to two weeks, for treatment to start because of the preparation required.

Treatment Planning

You may need a special device called a mask to help you hold your position very still during your treatment, making it as effective as possible. This will be made on your first visit. The mask is made of plastic mesh which has been softened in warm water and molded to your head and face. It hardens after a few minutes and is then ready to use. It will fit snugly so it may feel claustrophobic, but you will only wear the mask for a few minutes at a time. Please do not wear any hair products, e.g. hairspray, gel or wax on the day of planning as these can make hair stick to the mask during moulding.

You may need a special device made to help support the part of the body that is being treated. Again, this will be made on your first visit and should enable you to maintain a comfortable position during your treatment.

Your consultant will be involved in planning the area to be treated. You may have some ink marks drawn on your skin but these can be removed before you go home. We need you to lie very still for a few minutes so that photographs and accurate measurements can be taken and your exact position recorded. The radiographers can then make sure that you are lying in the correct position each time you have treatment.

Occasionally permanent skin marks, the size of a pinpoint, may be necessary but this will be discussed with you beforehand. It may be necessary to discuss your treatment details with other staff e.g. physicists or technicians.

Sometimes wax or a similar material may be placed on the treatment area to adjust the depth of tissue being treated. Further adjustments may be made before or during your treatment which may require extra visits to the department.

Having your treatment

Before your first treatment the radiographers will explain to you what you will see and hear. It's quite normal to feel anxious about having your treatment, but as you get to know the staff and understand what is going on it should become easier.

The radiographers will advise you where to lie on the couch. Your positioning is very important so the radiographers may take a little while to get you ready (they may call this 'setting up'). The room may be in semi-darkness while this is happening and the radiographers will be talking to each other and calling out measurements

As soon as you are positioned correctly the staff will need to leave the room to prevent them from being exposed to any unnecessary radiation.

During treatment you will be alone for a few minutes but there will be a radiographer watching you during this time on a monitor camera. To protect your privacy, nobody else will be able to see you. If you have any problems you can raise your hand to attract the radiographer's attention and they will come in to help you. The radiographers may come into the treatment room to re-position equipment in the middle of your treatment

Short term side effects

You will be monitored throughout your treatment by the radiotherapy team. Please let them know if you experience any of the following problems:

Skin changes

You may notice some redness (like sunburn), increased pigmentation (darkening), tenderness or itching of the skin in the treatment area. Your skin may peel or flake as treatment continues and this may result in a sore and weepy skin reaction.

Your skin reaction can be affected by the dose and type of treatment that your consultant has prescribed. It can also be dependent on your type of skin, your shape, any existing conditions such as diabetes and especially if you smoke.

Tips for helping your skin in the area being treated:

- Wash the skin gently using soap or aqueous cream and gently pat dry
 - To reduce irritation to the treatment area you may use a moisturiser sparingly (your Macmillan radiographer can advise on this)
 - Wear loose fitting natural fibre clothing next to the skin
 - Avoid heating and cooling pads/ice
 - Avoid hair removal products
 - Avoid adhesive tape
 - Do not apply any chemicals like perm lotion, gel, hair spray, dyes to the treated skin during the treatment time
 - Ensure the skin is covered when out in the sun; your skin may be more sensitive to the sun especially in your first year after treatment so it is advisable to apply a high factor sun screen
 - Men are advised not to shave if the treatment area is within the beard
 - Lesions (treatment areas) in the hair or hair line should be covered when hair washing, using a mild shampoo and warm water
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After finishing treatment you may be aware of your skin reaction becoming worse for up to another two weeks. Continue with the suggested skin care tips, returning gradually to your usual skin care regime when your skin has returned to normal.

Sometimes a scab may form over the treatment area. This may peel away and reform several times before leaving healed skin underneath and any redness in the treatment area will begin to fade. At first, this new skin will look pinker than the skin around it. This will gradually fade, and the treated area will come to look like the skin around it, though maybe slightly paler.

Hair loss

Radiotherapy to areas that produce hair, such as the head, can make the hair fall out in the treated area. Your hair may grow back within six to twelve months, depending on the dose of radiotherapy and the length of treatment you've had. However, for some people their hair loss is permanent. Your doctor can discuss with you whether your hair is likely to grow back once the treatment has ended.

Still smoking?

Smoking during treatment could reduce the success of your treatment and cause some side effects to be worse.

Please ask for help if this is a problem for you.


Kent Oncology Macmillan Cancer Information Centre, Maidstone Hospital

Offers support and information to anyone who has concerns about cancer (patients, relatives, friends or carers).

 01622 227064

Macmillan Cancer Support

Provide practical, medical and financial information

 0808 808 0000 (Free phone)

Website: www.macmillan.org.uk

Patient Experience Teams for East Kent patients:

Kent and Canterbury Hospital

Desk at the outpatient's entrance of the hospital

Queen Elizabeth the Queen Mother Hospital

Office at the main entrance of the hospital (Ramsgate Road)

William Harvey Hospital

Desk at the main entrance of the hospital

☎ 01227 783145 or 01227 864314

E mail: ekh-tr.patientexperienceteam@nhs.net

MTW NHS Trust is committed to making its patient information accessible in a range of languages and formats. If you need this leaflet in another language or format please ask one of your clinical care team or the Patient Advice and Liaison Service (PALS). We will do our best to arrange this.

Maidstone and Tunbridge Wells NHS Trust welcomes all forms of feedback from our service users. If the standard of service you have received from the Trust does not meet your expectations, we want to hear from you. Please speak with the ward manager or the nurse in charge in the first instance, or you can contact the **Patient Advice and Liaison Service (PALS)** on:

Telephone: ☎ 01622 224960 or ☎ 01892 632953

Email: mtw-tr.palsoffice@nhs.net

or visit their office at either Maidstone or Tunbridge Wells Hospital between 9.00am and 5.00pm, Monday to Friday.

You can be confident that your care will not be affected by highlighting any areas of concern or making a complaint. The Trust will retain a record of your contact, which is held separately to any medical records. If you are acting on behalf of a patient, we may need to obtain the patient's consent in order to protect patient confidentiality. More information on PALS or making a complaint can be found on the Trust's website: www.mtw.nhs.uk or pick up a leaflet from main reception.

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