

Kent Oncology Centre

# High Dose Rate Intracavitary Gynaecological Brachytherapy

## Information for patients

We hope this leaflet will help you to understand about brachytherapy (internal radiotherapy) to the cervix or womb (uterus). It will explain the side effects that may occur and the best way to manage them. If you would like to speak to one of the radiotherapy team please feel free to contact them on the following numbers:

### Maidstone Hospital

Macmillan Radiotherapy Specialist  01622 225094

 01622 225094

Appointment Enquiries  01622 225080

### What is HDR Intracavitary Gynaecological Brachytherapy?

Brachytherapy is carefully controlled radiation treatment delivered directly to the cervix or womb using special tubes (applicators) positioned inside the body.

This specific brachytherapy treatment is given three times, giving one treatment once a week. For each treatment you will be given a spinal anaesthetic with sedation so that the tubes can be placed inside your cervix or womb from the vagina.

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Sometimes it may be necessary to give a general anaesthetic instead of a spinal anaesthetic; your anaesthetist will discuss this with you.

A small radioactive source is delivered to the tubes to provide the radiation treatment. The tubes have to remain in place until the treatment has been given later in the day. You will be awake during the actual treatment. The tubes are then removed before you go home.

Brachytherapy is usually combined with external radiotherapy; your consultant or specialist radiographer will explain when this will take place. Leaflets about External Beam Radiotherapy are also available.

## Preparation

You will be asked to attend a clinic appointment before your treatment. This is to check that you are fit to have a spinal injection or general anaesthetic. A blood sample will be taken and a simple test called an ECG will be carried out to check your heart.

You are advised not to smoke for 24 hours before having a general anaesthetic.

**You must not eat or drink from midnight prior to your treatment.**

## On the day of the first treatment

You will need to check in at oncology main reception at 8:00a.m. You will then be called to Charles Dickens Day Unit. If helpful, one relative/friend may remain with you during your stay on the unit. However, they will not be able to accompany you when the tubes are inserted and removed and the radiation treatment given.

Your nurse will prepare you for theatre and the anaesthetist will meet you. You are required to give your consent before the procedure can be carried out.

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You will probably have already given consent at an earlier appointment, but it will be confirmed before proceeding. If you have any questions or concerns about the procedure, please make sure we have addressed these before giving consent.

### **Positioning the applicators**

You will be taken to the operating theatre on Charles Dickens Day Unit where you will be given a spinal anaesthetic with sedation, or general anaesthetic. Your Oncology Consultant will insert the treatment tubes through your vagina into the cervix or womb. An ultrasound scan of the area will be used to help with the positioning of the tubes. They are held in place by gauze packing in the vagina. A urinary catheter will also be inserted so you do not need to use the toilet whilst the tubes are in position.

### **Checking the positioning of the applicators**

Once the tubes are in place and you are awake, you will be taken on your bed for a CT and/or MRI scan. The images from the scan are then used to help plan your treatment.

### **Treatment**

You will be taken back to the day unit to recover whilst your treatment is being planned. This can take up to six hours. You will need to remain lying on your bed so that the tubes do not move but you can be propped up so you can eat and drink.

When your treatment plan is ready you will be taken back into the treatment room where the brachytherapy radiographers will connect the tubes to the treatment machine. The radiographers will advise you how long the treatment will take (usually between five to fifteen minutes).

The radiographers will leave the room but will watch you on monitors throughout the treatment and can come back in at any time should it be required.

When the treatment is completed the radiographers enter the room and remove the tubes and urinary catheter. This can be

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uncomfortable and you will be offered pain relief whilst this takes place. You will then be taken back to your room on the day unit where you can stay until you feel ready to go home.

### **Is it painful?**

There is nothing to feel when the treatment is given but the tubes inside the vagina and cervix can be uncomfortable. A spinal anaesthetic will help to give pain relief for about two to three hours after insertion of the treatment applicators. If you start to become uncomfortable please tell the nursing staff so that medication can be given to help control any pain. It can also be uncomfortable when the tubes are removed and pain relief will be provided.

### **Going home**

This procedure is usually completed as a day case, so when you feel ready you should be able to go home.

After having an anaesthetic your concentration may be impaired, so for a minimum of 48 hours afterwards you should not:

- drive a motor vehicle or ride a bicycle (so you must arrange for someone to take you home)
- operate machinery
- drink alcohol
- make any important decisions or sign any legal documents

You will be given further advice by the radiographers before you leave the hospital.

No radioactive materials remain inside you so it is quite safe to mix with family and friends.

You will be given dates to return to Charles Dickens Day Unit for your two remaining treatments. Again, you should not eat or drink from midnight on the day preceding your treatment.

**The same process for the first treatment is repeated in the subsequent appointments.**

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## After the treatment

You will be sent an appointment to see the Oncology Consultant approximately six to eight weeks after your third session.

You will be under the care of your GP and community nurse until you return for your follow-up appointment.

## Side effects

Please read through the following list of side effects that you **may** experience after your treatment. These side effects are usually only short term but occasionally some people develop long-term bowel, bladder or vaginal problems. The consultant will discuss these with you when you are asked to give consent for treatment. The after effects of this treatment are similar to **external beam radiotherapy** to your pelvis.

### Tiredness

Feeling tired after this treatment is quite normal; we advise you to rest as much as you feel you need. Return to work when you feel ready. Light exercise, e.g. walking, can help to improve tiredness.

### Bowel

Your bowel movements may increase in frequency and urgency after treatment. You may have the sensation of wanting to open the bowels but may just pass wind and mucus. These symptoms may last a few weeks. Changing your diet or taking medication can help. We advise that you drink plenty of fluids.

### Bladder

You may experience some irritation when passing urine. Drinking plenty of fluids can help. If your urine is cloudy or smelly this may be a sign of infection; you may need medication if it does not get better.

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## **Pain / discomfort**

You may have some cramp like pain and vaginal soreness. Mild painkillers and warm baths can help

## **Vaginal discharge / bleeding**

You may have a slight discharge following treatment; this is normal. If the discharge persists, or is smelly or pale green / yellow, tell your GP as you may have an infection. Regular bathing helps reduce the risk of infection; wearing cotton pants and avoiding wearing tight trousers or tights can also help.

## **Vaginal scarring**

The risk of this is slightly higher following brachytherapy than following external beam radiotherapy. The Macmillan Specialist Radiographer or brachytherapy radiographers will discuss this with you and give you information about using a vaginal dilator and lubricants to help prevent this. This should help with future internal examinations and sexual intercourse. The vagina may also be very dry. You may find it beneficial to use a vaginal moisturiser which your GP or pharmacist will be able to advise on.

## **Feelings**

Emotional reactions following treatment can differ from person to person, and is part of the process of coming to terms with an illness. Please contact your Macmillan Specialist Radiographer or Specialist Nurse if you would like to talk to someone. Other useful sources of information are listed below.

## **Alternative treatments**

There is no proven alternative to HDR Intracavitary Gynaecological Brachytherapy. This treatment is offered after External Beam Therapy as a means of effectively increasing the radiation dose to the tumour.


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**Further information, support and advice can be obtained from:**

**Macmillan Cancer Support**


Free phone

 0808 808 0000

Website: [www.macmillan.org.uk](http://www.macmillan.org.uk)

**Kent Oncology Macmillan Cancer Information Centre**


**Maidstone Hospital**

 01622 227064

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

**Cancer Research**

This charity provides information about cancer, treatment and clinical trials


 0808 800 4040

[www.cancerresearchuk.org](http://www.cancerresearchuk.org)

**Jo's Cervical Cancer Trust**

This charity provides information and support regarding cervical cancer

[www.jostrust.org.uk](http://www.jostrust.org.uk)

 0808 802 8000


**The Daisy Network**

This charity is a support group for women who have experienced a premature menopause

[www.daisynetwork.org.uk](http://www.daisynetwork.org.uk)

**NHS 111**

**NHS Choices online**

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[www.nhs.uk](http://www.nhs.uk)

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**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](mailto: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](http://www.mtw.nhs.uk) or pick up a leaflet from main reception.

Issue date: June 2020  
Database reference: RWF-OPLF-PCS21

Review date: June 2024  
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