Information for Female Patients Receiving Radiation Therapy Treatment to the Pelvis
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Why is radiation therapy used to treat cancer?
Cancer may be treated with a combination of treatments such as surgery, radiation therapy, chemotherapy and hormone therapy. Radiation Therapy uses radiation from high-energy X-ray machines to kill cancer cells. Radiation is used to lower the chance of the cancer returning in the pelvis and lymph node areas.

What is radiation therapy to the pelvis region?
Radiation treatment to the pelvis region is radiation given to the area of the body between the belly button and top of the thigh. Radiation therapy is given to the pelvis region for many types of cancer. Your Radiation Oncologist should talk to you about your specific cancer, and why radiation to your pelvis will be part of your treatment.

What will happen on the day I come for my treatment planning?
Your first visit to the radiation therapy department is called your “treatment planning appointment”. This will take about 45 minutes.
When you check in for your treatment planning appointment, you may be asked to either fill or empty your bladder.
You will have a CT Scan, measurements will be taken and markings will be placed on your skin.
Your Radiation Therapists will make every effort to make you comfortable during the CT Scan. They will explain every step of what they are doing. The measurements from your CT Scan will be used to plan your treatments.
Before you get up off of the x-ray bed, your Radiation Therapists will give you small tattoo marks. They are about the size of the tip of a pen and are permanent. You will have 3 or 4 tattoos on your pelvis area. They will be used each treatment day to position you. After your treatment planning appointment, you may have some marker and extra ink on your skin. It can be washed off when

What are your questions? Please ask.
We are here to help you.
you get home.

At your treatment planning appointment, your Radiation Treatment Team members will answer any questions you may have. These may include questions about side effects, skin care, lodging, or other questions. Many people find it helpful to bring someone along to this appointment.

**How long will it be until I start my radiation treatments?**

After your treatment planning appointment, you will usually wait a few weeks before your treatments start. You will be notified of the start date for your radiation treatment as soon as your planning is completed and a time has been booked for the radiation treatment machine. Every reasonable effort will be made to start your treatments as soon as possible, and within the recommended waiting time.

**How long will my treatments take?**

Once your treatments begin you should expect to have 1 to 7 weeks of radiation treatments. The treatments are given 5 days a week, Monday to Friday (except for holidays). You may not necessarily start your treatments on a Monday.

Your appointment each day will take about 15 minutes. This allows 5 to 10 minutes to get you into position and only a few minutes of actual radiation treatment. Your first treatment will be longer than 15 minutes, so expect to be at the clinic a little longer your first day.

Once a week you will see your Radiation Oncologist and/or Oncology Nurse for a checkup after your treatment. Be prepared to be here longer that day. You may also ask to be seen any other day if you have an urgent problem or question.

**What side effects will I have during the radiation treatments (and the first few weeks after)?**

In general, radiation to the pelvis area causes mild to moderate side effects. In the first couple of weeks of treatment, there may be few side effects except for a little tiredness. For most people side effects appear toward the end of the radiation treatments and may peak 1 or 2 weeks after they are finished. The side effects should go away over the next several weeks. For people who are having chemotherapy at the same time as the radiation, the side effects may appear sooner and be more severe.
During the last few weeks of treatment most people have:

- **Fatigue (Tiredness)**
  - Fatigue caused by radiation therapy is usually mild. You may be more tired after a usual activity or may need to rest more than usual. You will be given an information sheet with suggestions to help you cope with the fatigue.

- **Skin Reaction**
  - Your skin in the treatment area may become dry and itchy, pink or even red. Some dark skinned patients may have increased darkening of the skin.
  - You are allowed to wash and bathe. Your tattoo marks will not wash off. Try not to scratch or rub the affected area. You will also be given a separate information sheet with suggestions for skin care during the radiation.

- **Irritation of the anus**
  - If you have hemorrhoids, they may become inflamed. The doctor may prescribe a cream or suppository that will help with discomfort. The skin around the anus can also become reddened. To help ease the discomfort, most people find that soaking in warm water helps greatly. You can do this by filling up the tub with a few inches of warm water and soak your “bottom” for about 5 minutes. Or you can use a special sitz bath pan that fits under the toilet seat. Fill the pan with a few inches of warm water, and soak in the water for relief. Take sitz baths as often as you feel the need (sometimes up to 4 or 5 times a day). Pat the area dry with a soft towel or cloth.

- **Irritation of the Bladder or Bowel**
  - During the last few weeks of treatment, most people feel some irritation or soreness of the bladder or bowel. You may be passing your urine more often, sometimes with a slower stream (cystitis). Your bowel movements may be more frequent, watery (diarrhea) and painful. You will be given information sheets with suggestions to help you cope with changes to your bladder or bowel.

**Will radiation treatments affect my sexuality?**

- Most people with cancer (and their partners) experience a number of physical, emotional and practical changes through their treatment and recovery. These changes can happen during treatment and recovery and may affect your sexual health.
• There may be changes in how you feel that may affect how you respond sexually. Reactions of a partner can also add to how you see yourself as a sexual being.

• You may notice periods of time during treatment and recovery when you have little interest in sex. This may be upsetting to you and your partner. You may have worries (like concerns about your cancer, treatments and how the illness is affecting your life) and these can affect both your own and your partner’s interest and enjoyment of sex.

• If you are single, you may have different worries and challenges such as how to talk about sexuality and cancer with a new partner.

• General fatigue and stress from both the radiation treatments and body changes may lessen your desire to have a sexual relationship. As well, many women have dryness of the vagina, discharge from the vagina, and changes to their menstrual cycle (period).

• The vagina may become more dry and irritated during treatment. As a result, intercourse could cause bleeding and discomfort. If intercourse is painful, avoid intercourse until the soreness goes away. If you are having vaginal bleeding it is best not to have intercourse. Do not douche. You may have more or a different type of discharge from the vagina during your treatments. Tell your Radiation Therapist, Nurse, or Radiation Oncologist if the discharge is foul-smelling or bloody.

• Your menstrual cycle (period) may change while having your treatments, and may continue to be irregular for several months after your treatments finish. Many women notice that their periods actually stop for awhile. In some circumstances, the treatment may cause early menopause.

• The radiation treatments may cause narrowing or loss of elasticity of your vagina. You should discuss with your Radiation Oncologist the need for using a dilator after your treatments are finished.

• If you or your partner would like more information about sexual changes please ask your Nurse, Radiation therapist, or Radiation Oncologist. We can give you more information to read. There are a number of health professionals available in the cancer centre who can discuss concerns about sexuality with you (and your partner).
What is Supportive Care?
Cancer is a physical disease but it also can affect how you think and feel. Your emotional health and well-being are very important as you go through your treatments. It is normal for you and your family to have many feelings at this time. You may feel anxious, frightened, worried, angry or depressed.

There is support available in the cancer program. A number of health care professionals may be available for you and/or your family: they can include a social worker, nurse, therapist, spiritual care counselor, psychologist, and psychiatrist. They can help you cope with cancer and the emotions you are experiencing, as well as help with stress management, lifestyle changes, financial concerns or medication coverage.

At any time you can ask your Radiation Oncologist, Nurse or Radiation Therapist to refer you to this support team. You will then receive a call from a member of the team to set up a separate appointment.

There are also Support and Wellness Groups available where you can talk with or listen to others who have a similar experience, or learn more about cancer and how to live well with it. Information about these groups is available at the reception desk at your Cancer Centre or through the Canadian Cancer Society – Nova Scotia Branch.

Questions you may want to ask your health care team
• Do I have to do anything to prepare for my radiation markings or treatment?
• Can I bathe or wash?
• What should I expect to happen during my treatments?
• How will I cope with the side effects?
• How will I know if the treatments are working?
• What happens when the treatments end?
• Do I need to come back for a checkup?
• Will I have any long-term side effects from my treatments?
• Will the radiation treatments cause sterility?
• Who can I talk to if I have questions about supportive care; for example, medication costs, insurance, home care, transportation, emotional concerns, or any other questions?
• Is there a research study for my cancer type that might be appropriate for me? (or that I could be involved in?)
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