Central Coast Cancer Centre

Radiation Oncology Service

Information about radiotherapy for breast cancer











Introduction

The Central Coast Cancer Centre offers the latest advancements in breast radiotherapy treatment.

This booklet should be read along with the 'Radiotherapy information for patients, families and carers' booklet, which contains information about the services and staff available at the Central Coast Cancer Centre. It also includes information on transport and parking.

Specialist	: Appoi	intment	Informat	tion

- Having chemotherapy? After surgery, please make an appointment to see the radiation oncologist one month before your last chemotherapy cycle.
- Yet to see a medical oncologist about chemotherapy? Please call the radiation oncologist after the appointment to let them know if chemotherapy will be going ahead or not.

Your radiation oncologist:

McGrath Breast Cancer Nurse:....



Initial consultation

If radiotherapy has been recommended as part of your treatment plan, the radiation oncologist will explain:

- The reason for using radiotherapy as a treatment option.
- The exact areas that will be targeted with radiotherapy.
- The number of daily treatments needed.
- The possible early and late side effects of treatment, and how to prevent and manage these.
- What will happen during the radiotherapy planning and treatment.

Depending on the diagnosis, specialised techniques including Deep Inspiration Breath Hold (DIBH, for left sided cancers only) or prone breast treatment may be available. These techniques are not routinely offered in all radiotherapy departments due to the complexities involved.



Radiotherapy planning



After the consultation with the radiation oncologist, the next appointment is for radiotherapy planning. The planning appointment takes between 30 and 60 minutes. During this time the radiation therapists will use specialised equipment to ensure patients are in a stable position for future treatments. Most patients will be lying on their back with both arms raised above their head. For some patients, the most suitable position is lying on their stomach (prone). This will be determined by the radiation oncologist and radiation therapists during the planning appointment.

Patients should inform staff if they experience any discomfort or pain during the planning session.

Once positioned, the radiation therapists will perform a CT scan, take some measurements, and place two or three very small permanent ink marks (tattoos) as reference points on the patient's skin.

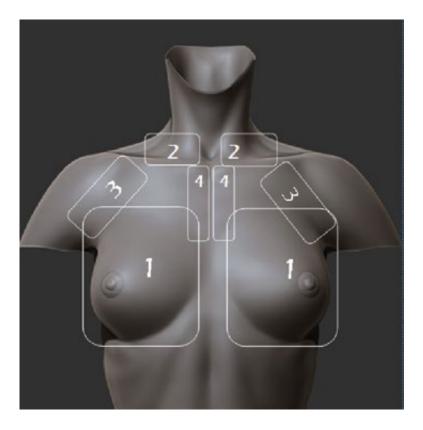
The planning session takes approximately 45 minutes to complete.

Radiotherapy treatment plan

Number of treatments:

Treatment areas:

1. Breast or chest wall 2. Supraclavicular fossa (lymph glands at the root of the neck) 3. Axillary lymph nodes (lymph glands in the underarm) 4. Internal mammary chain lymph nodes



Radiotherapy treatments



Radiotherapy treatments usually take place Monday to Friday. Each treatment takes approximately 10-20 minutes, however we suggest patients allow up to 30 minutes each day including waiting times.

Radiotherapy treatments are given each day using the same equipment, in the same position as the planning appointment. It is important that patients lie still for the entire duration. Prior to each treatment an x-ray image is taken to verify the patient's position.

If the patient has had a mastectomy, they will most likely have a sheet of 'jelly' bolus placed over their chest wall during treatment.

Expected side effects of radiotherapy

Radiotherapy to the breast is usually well tolerated by patients with minimal side effects. The radiation oncologist will explain the expected side effects depending on the dose and the area being treated.

Tiredness during and shortly after finishing treatment

The only general side effect patient's usually experience is tiredness, which may start 1-2 weeks into treatment and persist for a few weeks after treatment has finished. This varies between patients, but most people are able to continue with their normal routines including work.

Expected side effects during treatment

Skin redness

Skin in the treated area may become red, dry and itchy, typically after the second week of treatment. A barrier cream will be provided which can be applied to the treatment area 2-3 times a day to minimise the reaction. Any other products used on the skin within the treatment area should be discussed with the doctor

Selected deodorants may be used during treatment. Please talk to the nursing staff about this.

Skin peeling or blistering

Very rarely, some patients can develop some patchy peeling or blistering of the skin, especially under the breast or underarm area. Patients having chest wall radiotherapy after a mastectomy can expect that their skin may blister/peel in patches. If peeling or blistering occurs, this is generally seen during the last week of treatment or within 1-2 weeks after treatment finishes. If the skin begins peeling or blistering, an appointment with the radiotherapy nurses or your doctor should be made. Dressings will be provided which will help heal the area and provide comfort. Peeling/blistering of the skin usually heals within two weeks after treatment has finished The skin then returns to normal within 4-6 weeks. If there are any concerns about the skin reaction after treatment finishes, please contact nursing staff for advice.

Tenderness of the breast/chest wall

During treatment it is normal to have some minor discomfort within the breast, especially if the skin blisters. Although most patients do not need any pain relief, the doctor should be informed if pain is restricting normal activities.

Side effects experienced during treatment will typically improve and return to normal within 4-6 weeks after finishing treatment.

Potential side effects after radiotherapy

Hair loss

If the area being treated includes under the arm, some hair loss is expected. In some patients hair will grow back after 3-6 months, however hair loss may be permanent.

Lung changes

There is a very small risk that a small area of the lung may become temporarily inflamed after the radiation. This is called radiation pneumonitis and can occur up to six months after radiotherapy has finished. The condition is usually temporary and is treated with medication.

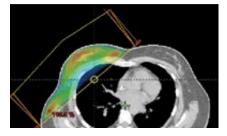
Please inform the radiation oncologist if shortness of breath, a cough or fever develops six weeks to six months after treatment. Scarring of a small area of the lung may occur in the long term. Typically, this will not impact on patient's breathing or lung function.

Breast and skin changes

Skin in the treatment area may appear slightly different colour compared to normal skin. In most patients, the skin appears slightly darker. The breast itself may also become slightly firm or swollen over the initial months. Over many years, some patients experience slight shrinkage of the breast.

Changes to your bone density

The ribs that the radiation beam passes through may become slightly brittle over many years. This increases the risk of rib fractures on the treated side compared to the other side. This is uncommon and occurs in less than 1% of women.



Heart changes

There is approximately a 1% risk of developing heart problems in the long term after having radiotherapy to the left breast or chest wall. The doctor will discuss ways to reduce this risk further.

Lymphoedema (swelling of the arm due to poor lymphatic drainage)

The risk of lymphoedema can increase if both surgery and radiotherapy is undertaken in the underarm area. This can occur to the arm on the side receiving treatment. any time from immediately after radiotherapy.

If recognised early, lymphoedema can be treated. Please inform the doctor if changes to the arm are noted.

A referral to a physiotherapist or an occupational therapist may be required to manage lymphoedema.

Second cancer risk

There is a very small risk (one in many thousand) that radiation can cause a second cancer in the area treated. This risk is far smaller than the risk of the current cancer coming back without radiation.

Follow up after radiotherapy

Nurse review

Radiotherapy nurses will call patients one week after radiotherapy finishes. If necessary, the nurses may ask patients to come to the Central Coast Cancer Centre to assess any side effects and advise on how to care for these at home.

Follow up appointment with your radiation oncologist

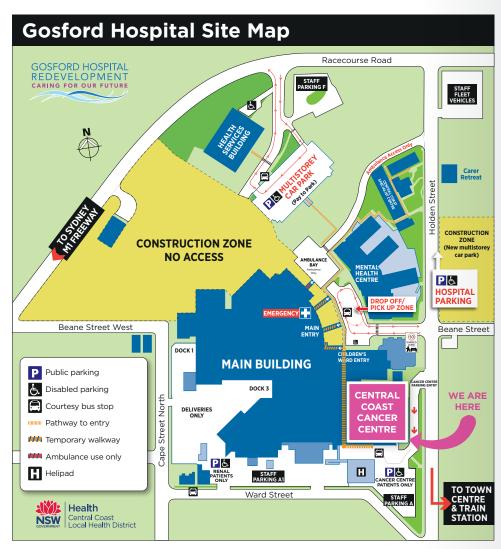
The radiation oncologist will usually see patients six weeks after the radiation finishes to make sure they have recovered from all the side effects.

At this appointment, the doctor will discuss the long term follow up arrangements. It is likely that this may alternate between seeing the surgeon, radiation oncologist and/ or the medical oncologist for at least five years.

McGrath Breast Nurse

The Central Coast Cancer Centre has a dedicated McGrath Breast Care Nurse who is a registered nurse with special training and qualifications in breast care. McGrath Breast Care Nurses coordinate care for families experiencing breast cancer and provide information, support and referral to services.

Central Coast Cancer Centre Site Map



Thank you for your patience and understanding as we transform Gosford Hospital

Central Coast Cancer Centre

General enquires

Phone: (02) 4320 9888

Doctor referrals

Fax: (02) 4320 9780

www.cclhd.health.nsw.gov.au/ourservices/CCCS