

PATIENT INFORMATION

Brachytherapy for Cancer of the Cervix

1. Introduction

Radiotherapy treatment can be given from outside the body (external) or from inside the body (internal). In the treatment of cervical cancer both external and internal radiotherapy is given. **Brachytherapy** is the use of “internal radiation” to the cervix cancer. It is performed at Liverpool Hospital.

This booklet is designed to provide you with information about brachytherapy treatment for your cervix cancer.

2. Rationale for Brachytherapy

Brachytherapy allows the cervix cancer to be treated with high doses of radiotherapy without giving too much radiation to the bowels or bladder. It increases the chance of being cured from your cervix cancer.

3. Brachytherapy Surgery, Planning and Treatment

Your **Radiation Oncologist** will work out the timing of your brachytherapy sessions. Chemotherapy is **NOT** given during the brachytherapy. The first brachytherapy is either in the last week of external beam radiotherapy or the week after.

Brachytherapy to the cervix consists of 2-4 treatments, given once or twice a week. Normally you are admitted and discharged on the same day (Day Only Admission) but some patients may need to be admitted. You will spend the whole day in the hospital as the radiotherapy is planned and delivered in the same day.

Your Radiation Oncologist will give you a form that you need to take to the Admissions Department at Liverpool Hospital. This is because you will be admitted to the hospital for the day and so that you can be booked on the list for operating theatres. This form has a Patient Health Questionnaire for you to fill in and also a section for your GP to fill in, before you hand it in. You may need blood tests in preparation for this treatment. You may need to be seen in the Pre-admissions clinic for an anaesthetic assessment.

Operating Theatre

In the operating theatre, you will be seen by an anaesthetist who will usually give you a General Anaesthetic so that you are asleep during the procedure. You will be examined by you Radiation Oncologist and a catheter will be inserted into your bladder to collect urine, and a tube in your rectum, as you will be unable to get out of bed for the duration of planning and treatment. The brachytherapy applicators will be placed in the uterus and vagina.

These applicators are hollow to allow Radiation Sources to travel in them to deliver the internal radiotherapy. The sources are only used during the time of your treatment.

Once the procedure is complete and you have recovered, you will be transferred to the Cancer Therapy Centre for the planning and treatment to commence. You will have “Patient Controlled Analgesia” which is a drip with pain relief medications. You will have a

button to press that allows a dose of these medications to be released into your body, whenever you require pain relief.

It is important that you remain lying flat and still in the bed during this time until after your brachytherapy treatment is finished.

Planning

At the treatment planning appointment you will have a **MRI scan** of your pelvis in the Cancer Therapy Centre. The MRI scan involves lying on a flat bed which moves into a tunnel. The MRI scanner makes loud noises (such as knocks, bangs and clicks) while it is working. You will be given ear plugs and headphones with music to help reduce the noise of the scan.

You will then be transferred to the Nurses Bay while your treatment is being planned.

Treatment

The actual Brachytherapy Radiation Treatment is given by trained **Brachytherapy Radiation Therapists**. A **Medical Physicist** and your **Radiation Oncologist** will also be present. Generally the treatment takes about 15-30 minutes and you will remain in your bed the whole time. You will not feel anything during treatment.

After the treatment has finished, the applicators and catheter are taken out and you may go home once you feel well enough and have passed urine. This process is repeated for the remaining appointments.

You are not “radioactive” and do not need to take any special precautions after treatment except **that you will not be able to drive a car for 24 hours after an anaesthetic.**

4. Side Effects of Brachytherapy

Brachytherapy works by delivering a high dose of Radiation to a small area. Like external beam radiotherapy the normal cells in the area being treated are also affected. This causes side effects. However, normal tissue cells have a greater capacity to recover from the radiation compared to cancer cells. The gap between each treatment allows the normal cells to recover. The following is a list of possible side effects that may be experienced.

Early Side effects

Bleeding from the vagina

This may be due to the cancer or from the insertion of the applicators. The bleeding usually settles within a few days. Occasionally if there is severe bleeding after removal of the applicators, the vagina may need to be packed with gauze to stop this and you will be admitted to hospital.

Pain in the pelvis

This is due to the insertion and removal of the applicators. Whilst the applicators are in you will be given a drip containing pain relief medications. The discomfort usually settles within a few hours after the applicators are removed. **Paracetamol (Panadol, Panamax)** can be used at home for pain relief.

Perforation

Uncommonly, the uterus may be perforated during the procedure. This means that a small hole has been made in the uterus that could put you at risk of infection in the abdominal cavity. If this occurs you will be treated with antibiotics and may need to be admitted to hospital.

Infection

This is a possible complication of the brachytherapy. If you feel unwell with fevers or severe pain in the abdomen or pelvis, you should come to hospital immediately to be treated with antibiotics.

Long Term Side effects

The radiation has to travel through some of your normal tissues to get to the area that is being treated. These tissues are damaged by the radiation but usually recover. However sometimes radiation can cause permanent changes in your body. You may not have any symptoms from this. Occasionally these changes can cause side effects months to years after radiotherapy. Your radiotherapy is planned in a way to reduce the chance of any long term side effects.

Bleeding from the bowel

The combination of external beam radiotherapy and Brachytherapy can occasionally cause some bleeding from the bowels. If this occurs you need to see your doctor to make sure that there are not other causes for the bleeding. You may need to see a specialist (Gastroenterologist) who can perform a Colonoscopy to look inside your bowel. The bleeding may get better with time and some changes in your diet. Occasionally, treatment by the Gastroenterologist is needed if the bleeding persists.

Bleeding from the bladder

The combination of external beam radiotherapy and Brachytherapy can occasionally cause some bleeding from the bladder. If this occurs you need to see a specialist (Urologist) who can perform a Cystoscopy to look inside your bladder. This may get better with time or need treatment by the Urologist. .

Fistula

A **fistula** is a false passage between your vagina and rectum or vagina and bladder. This may form if you have a large cancer that shrinks with radiotherapy and leaves a hole connecting these areas. This can usually be fixed with surgery.

Vaginal symptoms

The vagina will become drier from radiotherapy and may be smaller as well. You may need to use water-based lubricants such as **KY jelly, Lubafax, Sylk, Wet Stuff, and Glide**. These can be bought from your chemist or supermarket. Your doctor may also prescribe **Vagifem** pessaries to help. Your Radiation Oncologist will also recommend a **Vaginal Dilator** at the end of treatment. This is a plastic cylinder used to stretch the vagina after radiotherapy to try and stop it from shrinking. You will be referred to a **Clinical Psychologist** for education on the use of the dilator.

Sexual Function

Radiotherapy to the pelvis can affect your sex life. It may be painful to have sex because your vagina is smaller and dryer. A lot of lubrication may be needed for

sexual intercourse. You may find that your sexual desire is not the same as before treatment. Speak to your doctor if you are having problems. Referral to a psychologist or sexual health counsellor may help in improving your sexual function.

Pregnancy (if applicable)

It is very important that you do not become pregnant whilst you receive radiotherapy. Radiation will cause damage to a developing foetus. You must tell your radiation oncologist before you receive radiotherapy if you are pregnant or may be pregnant.

