

Radiotherapy for lymphoma



The name of your consultant is:

.....

The radiographer who explained the treatment to you is:

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You can contact us on:

Tel: 01326 315720 - 9am to 5pm

What is radiotherapy?

Radiotherapy treats cancer by using high energy X-rays to destroy cancer cells while doing as little damage as possible to normal cells. It is often given in addition to chemotherapy.

Radiotherapy is usually given as a course of treatment in daily sessions from Monday to Friday, with a break for the weekend, for several weeks. The exact number of treatments depends on the type and size of the lymphoma or the area of the body to be treated.

How often will I need treatment?

Radiotherapy may be given in a single visit or daily over several weeks. Your oncologist (cancer specialist) will decide how many treatments you will need. Treatment is given daily on week days and lasts about 10 minutes.

What is a planning scan?

Before you start radiotherapy it is essential that we carefully target the area needing treatment. The most accurate way of doing this is by means of a CT scan.

The scan will be carried out in the Sunrise Centre and usually takes 10 minutes. At the end of the CT scan you will be asked if we may make some permanent dots (tattoos) on your skin. These marks act as reference points and are used to ensure that you are lying in the same position each time you are treated. They also allow us to ensure that the correct area is being treated.

If you need treatment to your neck it is sometimes necessary to make a head shell which you wear during treatment. This ensures that your head and neck remain still and also allows us to mark reference points without using tattoos.

How is a head shell made?

This is done in the scanning room before your planning scan is done. You will be lying with your head on a shaped head pad. The shell is made using a thermoplastic material which is soaked in warm water to make it soft. It is then moulded across your face and neck. As the material cools it becomes rigid and is then clipped into place on either side of the head pad. This procedure takes about 20 minutes.

What happens on my first day of treatment?

1. One of the radiographers will collect you from the waiting room and explain exactly how the treatment will be given.
2. You will be taken into the treatment room and asked to lie on the couch in the same position in which you were scanned. You will be asked to remove any clothing which covers the treatment area.
3. The radiographers will position the couch in the correct position and then leave the room before switching the machine on. The radiographers can both see and hear you during the treatment, which lasts about 10 minutes.
4. An X-ray or short CT scan (CBCT) will be taken on the treatment couch before each treatment begins. This is to check positioning and ensure accuracy.

You will have the option to see a Review Radiographer each week to discuss any side effects you may be experiencing.

What side effects can I expect?

Radiotherapy is a local treatment and the side effects are related to the area you are having treated. A radiographer will talk to you before you have any treatment to discuss any side effects you may expect.

Short term side effects

These occur during and immediately after the course of radiotherapy and depend on the area you are having treated. For example, radiotherapy to the:

- abdomen – may cause nausea and diarrhoea
- pelvis – may cause diarrhoea and urinary frequency
- chest – may cause nausea, cough and painful swallowing
- head – will cause hair loss with possible headache and nausea
- neck – will cause sore, red skin, sore throat, and nausea
- skin – will cause sore red skin which may blister.

Radiotherapy to any area can cause tiredness.

All these acute side effects may worsen for a week or two following radiotherapy, but will then settle and should completely resolve.

Are there any long term side effects?

Some side effects may occur years after radiotherapy and are again dependent on the area being treated and the dose of radiation being given. Your oncologist will discuss the risks of long term side effects with you.

More accurate planning and treatment methods and equipment have made these side effects less likely to occur.

General advice

If you have secondary cancer (metastases) in the bones of the spine (vertebrae) there is a risk of developing Metastatic Spinal Cord Compression. This is when the metastases press on the nerves in your spinal cord. It is very rare but may cause damage to the spinal cord if left untreated.

The symptoms to watch for are:

- numbness, pins and needles, or weakness in your arms or legs
- difficulty in using your arms or legs
- problems controlling your bowels or bladder.

If you become aware of any of these symptoms, immediately contact your GP, your Macmillan Nurse or the Sunrise Centre on 01872 258340.

Data Protection

All personal details and photographs taken during the planning and delivery of radiotherapy will be used in accordance with this Trusts' policy on the protection and use of patient information.

If you would like this leaflet in large print, braille, audio version or in another language, please contact the General Office on 01872 252690

