

HDR Brachytherapy to the Oesophagus

Radiotherapy Department



Patient information leaflet

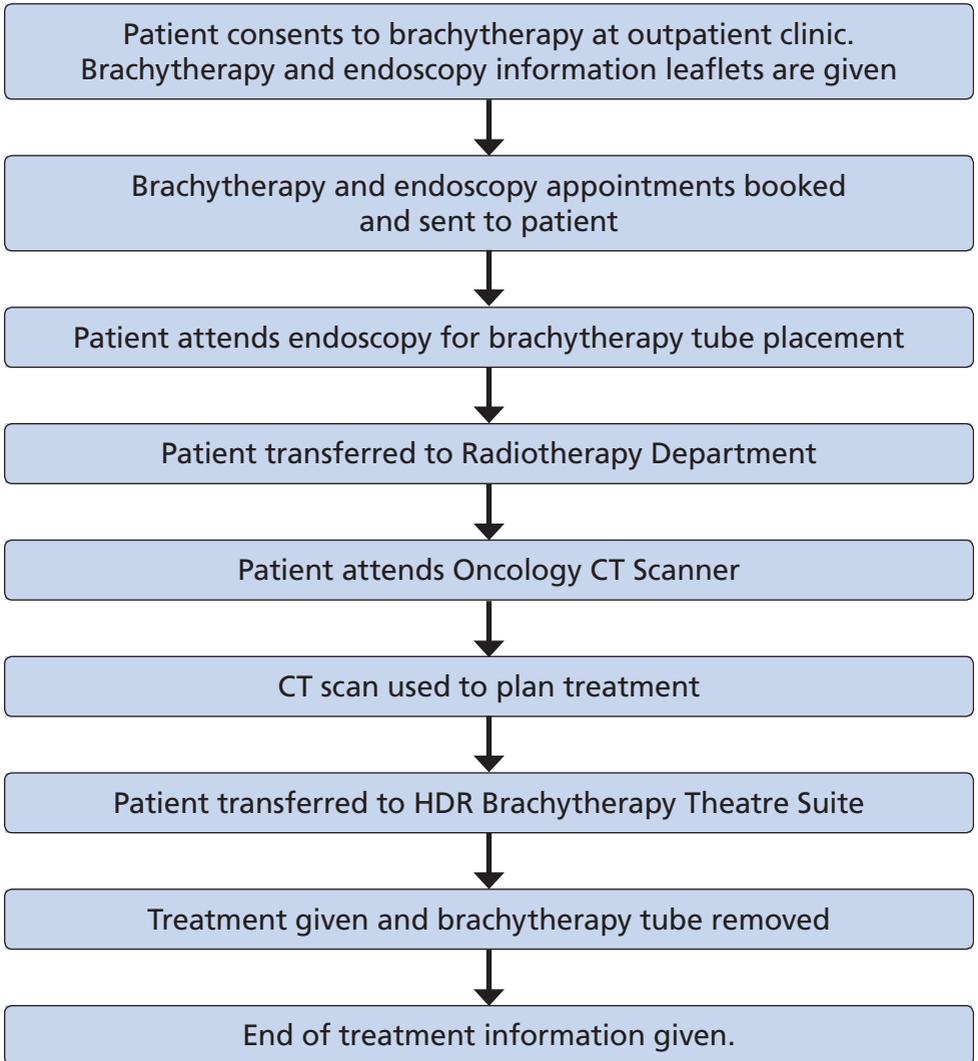
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Please see the department's website for additional information. The site also provides information on recent patient surveys carried out in the department and any actions arising from the results.

www.royalsurrey.nhs.uk/st-lukes-centre

Patient Pathway – Oesophageal HDR Brachytherapy



Introduction

Your clinical oncologist has decided that brachytherapy is the most appropriate way of treating your tumour to relieve your symptoms. When recommending radiotherapy, your doctor takes into account the risk of the tumour returning or growing if no radiotherapy is given. While the treatment may have some side effects, it is felt that the advantages for you would outweigh the disadvantages.

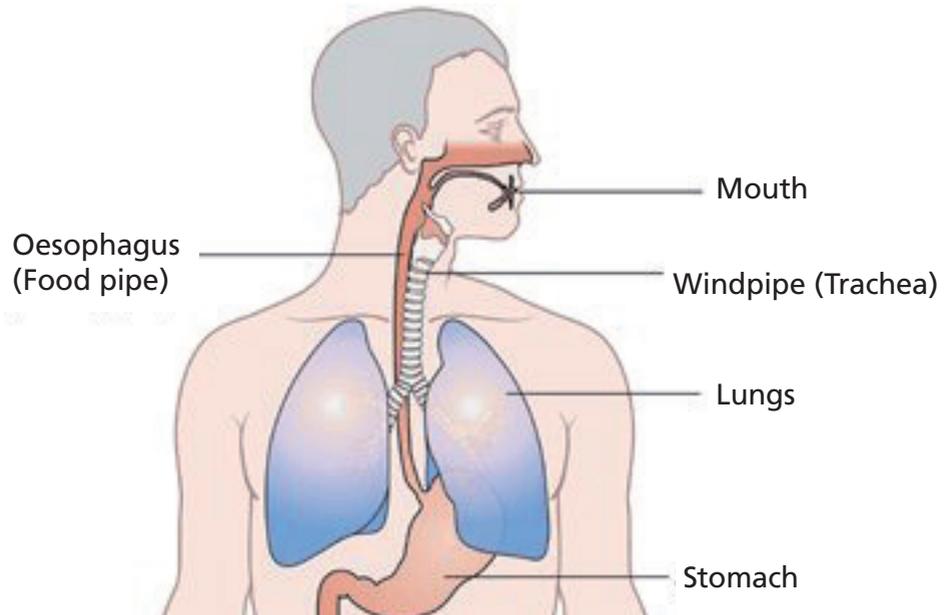
At this stage the oncologist will probably have discussed with you the risks and benefits of undergoing brachytherapy and you may have been presented with a consent form to sign agreeing to have the treatment.

The risks of receiving brachytherapy to the oesophagus are outlined towards the end of this leaflet.

Who is this leaflet for?

This leaflet is specifically for patients having internal radiotherapy to the oesophagus. This is known as brachytherapy.

Figure 1 shows the oesophagus (food pipe).



Your treatment will be designed for your specific needs and may differ from what another patient with a similar diagnosis may be having.

You will have an opportunity to talk with a radiographer on the day of your treatment before the endoscopy procedure.

What is HDR brachytherapy and how does it work?

HDR (high dose rate) brachytherapy is a form of radiotherapy where a small piece of radioactive metal is placed in or near the tumour, via an applicator, for the duration of your treatment. The movement of the radioactive metal is computer-controlled via a remote after loading unit.

This type of radiotherapy enables a high dose of radiation to be given directly to the tumour. The surrounding normal tissues receive a much lower dose, thereby reducing the severity of any side effects. However, some healthy tissue may be affected which may result in side effects. Some of these effects occur soon after treatment and in most cases there is recovery time for a few weeks to a few months following completion of treatment. Radiotherapy to the oesophagus can also lead to more long-term side effects which are explained later.

What are the alternatives?

You may decide that you do not want to have brachytherapy; this is an option you can choose. Talk again with your doctor if you wish and let him or her know what you have decided.

You may request a second opinion on your diagnosis or treatment at any time during your consultation or treatment process.

Who will I meet during my brachytherapy?

- **Endoscopist:** a doctor who is trained to examine your oesophagus (gullet) using an endoscope and insert the treatment applicator.
- **Clinical Oncologists:** doctors who are trained in the use of brachytherapy. The consultant will be in overall charge of your care. They are supported by a team of doctors consisting of specialist registrars and other medical staff.
- **Therapy Radiographers:** deliver the brachytherapy. They also provide support and advice on side effects and their management.
- **Medical Physicist:** they may be present during your treatment, usually outside the treatment room. They provide radiation dose information.
- **Clinical Nurse Specialist (CNS):** provide support and advice on all aspects of your treatment. They will continue to keep in touch with you after treatment has finished.

What happens before my brachytherapy?

Following your initial out-patient appointment with the doctor you will be sent a letter asking you to attend the endoscopy unit first on the day of the procedure. It is helpful to bring your appointment letter with you.

Before your endoscopy, a member of the brachytherapy team will explain the treatment procedure. During this discussion you will be asked to confirm your name, address and date of birth. You will be asked for this information before every procedure or treatment undertaken in the department. The following subjects will also be addressed:

- **Confirmation of consent:** you will probably have already signed a consent form with your clinical oncologist. That consent will be re-confirmed with a radiographer prior to your treatment. This is to ensure that you still agree to proceed with the proposed treatment.

- **Pacemakers:** If you have a pacemaker and you did NOT discuss this with your clinical oncologist when you signed the radiotherapy consent form please phone the CT scanner to let them know. The number is at the end of this information leaflet. It is safe to give radiotherapy to patients who have a pacemaker but there are a few precautions we may need to take. The radiotherapy department will send you an information sheet entitled 'Pacemakers and Radiotherapy' for you to read and keep with your other patient information leaflets. This leaflet will explain why extra precautions may be needed and what those precautions are. It will also highlight any extra appointments you may need to attend the hospital for. Please bring your pacemaker ID card to your CT appointment.
- **Pregnancy:** All female patients under the age of 55 will be asked to confirm their pregnancy status before the first planning session starts. It is very important that you are not and do not become pregnant while undergoing radiotherapy planning and treatment. If you think you may be pregnant at any time during your course of treatment please tell your clinical oncologist or radiographer immediately. If necessary please speak to your doctor about contraception methods suitable for use during radiotherapy.

Endoscopy

The endoscopist will examine your oesophagus (gullet) using a long flexible tube with a mini video-camera (an endoscope). They may mark the extent of the lesion with clips. The treatment applicator will then be inserted, guided by the endoscope. This applicator goes up your nose and down your throat into the oesophagus beyond the lesion. The end of the applicator will be secured by tape to the outside of your nose to keep it firmly in place for your treatment.

For further information about the endoscopy procedure please see the separate endoscopy leaflet.

Figure 2 shows the applicator in position

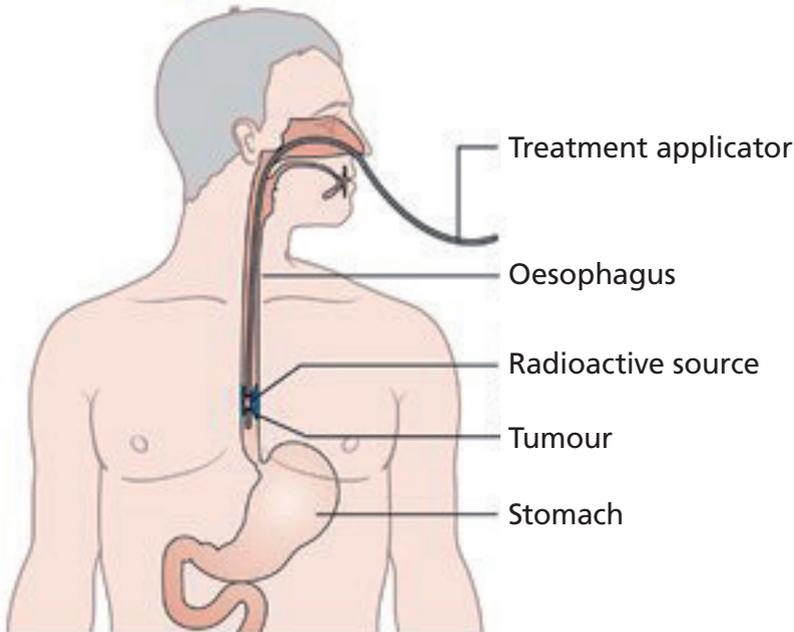


Figure 2 (Courtesy of Cancer Research UK)

CT scanner

The brachytherapy radiographers will escort you to the oncology CT scanner in St Luke's Cancer Centre, level A.

A CT (computerised tomography) scanner is a special x-ray machine that produces a series of detailed pictures showing the oesophagus with the applicator in position. The scans are sent to a computer and used to reconstruct a 3-D image of your oesophagus. The radiotherapy team will then use this image to accurately target your treatment.

- The radiographers may go in and out of the room several times during the procedure. You will hear them talking over you during the setting up process.
- They are able to hear and see you at all times. If you need to communicate with them call out or wave your arm.
- Your CT scan appointment will take about 15 minutes.

Planning

After your CT scan, the images are used by the oncologist and physicists to accurately plan and calculate your treatment. There may be a short delay before your treatment whilst this is happening.

Treatment

- You will be taken to the brachytherapy suite where the treatment will take place. You will be made as comfortable as possible, usually lying down.
- The radiographers will connect the end of the applicator, which is attached to your nose, to the brachytherapy remote afterloading unit. They will inform you how long your treatment will take and will leave the room to commence treatment.
- The radiographers have to remain outside the room during your treatment. They are able to see you via CCTV at all times. If you need to communicate with them raise your arm.
- The whole procedure will take approximately 20 minutes.

What sort of side effects might I have, and for how long?

Although modern planning and treatment methods have helped us to reduce side effects, some people may still experience some side effects of radiotherapy. The severity of side effects varies from person to person.

Radiotherapy side effects are closely related to the area of your body where you are treated. As you are to receive treatment to your oesophagus most side effects that you have will be limited to this area of your body. If you have had external beam radiotherapy to the oesophagus previously you may experience more side effects following treatment (as detailed in the oesophagus external beam radiotherapy leaflet) and your doctor will discuss these with you before you consent to treatment.

In general this treatment is given for relief of your symptoms with very few side effects. Please feel free to discuss all issues that may be concerning you with the radiographers who are treating you.

Short-term risks

Short-term side effects appear after brachytherapy and may last for 2-3 weeks after treatment has finished. After that they gradually improve.

- **Swallowing difficulties:** You may feel you have mild heartburn or indigestion, with food appearing to get stuck or causing discomfort as it is swallowed. This is quite normal and should begin to improve about 2 weeks after your treatment. Please let your medical team know as medication can be used to help manage any discomfort.
- **Coughing up or vomiting blood:** Sometimes your tumour may bleed causing a little blood loss. In general brachytherapy is used to improve this symptom but occasionally it may get slightly worse for a few days before it improves.
- **Tiredness:** it is quite common to feel more tired than usual while having radiotherapy. As the treatment can make you dehydrated, drinking the recommended amount of fluid per day can help with this. Rest if you need to, but if you feel OK carry on with all your normal daily activities.
- **Smoking:** if you smoke it is strongly advised that you give up. Smoking during your radiotherapy can irritate your throat and increase the severity of your side effects. Please speak to the radiographers or your medical team if you would like information on how to give up smoking. There are free, Stop Smoking clinics available in the department or your GP may also run free nurse-led smoking cessation clinics. Further details are at the end of this leaflet.
- Alcohol may also make your throat more uncomfortable, so we advise that you limit your intake to a very occasional glass of wine, beer or watered down spirit.

Long-term risks

- **Swallowing difficulties:** treatment can cause a tightening of the tissues in the oesophagus (called fibrosis) and for some patients this can make swallowing more difficult. If necessary you will be given advice and support from a dietician and speech therapist. For a very small number of patients it may be necessary to perform a surgical procedure to stretch the oesophagus.
- **Bleeding:** Some patients who have had brachytherapy to their oesophagus develop symptoms of vomiting blood afterwards. This is usually related to the tumour rather than the treatment so please inform your doctor if it does occur.
- **Fistula (hole) formation:** Very rarely instances of a hole forming between the oesophagus and the windpipe have been described. Again this is usually due to the tumour growing into the windpipe when the brachytherapy has been given to relieve symptoms rather than to stop the tumour growing altogether. Management for this could include having a flexible plastic tube placed in the windpipe to cover the hole.
- **Secondary malignancy:** treatment with radiotherapy can give rise to a second primary cancer. This would normally occur in the area of the body that had received the radiation. This is a very rare late effect.

What happens when treatment ends?

- When you have finished your treatment a radiographer will explain that the treatment will carry on working for another 2- 3 weeks. Any short-term side effects may get slightly more marked during this time but after that they should slowly start to improve.
- The radiographer will make sure you have a follow-up appointment with your clinical oncologist. This appointment may be at a hospital nearer to your home.

- You will be given a leaflet and two letters outlining a summary of the treatment that you have had, along with any additional instructions or information that may be helpful to you. One letter is for your records and the other for you to give to your GP. In due course a letter summarising your treatment in more detail will be sent through the post to your GP.
- Please remember you are free to contact the radiographers or your Clinical Nurse Specialist at any time after your treatment has finished should you have any concerns or questions. Contact numbers are at the end of this leaflet.
- Please do not book a holiday too close to the end of your treatment in case the treatment does not take place on the date originally listed on your appointment schedule. This also allows you time to recover from any side effects experienced.

Where can I get further support?

Further support can be given by the various Support Centres at locations in Guildford, Redhill, Crawley and Purley. These centres provide information, complementary therapies, support groups and one to one support.

To find out more contact the individual centres or ask radiotherapy department staff for a leaflet.

The Fountain Centre is located in St Luke's Cancer Centre at Guildford.

- Telephone: 01483 406618
- Website: www.fountaincancersupport.com

The Olive Tree is located in Crawley Hospital, Crawley.

- Telephone: 01293 534466
- Website: www.olivetreecancersupport.org.uk

Macmillan Cancer Support is located at East Surrey Hospital.

- Telephone: 01737 768 511 ext 2078

South East Cancer Help Centre is located in Purley, Surrey.

- Telephone: 020 86680974.
- Website: www.sechc.org.uk

Please also see the department's website for additional information at

- www.royalsurrey.nhs.uk/st-lukes-centre

Other support websites and groups

Cancer Research UK

- Website: www.cancerresearchuk.org
- Telephone: 0808 800 4040

Macmillan Cancer Support

- Website: www.macmillan.org.uk
- Telephone: 0808 808 0000

Lymphoma Association

- Website: www.lymphomas.org.uk
- Telephone: 0808 808 555

Human Fertilisation and Embryology Authority

- Website: www.hfea.gov.uk
- Telephone: 0207 291 8200

Quit51

- Website: www.quit51.co.uk
- Telephone: 0800 622 6968

Useful telephone numbers

Telephone numbers across both sites (Guildford/Redhill)

- Treatment Appointments 01483 571122 ext 6632
- Onslow Ward (out-of-hours) 01483 571122 ext 6858
- For urgent enquiries (out-of-hours) call hospital switchboard on **01483 571122** and ask operator to bleep on-call oncology SHO.

Guildford numbers

- Radiotherapy Reception 01483 406600
- Oncology CT scanner 01483 406630
- Patient Support Office 01483 571122 ext 2066
- Oesophageal CNS 01483 571122 ext 6374
- Dietetics Department 01483 571122 ext 4202
- Nutrition Support Sister 01483 571122 ext 2598

Redhill numbers

- Radiotherapy Reception 01737 277311
- Oncology CT Scanner 01737 768511 ext 1202
- Patient Support Office 01737 277315

Additional information

- In order to improve treatments and services, audits are regularly carried out in the department. This can involve using patient notes. The notes will have all identifiable details removed to ensure patient confidentiality. However, if this is unacceptable to you please let your consultant know so your wishes can be respected.
- Clinical trials are undertaken within the department. If appropriate your doctor will discuss this with you.

Radiotherapy contact details

Radiotherapy reception

Telephone: 01483 406 600

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–3.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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