Skin Reactions

The skin around your pelvis area may experience a skin reaction. The high risk areas are your groin and around your anus (back passage) as these areas have skin folds. It will not happen straight away but tends to develop gradually throughout treatment and usually starts to settle 2-4 weeks after treatment finishes.

Skin reactions can't be prevented, however there are things you can do to help yourself feel more comfortable.

Tell your radiation therapist or nurse about your skin care routine. They will let you know if any changes are advised.

Note: Anal Canal treatment: if you're having treatment to your anal canal you are more likely to notice a more advanced skin reaction to your anus. This can be associated with pain and mucous discharge. Please speak to your team so we can help manage these symptoms.

Rinse off the chlorine or salt immediately after and apply moisturiser if required

Hygiene and moisturising

- Our nurses will give you a moisturiser to use during treatment if required. If you have a preferred one please bring it in to show our nurses
- Use the moisturiser a few times daily. Do not apply immediately before your treatment
- Please stop using it if you skin becomes irritated, blisters or peels.

Hair loss (alopecia) in the treatment area

You may notice alopecia to your pubic hair. Partial alopecia is thinning of the hair and/or patchy hair loss. It should start to grow back within a few weeks after radiation therapy finishes, but may be thinner. There is potential this could be permanent.

Nausea

This is uncommon with pelvic radiation therapy and more commonly related to chemotherapy.

- Try natural anti-sickness food and drink (including ginger)
- An Oncologist can prescribe anti-sickness medication
- Acupressure bands on your wrists.

References:

SCoR—The Society and College of Radiographers, 2021. https://www.sor.org/news/scor-updates-radiation-dermatitis-guidelines

Illustrated panels from the above reference

eviQ— Radiation Oncology, Colorectal, ID: 1863 v.5, last reviewed 7 December 2018, eviQ Cancer Treatments Online, Cancer institute NSW, https://www.eviq.org.au/radiation-oncology/colorectal/1863-colorectal-rectum-neoadjuvant-ebrt-chemoradia##side-effects

Radiation Therapy to the Pelvis: Side Effects Overview

Radiation therapy can cause side effects in your treatment area which can vary from patient to patient. The Radiation Oncologist will have discussed the possible short and long term side effects with you during the consent process.

This brochure explains the short term side effects. These symptoms can begin during a course of radiation therapy and may even peak 1-2 weeks after a treatment course is complete. They should have settled around 6 weeks after treatment.

The oncology nurses will see you on day one or two of your treatment to discuss any concerns or questions you have. Further assessments can be arranged at this time.

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TE TOKA TUMAI
Auckland DHB

Most Common Side Effects

- Fatigue
- Bowel changes
- Bladder changes
- Skin reactions
- Hair loss in the treatment area
- Nausea
- Pain and swelling. Swelling can occur in the treatment area which can cause discomfort or pain. Take pain relief such as paracetamol as required. Discuss with your treatment team if the pain is no longer managed.
- Fertility. This must be discussed with your Radiation Oncologist prior to commencing treatment.

Note - If you are sexually active, contraception should be discussed with your Radiation Oncologist prior to starting treatment.

We're here to help!

Every day a radiation therapist will ask how you are. Please do not hesitate to voice any concerns. If you're experiencing any of these side effects (not limited to this list), we can refer you to our oncology nurses to discuss further.

Contacts

Regional Blood and Cancer Service
Building 8, Level 4, Auckland City Hospital
Auckland District Health Board
Phone: 09 307 4949
Reception ext 22631
Nurses ext 22837
Acute Oncology ext 23826 (Mon-Fri 8-4pm)

Fatigue

There are many contributing factors that will cause tiredness

- The effect of treatment on normal cells
- Stress related to your illness
- Daily travel to treatment
- Balancing life outside your treatment.

Fatigue Suggestions:

- Ensure you're eating a balanced diet (additional supplements are **not** recommended, unless prescribed by your oncology team)
- Drink plenty of fluids (unless on fluid restrictions)
- Rest and gentle exercise (e.g. walking)
- Practice self care (personal techniques that help you relax)
- Accept help from others.

Bowel Changes

Radiation therapy can cause inflammation to the bowel lining resulting in these potential side effects:

- Diarrhoea
- Constipation
- Increased bowel frequency
- Rectal urgency
- Pain / cramping
- Passing wind
- Mucous discharge
- Bleeding (less common)

Please advise your treatment team if you are experiencing any of these side effects.

What can I do?

- Diet changes – low fibre diet. Ask the team for more information on this
- Try small frequent meals every few hours
- Ensure you drink plenty of fluids (unless you are on fluid restrictions)
- Anti-diarrhoea medication (reduce/stop diarrhoea)
- Regular pain medication
- Antispasmodics

Constipation

This is less common than diarrhoea, but if this does occur you must let the treatment team know and be assessed by the nurses.

Bladder changes

Radiation therapy can cause inflammation of the bladder resulting in these potential side effects:

- Frequency and urgency of urination
- Painful / stinging urination
- Abdominal pain
- Blood in urine
- Leaking urine (incontinence)

Please advise your treatment team if experiencing these side effects.

What can I do?

- Drink plenty of fluids to dilute urine and make it less irritating (unless on fluid restrictions)
- Avoid alcohol and caffeine
- Ural ™ sachets to alkalise the urine
- Our nurses may take a urine sample to test for infection