

Three large, dark teal, curved shapes on the left side of the page, resembling stylized arcs or segments of a circle, arranged vertically and overlapping slightly.

High Dose Rate (HDR) brachytherapy for cancer of the cervix

Radiotherapy

A guide for patients and carers

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Your Oncologist (Cancer Doctor) has recommended HDR Brachytherapy. This information booklet will tell you about this treatment, what to expect when you attend, what to expect after treatment and any possible long term side effects.



What is brachytherapy?

Brachytherapy delivers radiation into body cavities or tissues using hollow tubes known as applicators and is ideal to treat tissue that is close to the applicator. An applicator is put in place just before each treatment session. The radiation comes from a small solid radioactive source that is stored in a specialised treatment machine.

During treatment the radioactive source travels down a tube, into the applicator, delivers the radiation as per your specific patient plan and is then automatically returned to the machine. You are NOT radioactive following your HDR Brachytherapy treatment and are therefore fine to be around children and anyone who is pregnant. Brachytherapy treatments can be delivered alone or can be combined with external beam radiotherapy (EBRT).



HDR machine and treatment room

Where is the treatment given?

Brachytherapy treatment is carried out in the Brachytherapy Suite at Clatterbridge Cancer Centre. We will arrange a floor clinic appointment for you during your course of EBRT treatment to give you more information and arrange the date for your first brachytherapy treatment. You will be asked to attend a pre-operative assessment during your EBRT to check that you are suitable for a general anaesthetic. Your first brachytherapy appointment is usually within a few days of finishing your course of EBRT treatment. The remaining treatments are given over the following 1-2 weeks (theatre sessions being twice a week).

Brachytherapy treatment is carried out in the Brachytherapy Suite also known as "Theatre" at Clatterbridge Cancer Centre, 65 Pembroke Place, Liverpool L7 8YA. Please check in on Floor 1.



For further information regarding parking, hospital transport, on site facilities and visiting please go to our website: clatterbridgecc.nhs.uk



Pre-operative assessment

Before Brachytherapy Treatment you'll be asked to attend the department for a pre-operative assessment which is an in-person appointment with one of our Theatre Nurses.

This appointment is designed to check whether you have any medical problems that might influence decisions on the best way to deliver your treatment, the type of anaesthetic you may be offered and whether you'll need any special care during or after your surgical procedure.

At the appointment you will be asked questions about your health, medical and surgical history and home circumstances. Your blood pressure, heart rate, oxygen saturations and temperature will be measured and there may also be some additional tests such as an ECG, blood tests and routine swabs for MRSA.

You can drive unaccompanied to this appointment. Please allow 1 hour and bring a full list of your medications with you.

N.B If you are patient based outside of the North West, arrangements will be made to have your pre-operative assessment in a local hospital.

Preparation for treatment

It is very important that you prepare for your procedure in following ways:

- No food or drink should be consumed within the 6 hours before attending Brachytherapy for a procedure under general anaesthetic, except clear fluids (water) which can be taken in small amounts up to 2 hours before going into theatre.
- You must have someone available to pick you up after the procedure is finished. This is because you will be under general anaesthetic (asleep) for the procedure and therefore, you must not drive for 24 hours after the treatment.
- If you are taking blood thinning medication you will be advised at your pre-operative assessment when to stop taking them.

What to expect when you attend for treatment

You will be admitted on to the Day Case Ward Floor 1 - where you will have a private bedroom for the whole day.

There you will be seen by members of the Brachytherapy team including the Cancer Doctor and Anaesthetist before your procedure.



You will be given an enema on the day of the procedure to empty the lower bowel.

For the first part of the procedure, you will be taken to theatre to be anaesthetised (put asleep). While you are under anaesthetic, you will be catheterised and will have an internal examination. The applicator is put in place and secured. This part of the procedure takes about half an hour.

As you start to wake up from the anaesthetic, you may have some pelvic discomfort and pain. We will give you painkillers as required, to keep you comfortable. You must stay on the bed trolley, lying on your back with your legs flat. You will remain in this position until you have the brachytherapy treatment later that day.

Once awake, you will be taken to have an MRI scan and will then wait in your private bedroom whilst your plan is created. You may have drinks and light snacks while you wait and our staff are available to assist you throughout the day.

Your treatment plan is then calculated and once complete, you will be taken into the Brachytherapy HDR treatment room which is next to the theatre suite.

The applicator in your body is connected to the treatment machine via a tube and the treatment begins. You will hear some noises from the machine but you will not be able to feel anything. The staff do not stay in the room but they can see and hear you during treatment via CCTV and a microphone. The treatment time is about 5-10 minutes and can be interrupted at any time if needed. Once completed, the radioactive source returns automatically to

the treatment unit and the applicator and catheter are removed before you go back to the ward. You are awake for the removal of the applicator and catheter, it takes just a few seconds and you may briefly have some discomfort.

You are then taken back to the ward where you are discharged home that day. You must have someone available to pick you up after the procedure is finished and have a responsible adult to stay with you over night. You must not drive for 24 hours after the anaesthetic.

Possible side effects after your treatment

After your treatment, you may experience some side effects. These symptoms are normal and should last a few days only. However, if they continue or worsen, you should contact your GP.

These may include:

- 'Spotting' (slight bleeding) or discharge from the vagina. These symptoms are normal. If the discharge becomes smelly, you may have an infection and may need antibiotics: see your GP.
- Pain and/or discomfort when you empty your bladder (cystitis). It is important to drink plenty of fluids, as this will help to soothe the bladder.
- Abdominal cramps - You can use an over-the-counter painkiller such as Paracetamol or Ibuprofen (unless you are allergic to them) to relieve the discomfort.



- You may have the sensation of needing to empty your bowels, but then only have small movements or just pass mucus and wind. This is called tenesmus and happens as a result of irritation to the rectum.

Combination of treatments

The effects from brachytherapy alone are relatively mild. If you have also had EBRT, there are side effects relating to this which are detailed in the 'Radiotherapy to the female pelvis' patient information leaflet.

Possible late side effects

Brachytherapy treats only the tissues that are close to the applicator. It is possible that scar tissue will slowly develop in these tissues. The majority of treatment-related effects appear within the 1st or 2nd year, but can start to up to 3 years later.

The treatment can cause the vagina to narrow and shorten and become less elastic (stretchy) in comparison to before your treatment. This may cause discomfort or pain during sex or an internal examination. The regular use of a vaginal dilator (dilators are tubes that are inserted into the vagina for a few minutes on a regular basis) will help to prevent vaginal narrowing and their use is recommended even if you are sexually active. The use of dilators will be discussed with you and you will be offered a pack together with additional written information.

Dryness of the vagina may also become a problem. If you are sexually active, the use of water-based lubricating gel can be helpful.

Radiotherapy can affect the tissues causing slight shows of blood after sex or after the use of a dilator, bowel motion or in the urine. If the bleeding persists or worsens, see your GP as this needs to be investigated further.

Radiotherapy to the pelvis causes a loss of fertility. Menopausal symptoms may begin during your treatment, but contraception is still advised at this time. The preferred method is barrier contraception. HRT may be discussed as part of your follow-up.

Follow-up

It is important to attend your follow-up appointments. The first appointment is usually about 6 weeks after finishing treatment. If you do not receive an appointment either by text or post within 2 weeks of finishing treatment, please contact your Cancer Doctor's Secretary.

The diagnosis of cancer together with the impact of treatment and any side effects can have a major impact on how you feel, which then affects how you behave. Sometimes, your relationship(s), including sexual intimacy, are affected. You might find that you lack interest in sex. Please discuss any sexual problems that arise with your Cancer Doctor /nurse specialist, as various treatments or referral to specialist teams are available to help.



It is entirely natural to feel anxious that your cancer may return and we recognise that this can make you feel very uncertain about the future and lead to difficulties in “getting on with life”. If you find that you have long or frequent periods of low mood you should seek help from your GP. There are many ways to be helped, including but not always, a short course of anti-depressant tablets. Sometimes, more help is required to help you cope and overcome any negative feelings. Often, these feelings become more apparent once you have completed all your treatments and you are beginning to recover. You should discuss these issues with your GP or your Cancer Doctor at your follow up appointments. Referrals to specialist staff, e.g. a psychologist or sexual health practitioner alone or with your partner can be beneficial.

When to contact your CNS

It is important to remember you will still get coughs, colds, aches and pains and bowel upsets just like anyone else. Your GP will normally be happy to treat such problems. However if they are concerned about your symptoms when they see you, they can contact your CNS who can arrange a clinic appointment.

For most patients their treatment is effective and their cancer will not come back but sometimes people do have problems. We would like you to contact your CNS if you have any of the following symptoms and they persist for more than two weeks:

- New onset of bleeding or persistent discharge from the vagina
- Bleeding from the back passage and/or changes in bowel habit
- Persistent abdominal bloating
- Bleeding after sexual intercourse
- New problems with passing water
- New persistent aches, pains, discomfort or lumps in your tummy
- New lower back pain
- Unexpected weight loss without dieting or exercise
- Persistent loss of appetite or nausea
- New persistent breathlessness
- New swelling of one or both legs

It is important to remember that even if you have some or all of these symptoms it does not necessarily mean the cancer has come back, but we will arrange to see you in clinic to check you over. Do remember, however, that some of these symptoms can also be caused by other conditions that are completely unrelated to womb cancer, so please do not become unduly anxious while awaiting your review.



Additional information

There is an information video available on our website:

www.clatterbridgecc.nhs.uk/patients/treatment-and-support/brachytherapy

There are also links to additional information leaflets:

- Radiotherapy booklet
- Radiotherapy to the female pelvis
- Use of vaginal dilators when receiving radiotherapy to the pelvis

Macmillan booklets about coping and living with cancer and treatment side effects are available free of charge. These can be ordered by telephoning **0808 808 00 00** or by visiting a Macmillan Information Centre (sited in the main entrances of Clatterbridge Cancer Centre - Liverpool, Clatterbridge Cancer Centre - Aintree and Clatterbridge Cancer Centre - Wirral).

Useful contact details

The Clatterbridge Cancer Centre

www.clatterbridgecc.nhs.uk telephone 0151 556 5000

Macmillan Cancer Support

www.macmillan.org.uk telephone 0808 808 0000

Cancer Information and Support at:

Clatterbridge Cancer Centre - Liverpool 0151 318 8805

Clatterbridge Cancer Centre - Wirral 0151 556 5570

Clatterbridge Cancer Centre - Aintree 0151 556 5959

Email: ccf-tr.informationcentre@nhs.net

Brachytherapy Clinical Specialist Radiographer

Direct dial 0151 556 5342

Gynaecological Cancer Clinical Nurse Specialist

Direct dial 0151 556 5134

The Clatterbridge Cancer Centre Hotline 0800 169 5555

If you are unwell during or up to six weeks following your cancer treatment please call The Clatterbridge Cancer Centre Hotline.

Your call will be answered by a dedicated nurse advisor. This line is available 24 hours a day, 7 days a week.



Notes



How we produce our information

All of our leaflets are produced by staff at The Clatterbridge Cancer Centre and this information is not sponsored or influenced in any way. Every effort is made to ensure that the information included in this leaflet is accurate and complete and we hope that it will add to any professional advice you have had. All our leaflets are evidence based where appropriate and they are regularly reviewed and updated. If you are concerned about your health in any way, you should consult your healthcare team.

We rely on a number of sources to gather evidence for our information. All of our information is in line with accepted national or international guidelines where possible. Where no guidelines exist, we rely on other reliable sources such as systematic reviews, published clinical trials data or a consensus review of experts. We also use medical textbooks, journals and government publications.

References for this leaflet can be obtained by telephoning 0151 556 5570.

If you need this leaflet in large print, Braille, audio or different language, please call 0151 556 5570.

If you have a comment, concern, compliment or complaint, please call 0151 556 5203.

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