



Vaginal brachytherapy

A guide for patients and their carers



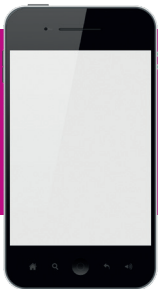
Contents

Introduction	3
The Christie website	3
What treatments are available?	4
What is brachytherapy?	4
The areas being treated	5
Agreeing /consenting to treatment	6
Some questions about brachytherapy	7
Memory.	8
Prescriptions.	8
Questions you may want to ask your doctor	9
High Dose Rate (HDR) brachytherapy	10
Short-term side effects	11
Vaginal side effects	13
Vaginal dilation	14
Sexual intercourse after treatment	17
Longer-term side effects.	17
Research at The Christie	18
After the treatment	18
Travel and holidays	20
Further information	21
Student training	22
The Christie Hotline	23
Benefits and financial information.	23
Useful websites	24
Useful contacts	25
Maggie's centres	25

Introduction

This booklet is written for patients who are having vaginal brachytherapy after a hysterectomy for cancer of the womb. The doctor and/or nurse will discuss your treatment with you and explain anything you do not understand.

If you choose, this booklet can be shared with your friends and family. If you would like more detailed information about your own treatment, please ask the staff because it is important that you feel well-informed and understand what is happening.



Please note:

Mobile phones can be used while in the department. However, you may be asked to turn your mobile on silent or vibrate while treatment takes place to avoid distracting the treating team.

The Christie website

For more information about The Christie and our services, please visit www.christie.nhs.uk or visit the cancer information centres at Withington, Oldham, Salford or Macclesfield.

What treatments are available?

Following a hysterectomy for womb cancer, the tissue that is removed from your body will be assessed and analysed by a histopathology doctor. These results will then be discussed at the weekly multi-disciplinary meeting (MDT) and a decision will be made whether you would benefit from additional (adjuvant) treatment to reduce the chance of your cancer coming back. Treatment can include brachytherapy, pelvic radiotherapy and chemotherapy either on their own or in combination.

What is brachytherapy?

Brachytherapy is a type of internal radiotherapy that can give a localised dose of radiotherapy.

When is brachytherapy offered and what are the benefits?

Brachytherapy is offered for womb cancer, where there is a small risk of cancer cells being left in the area around the top of the vagina after surgery. As the dose is localised, far fewer people get side effects compared to standard radiotherapy.

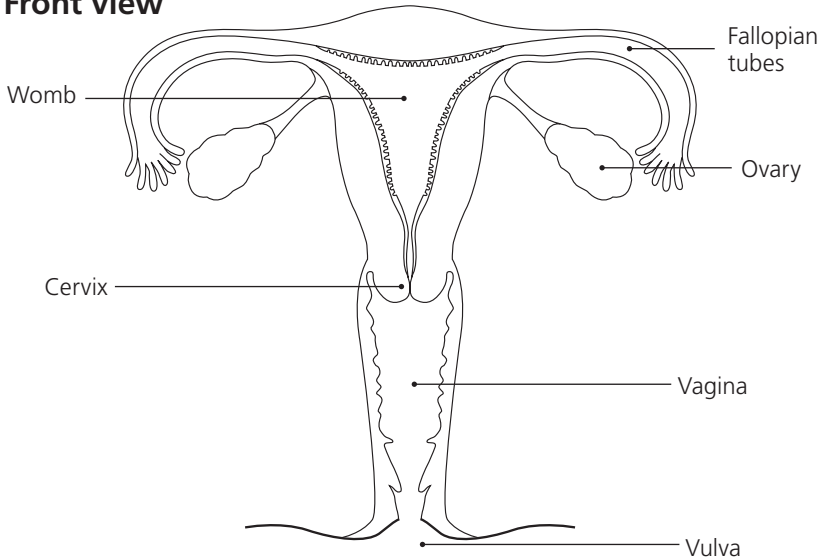
Brachytherapy is usually carried out 6 to 12 weeks after a hysterectomy.

Your doctor and/or specialist nurse at The Christie will explain and discuss with you why brachytherapy is being recommended in your situation.

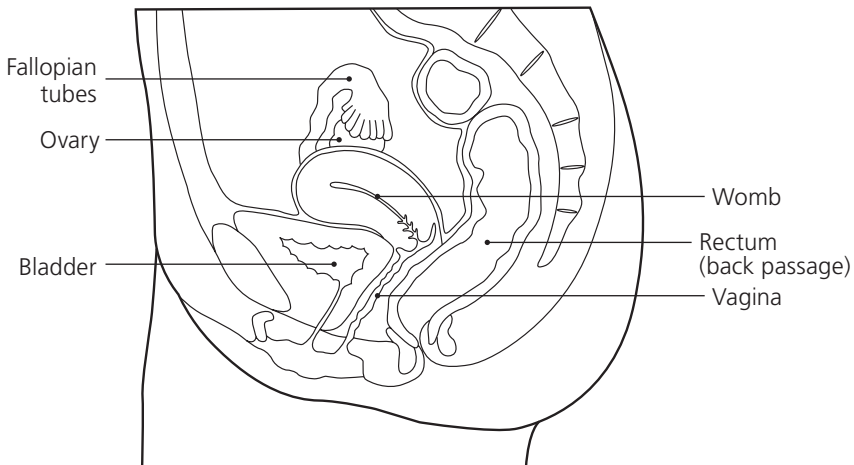
The areas being treated

These diagrams may be useful to help you understand where your cancer was and the area to be treated with brachytherapy. Your doctor may draw on them to help explain your treatment.

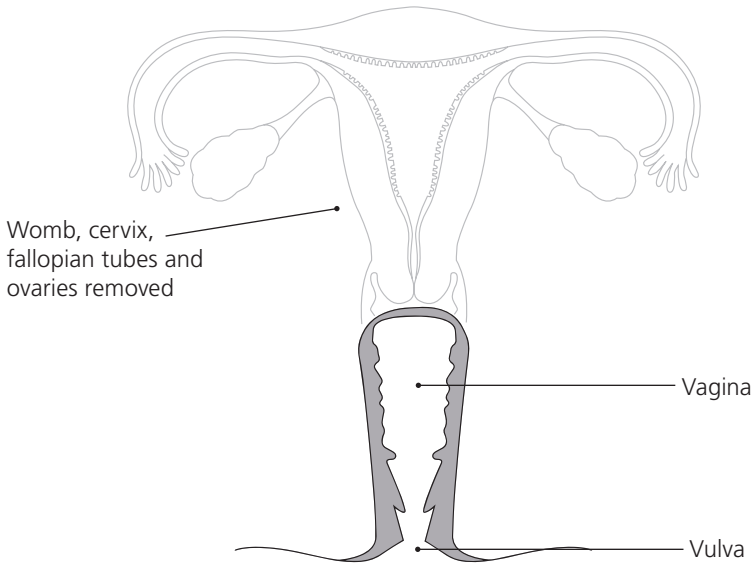
Front view



Side view



Front view following hysterectomy



Agreeing /consenting to treatment

The doctors and specialist nurses will explain the treatment and why it is being recommended in your situation. You will have the opportunity to discuss anything you do not understand, or any worries or concerns you may have. We will ask you to sign a consent form as agreeing to accept the treatment that you are being offered. The key messages in the consent form for radiotherapy are included in this booklet for you to read and consider. It is important that you understand what the planned treatment involves and that you have been given the opportunity to discuss any concerns before you sign the consent form.

The consent form is also available on line at: www.rcr.ac.uk. Search 'consent forms'. The consent form is listed under 'Gynaecologic'.

You are entitled to request a second opinion from another doctor who specialises in treating this cancer. You can ask your own consultant or your GP to refer you. Your consent may be withdrawn at any time before or during this treatment. Should you decide to withdraw your consent then a member of your treating team will discuss the possible consequences with you.

Some questions about brachytherapy

Is radiation safe?

Radiation used in medical treatment is given in controlled, carefully measured doses. The aim is to include all tissues that could possibly contain cancer cells whilst minimising the dose to the normal tissue.

Will I be radioactive?

Patients treated with this type of brachytherapy do not become radioactive. The radiation does not stay in your body after treatment, so you cannot do anyone else any harm. It is safe for you to mix with other people including children and anyone who is pregnant and you are not a danger to your sexual partner.

I already have problems with my health. Will brachytherapy make them worse?

Not usually. Please speak to your treating team about any existing medical conditions and continue with any medication that you may be taking unless they tell you otherwise. Let your team know if you are worried about any other health problems.

What happens if I need transport to attend for brachytherapy?

Many patients are able to bring themselves or can ask a friend or relative to help them out. If you think you may need hospital transport, please let the team know.

Ambulance transport can be arranged subject to an eligibility criteria based on medical need. There also needs to be a medical need for you to bring an escort on hospital transport.

There can be delays for some time either side of your appointment because of the high demand for transport. Please take this into account when you are deciding whether to use ambulance transport or not.

Hospital transport is provided by a number of different ambulance services. Contact the transport liaison office at The Christie directly on **0161 446 8114** or **8143** for advice and bookings (Monday to Friday 8:00am - 6:00pm).

Memory

People may have some deterioration in their memory as they get older for many reasons. Often this can start with being a little forgetful and it may only be apparent to themselves and those close to them. Before you have brachytherapy it is very important to let the staff know if you have any problems with your memory. This is because you will be in a room on your own for a short time and the staff will need to make sure that you are safe. If you have any concerns about your memory and being able to cope please let the treating team know as soon as possible.

Prescriptions

NHS patients being treated for cancer are entitled to free prescriptions. You will need an exemption certificate. They are available from The Christie Pharmacy or from your GP.

Questions you may want to ask your doctor

- What type and extent (stage) of disease do I have?
- Why are you recommending brachytherapy for me?
- What might be the benefits and side effects?
- Is there any alternative treatment, and, if not, why is this?
- What will brachytherapy involve and how many times will I have to visit the hospital?
- Will there be any lasting effects from treatment?

Supporting Women's After Cancer Needs (SWAN)

Before brachytherapy treatment we will give you an outpatient appointment for the SWAN clinic to see one of the specialist nurses or cancer care coordinator. This may be combined with your first appointment or on a separate day. This will address any particular concerns or questions that you may have about the treatment, vaginal dilators, sex, fertility and menopause.

It is essential that you attend as your consent to treatment will be covered at this appointment. If you would find it helpful to visit the treatment room before coming in to hospital, this can usually be arranged at this appointment. Some people find it helpful to bring their partner to this appointment. If you have any on-going problems using your dilators or resuming sexual relations then you can self-refer back to this clinic.

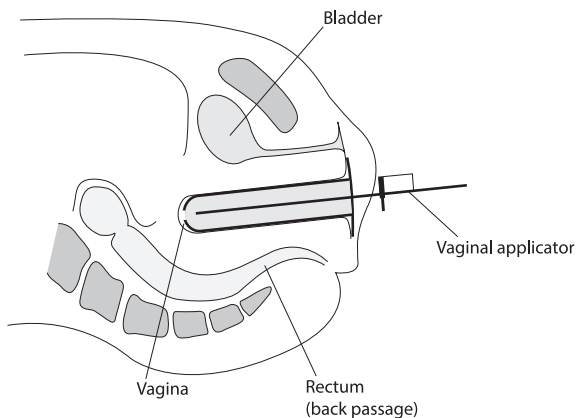
High Dose Rate (HDR) brachytherapy

HDR brachytherapy can be delivered as an outpatient treatment, on the BMRU (Brachytherapy and Molecular Radiotherapy Unit), department 16. It involves short visits usually taking between 20-30 minutes for the whole appointment.

It involves 2 to 4 visits to the hospital depending on what other treatment you may have had already. Once the applicator is inserted into your vagina, the staff leave the room to turn on the treatment but monitor you with a camera at all times. The treatment lasts approximately 5 minutes and should not be painful.

When the treatment is finished, one of the team will come and remove the applicator and you will be able to go home straight away. As this is a very localised treatment it will not stop you driving or going about your normal activities.

Brachytherapy applicator in place



Short-term side effects

As brachytherapy is a very localised way of giving radiotherapy, most patients have few or no side effects. However, side effects do occur in a small number of patients but these are generally mild. Short-term side effects generally happen 7 to 14 days after brachytherapy and last for a few days to a few weeks.



The time taken to recover does vary from patient to patient. If you have any questions about side effects, please ask any member of the team treating you.

Fatigue

A lot of patients report some tiredness in the first few weeks after treatment.

Bowel

Generally after brachytherapy most patients will not notice any change in their bowels and we suggest that you eat your normal diet. A small number of patients in the first few weeks do experience some mild pelvic discomfort and bowel changes. These are usually mild and only last a few days. For most, this results in their motions being slightly looser or more frequent for a couple of days, occasionally this can be diarrhoea.

If diarrhoea becomes a persistent problem, you may find it helpful to eat a lower fibre diet.

If you develop bowel side effects in the first few weeks following treatment and need further advice, please ring The Christie Hotline on **0161 446 3658**.

If you have followed a lower fibre diet and are still having problems with diarrhoea, we can prescribe medication such as Loperamide or Fybogel. In the small number of patients who get bowel symptoms following brachytherapy, it is usually very mild and lasts for a few days. However, bowel symptoms vary greatly between patients and very occasionally patients can find that it takes several weeks for their symptoms to settle and in rare cases they never return to what was normal for them.

Bladder

In a small number of cases, brachytherapy can irritate the bladder 1 to 3 weeks following treatment and give symptoms similar to cystitis such as increased frequency and burning or difficulty when passing urine. This is not usually due to an infection but the radiation. If this happens, we recommend that you take plenty of fluids, at least a litre a day preferably 2 to 3 litres. It is best to avoid drinking lots of tea and coffee and avoid all alcohol. Some people find a glass of cranberry juice a day helpful. Bladder and bowel problems, if they do occur, are usually quite mild and resolve within a few weeks.

Vaginal discharge or bleeding

You may find that you have a slight vaginal itching or discharge which can be pinkish. This is not unusual and may continue for a time after you get home. It is not likely, but if the discharge or bleeding alters in any way (for example, becomes heavier or smells unpleasant or if there is bright red heavy bleeding), phone The Christie Hotline **0161 446 3658** which is open 24 hours a day, 7 days a week for advice.

Why do side effects happen?

The side effects happen because, as well as destroying cancer cells, radiation can also damage healthy cells nearby. As the diagrams on page 5 show, the bladder and bowel are very close to the vagina, so they can be affected by the radiation too. When planning a patient's treatment, the doctors choose the dose that will give the best chance of destroying the cancer cells but with the least side effects.

It seems that some people are more sensitive to radiation than others, and are more likely to experience side effects. At present, it is not possible to identify these people before treatment starts.

Vaginal side effects

In the long-term, brachytherapy may cause vaginal side effects, such as narrowing (atrophy), shortening (stenosis) and dryness. Side effects vary greatly between individuals, some will get virtually no changes but in others it can make sex and examinations difficult. In most patients these side effects can be prevented or minimised by using vaginal dilation. Dilation means 'stretching and opening' and can be done by:

1. Use of a dilator/vibrator
2. Sexual intercourse
3. A combination of intercourse and dilator use.

Vaginal dilators are normally discussed, explained and given to you at your SWAN appointment, along with some lubricating gel. We recommend lubricants such as 'Sylk' and 'Yes WB' which are available on prescription and most GPs will prescribe. Additionally, some patients benefit from an oil based lubricant such as 'Yes OB', unfortunately these are not available on prescription but can be purchased directly from the company or from on-line retailers. We are aware that this is a personal area of care and some people may have reservations or strong feelings about using a dilator. Some people find using the dilators with a lubricant becomes more comfortable over time.

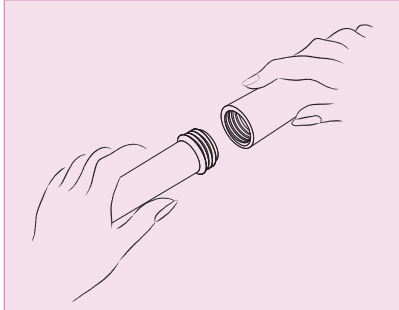
Vaginal dilation

How to use your dilator

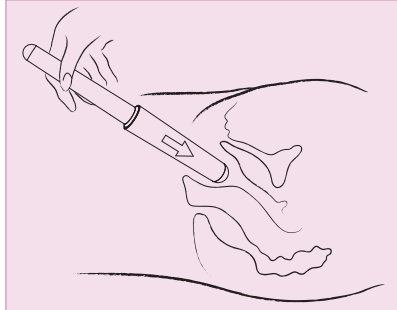
Start using your dilator 4 weeks after finishing your brachytherapy. Use it for 5 minutes a day, every day for the first 6 weeks.

Examine the dilator before each use to be sure that it is smooth. If there are cracks or rough edges, do not use it – phone the clinical nurse specialist and ask for a replacement.

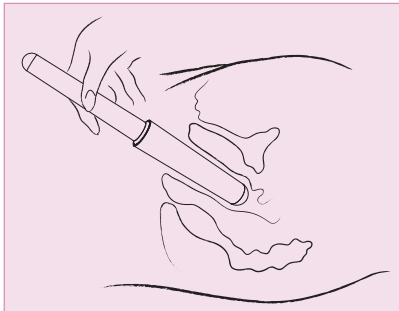
You should not feel any pain or discomfort if you are gentle and stay relaxed whilst using the dilator. Starting with the smallest size dilator, attach the size 1 (smallest) to the size 2 cone and apply some gel to the dilator and to the entrance of the vagina. Most people find it easier to use lying on their back in bed with knees bent and slightly apart.



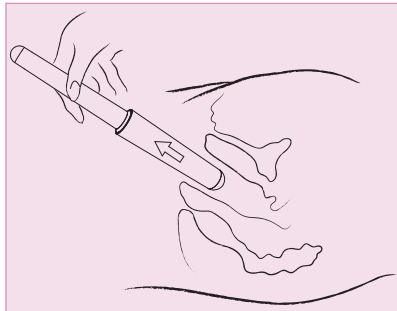
1. Connect size 1 (smallest) cone to the size 2 cone. Apply lubricating gel.



2. Get into a comfortable position, apply lubricating gel to the entrance of the vagina, and slowly insert dilator into the vagina as far as it will go.



3. Gently move the dilator from side to side, up and down and then circular movements for approximately **5 minutes** to gently open and stretch the vagina.



4. Remove the dilator, wash with soap and water and dry.

Insert the dilator into your vagina gently and as deeply as you can without discomfort but you should be able to feel it gently bounce off the top of the vagina when it reaches the end. Then gently move the dilator from side to side, up and down and then circular movements (see diagrams).

Also gently stretch the vagina upwards by gently pushing it upwards and letting the dilator bounce off the top of the vagina, this helps to keep the elasticity of this area which is particularly important if you are going to have intercourse in the future. Continue this for 5 minutes. Now take it out and clean it with hot soapy water, rinsing it well. If you are able to do this easily, then next time try using the next size dilator and progress up the sizes.

Do not be alarmed if a pinkish discharge or spotting occurs following dilator use, this is normal. Do not force the dilator if you are unable to insert it easily, leave it for a few days or contact the clinical nurse specialist (0161 446 3565). Most people should be able to progress to the second size dilator within a few days. If, after a week or two, this is easy and comfortable to use, then progress to the third and fourth size dilator. Remember it is important that you should use the dilator that reaches to the top of your vagina and that you use it regularly.

After you have used it for 6 weeks, even if you are not going to have intercourse or you are having it infrequently, we still recommend you to continue to use the dilator daily for another 4 weeks and then 2 to 3 times a week. After 6 months if you are having no problems and able to use it with ease, then reduce down to using it just once a week for the next 2-3 years. Some patients prefer to switch to using a vibrator. If you want more information about suitable products please ask a member of your treating team.

Sexual intercourse after treatment

Intimacy in relationships is important but we suggest that initially, following treatment, you avoid intercourse until you are comfortably able to use an appropriate size dilator. You may find your vagina drier than usual and you may need a lubricant. There are many lubricants that you can buy from the supermarket or chemist, for more details see previous information on page 14. If you want more information about lubricants ask a member of the team when you are seen in clinic or phone your clinical nurse specialist.

You may have some slight pinkish discharge or spotting following intercourse and may feel some slight discomfort. Do not be frightened by this. As the tissues begin to stretch, the bleeding and discomfort should subside. Some patients experience problems in resuming sexual intercourse after their cancer treatment. If this happens please contact your clinical nurse specialist or alternatively you can self-refer to the SWAN clinic by phoning (0161 446 3565).

Some patients find the booklet 'Loss of Libido after Cancer treatment' helpful and can be downloaded from www.engage.esgo.org/brochures

Longer-term side effects

Late side effects of brachytherapy are rare and unlikely to happen but your team will discuss them with you. These may occur months or years after treatment. They can include long-lasting bowel, vaginal and bladder problems, when you are treated with vaginal brachytherapy alone.

Your doctor/nurse will ask you to sign a consent form before treatment to say that you agree to the treatment and understand about the possible side effects.

Research at The Christie

The Christie, along with the Manchester Cancer Research Centre, is a major centre for cancer research of all kinds. Your doctor may discuss a particular trial with you in clinic, or staff may ask you if you are willing to help with some of the clinical trials and audits that are going on.

We would encourage you to ask about suitable trials at any time. We will give you detailed written information regarding the trial and its purposes. You will have time to consider your answer, discuss with family and friends and ask questions before you decide whether to take part or not. You are under no obligation to take part in any trials.

If you take part in a clinical trial, you will meet the research nurse or research radiographer who help to run the trials. You are free to withdraw from a trial at any time and for any reason. This will not affect your relationship with medical staff.

After the treatment

Follow-up after brachytherapy

Your first appointment will usually be by phone about 6 weeks after your treatment finishes. We will usually post this to you. The main aim of the appointment with the oncology team who carried out the appointment is to check that you have recovered from your treatment and that any side effects are settling.

Following this most patients will have the rest of their appointments organised by the gynaecologist at their local hospital.

Will I have a scan?

Most patients will be followed up with regular consultations and examinations. Following a hysterectomy, scans are not carried out routinely as the original cancer has been removed.

When will I know that the cancer is gone?

The highest chance of recurrence is in the first year following treatment. This is why patients may be seen more frequently in the first 2 years after treatment. For patients with the common types of cancer of the uterus, it is unusual for them to have further problems from their cancer if they are free of any problems at 5 years.

Do I need further smear tests?

We do not recommend that patients who have had a hysterectomy and brachytherapy have further smear tests taken from the vagina. These are not helpful because brachytherapy makes it very difficult to interpret the smear tests.

What symptoms should I report or be worried by?

If you have the following symptoms you should contact your gynaecologist, The Christie or your GP to ask for an earlier appointment:

- pain lasting for 2 to 3 weeks, particularly if it keeps you awake
- new swelling in one or both legs
- bleeding or discharge from the vagina or bowel, or from the bladder when passing urine
- a serious change in bladder or bowel habit – sudden unexplained weight loss.

Treatment effects

A few patients will develop symptoms that could be due to treatment effects. These can be similar to the symptoms caused by the tumour recurring or an entirely different condition. Tests will help us to identify the cause of these symptoms to suggest appropriate treatment. These effects may occur some time after treatment finishes, even after several years.

If you have further tests or surgery at another hospital, it is important that you tell your doctors that you have had brachytherapy treatment before.

After you have had treatment for cancer it can be a worrying time. Please remember that you will have the same aches and pains that you have always had. If you develop a new health problem, this may not be related to your cancer and its treatment.

Travel and holidays

Some people do not feel like travelling for the first few weeks after their treatment. Every person is different but it may take time after your cancer treatment before you feel like going on holiday. Once you feel like going on holiday there should be no problem travelling within the UK.

However, if you are thinking about going abroad, make sure you have adequate health insurance which includes your cancer diagnosis. This may mean that the cost of your insurance policy is higher than it has been previously.

Some people have found it useful to get a quote for their insurance before booking a holiday, as this could affect your choice of destination. More information about this and other things to consider are in the booklets 'Getting Travel Insurance' and 'Travel and Cancer' Macmillan Cancer Support, available from the cancer information centre.

Further information

Macmillan Cancer Support

This is a national charity which runs a cancer information service. The cancer support service freephone number is **0808 808 0000**. (Monday to Friday, 9am-8pm). If you are hard of hearing, use the textphone **0808 808 0121**. If you are a non-English speaker, interpreters are available. Information and advice about finance and benefits are also available.

Macmillan Cancer Support publish booklets which are free to patients, their families and carers. You can get a copy by ringing the freephone number. The information is on their website: www.macmillan.org.uk

Booklets include:

- Understanding radiotherapy and Understanding chemotherapy.

Booklets on living with cancer – some are listed below:

- Talking about your cancer
- Sex and relationships
- Talking to children and teenagers when an adult has cancer
- Cancer and complementary therapies
- Travel and cancer
- Pelvic radiotherapy late effects.

The cancer information centre at The Christie located near the Oak Road entrance (department 3) has the full range of booklets available free to patients and their relatives/carers.

Christie information

The Christie produces a range of patient information booklets. Some of these are listed below:

Where to get help: a guide to services

This discusses sources of help when you have cancer, where to go for financial help, and cancer support groups.

Be Active, Stay Active: a guide for exercising during and after treatment for cancer

A booklet with a simple exercise programme you can follow. There is also more information about coping with fatigue and the benefits of exercise.

Smoking cessation and alcohol advice services

This leaflet gives details of helpful services for people who wish to stop smoking. **07392 278 408** or **0161 956 1215**.

Booklets are free to patients coming to The Christie. If you would like a copy, please ask the ward staff. If you are an outpatient please ask your nurse, doctor or radiographer.

Student training

The Christie is a training hospital for postgraduate and undergraduate trainees so you may meet students in all areas of the hospital. We train doctors, nurses, radiographers and other therapists in the treatment and care of cancer patients. Placements at The Christie are an important part of student training, so by allowing them to assist in your care, you will be making a valuable contribution to student education.

Students are always supervised by fully qualified staff. However, you have the right to decide if students can take part in your care. If you prefer them not to, please tell the doctor, nurse, radiographer or other therapist in charge

as soon as possible. You have a right to do this and your treatment will not be affected in any way. We also try to respect the concerns of patients in relation to the gender of their doctor and other health professionals.

The Christie Hotline

The service is available 24 hours a day, 7 days a week. The Christie Hotline can provide help and support at every stage of treatment. All patients having radiotherapy can contact The Christie Hotline for support and advice for radiotherapy reactions.

Contacting The Christie Hotline

When you call The Christie Hotline you will hear a 'welcome' message. Listen carefully and follow the instructions. The team aim to answer your call within 4 minutes. All calls are recorded for training and monitoring purposes. When you speak to the Hotline team, remember to report any new or worsening conditions.

The Christie Hotline: 0161 446 3658

Benefits and financial information

You may have had to stop work and had a reduction in your income. You may be able to get benefits or other financial help.

Personal Independence Payment (PIP) is a social security benefit and has replaced Disability Living Allowance (DLA) for new claimants. It's for people who need help either because of their disability or their illness. You can apply if you are aged 16 or over and have not reached State Pension age. You can apply for DLA if you are under 16.

If you are State Pension age or older and need help with personal care or supervision, you could be entitled to Attendance Allowance.

Your carer could get Carer's Allowance if you have substantial caring needs.

Find out more:

- To get a claim pack for Attendance Allowance, call **0800 731 6055** and for PIP call **0800 917 2222**.
- Carer's Allowance: call **0800 731 0297**.
- For benefits advice, contact Maggie's centre on **0161 641 4848** or email **manchester@maggies.org**
The Christie at Oldham has a benefits advice session on Thursday afternoons, call **0161 918 7745**.
- Contact your local social services department for help with equipment and adaptations, or for an assessment of care needs. Visit **www.gov.uk** for further information.
- Macmillan Cancer Support can give advice on helping with the cost of cancer on **0808 808 0000** or **www.macmillan.org.uk**

Useful websites

More information about brachytherapy is available on The Christie website, as well as many of The Christie booklets and a list of UK help groups are available on The Christie website, the address is below. You can also access other patient information sites in the UK such as Macmillan Cancer Support and Cancerhelp UK via The Christie website.

- **www.macmillan.org.uk** or **www.gov.uk**
- The Christie website: **www.christie.nhs.uk**

Useful contacts

Via your consultant's secretary

Dr Haslett – **0161 446 3330**

Dr Barraclough – **0161 446 3406**

Dr Morrison – **0161 446 8278**

- Macmillan Gynae Specialist Nurse – **0161 446 3565** or
Cancer Care Coordinator – **0161 446 3565**
- Nurse Clinician – **0161 446 8101**
- Counsellor – ask your clinical nurse specialist for a referral
- Smoking cessation service on **0161 956 1215** or **07392 278 408**
- Theatre administrator on **0161 446 3520** for any questions about appointments or transport issues when coming for brachytherapy
- BMRU (Brachytherapy and Molecular Radiotherapy Unit) on **0161 918 2030**

Maggie's centres

Maggie's provides free practical, emotional and social support to people with cancer, their families and friends. Staff are on hand to offer the support you need to find your way through cancer, including information about treatment, financial advice, psychological support, relaxation and exercise classes and nutritional advice. Or simply to sit quietly with a cup of tea.

No appointment needed. Support is free.

Drop-in, Monday to Friday between 9.00am and 5.00pm.

Maggie's Manchester, The Robert Parfett Building,
15 Kinnaird Road, M20 4QL

Maggie's is the pavilion style building at the bottom of
Kinnaird Road. Cross Wilmslow Road, turn left and then
right onto Kinnaird Road.

Email: manchester@maggies.org

Tel: **0161 641 4848**

maggies.org

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

The Christie is committed to producing high quality, evidence based information for patients. Our patient information adheres to the principles and quality statements of the Information Standard.

If you would like to have details about the sources used please contact the-christie.patient.information@nhs.net

Contact The Christie Hotline for
urgent support and specialist advice

The Christie Hotline: 0161 446 3658

Open 24 hours a day, 7 days a week

Visit the Cancer Information Centre

The Christie at Withington **0161 446 8100**

The Christie at Oldham **0161 918 7745**

The Christie at Salford **0161 918 7804**

The Christie at Macclesfield **0161 956 1704**

Open Monday to Friday, 10am – 4pm.

Opening times can vary, please ring to check
before making a special journey.

The Christie NHS Foundation Trust

Wilmslow Road

Manchester M20 4BX

0161 446 3000

www.christie.nhs.uk



The Christie Patient Information Service
December 2022 – Review December 2025

CHR/XRT/1081/30.03.2015 Version 3