



Abdomen Treatment Information Booklet

Radiation Oncology

For all enquiries phone: (08) 6383 3000



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Introduction

Radiation therapy is often given to patients with cancers that arise in the abdominal region. It may be given on its own or in conjunction with other types of treatment such as surgery or chemotherapy.

Treatment involves a series of outpatient treatments given up to 5 days a week over several weeks. It is painless and although the appointment times may be 10 to 20 minutes in duration, the treatment itself only takes a few minutes.

The treatment varies from patient to patient and invariably causes some reactions within the body's normal tissues. Your radiation oncologist, a specialist doctor who uses radiation therapy in the treatment of cancer patients, will explain these to you in more detail as they are specific to the area receiving treatment.

This booklet will discuss common side effects and suggest ways to minimise them. If required, your doctor will prescribe medications to soothe reactions that may take place.



Possible reactions

When radiation therapy is delivered, the treatment has to pass through normal structures to reach the treatment area. As a result, reactions in normal tissues within the treatment area can be expected to occur to some degree. Individual patients will have different reactions depending on the site to be treated, the dose given, the number of treatments and their overall health. Reactions may also be influenced to a greater extent by other forms of treatment given, e.g. reactions are likely to be greater if chemotherapy is given at the same time as radiation therapy.

Usually reactions would not be expected until the second or third week of treatment. They are then likely to persist throughout the treatment and subside a couple of weeks after treatment is completed.

You will have regular reviews during the course of your treatment; these appointment times will be included in your treatment schedule. In between the review appointments you are encouraged to mention any treatment related issues that you have with the radiation therapists or nursing staff, who will be able to offer advice or refer you to the appropriate person/area.

Common side-effects include:

1. Loss of appetite and maintaining weight



3. Diarrhoea



2. Nausea and/or vomiting



4. Skin reactions



5. Fatigue





1. Loss of appetite and maintaining weight

Loss of appetite is a common side-effect of cancer and its treatment. You may eat less because you do not feel hungry, food may taste different or you may feel nauseated. It is very important to maintain an adequate intake of food to help minimise weight loss.

Some suggestions to maintain an adequate intake of food are:

- Avoid skipping meals an empty stomach can make you feel worse
- Eat small, frequent meals and snacks throughout the day and try eating every 2 to 3hours
- Choose foods and drinks which are high in energy and protein (ask your nurse or dietitian for a list of suggestions)
- Clean your teeth, or rinse your mouth, before and after eating
- Gentle exercise can stimulate your appetite
- Modify the texture of your diet as required.

Keeping your weight stable and your energy levels up is important for both your health and your treatment. Significant weight loss can delay your treatments as the treatment plan is specific to your shape and size.



2. Nausea and/or vomiting

The intensity and frequency of these symptoms are variable and dependent on the area irradiated, size of area, the dose and the number of treatments given. It is important to let your radiation therapist, nurse or doctor know if you are experiencing any nausea or

vomiting so preventative medication can be prescribed.

This may be in the form of an anti-sickness tablet (anti-emetic) to be taken prior to treatment. Take any prescribed anti-nausea medication as directed by your doctor, do not wait for the nausea to occur before taking it. There are different forms of anti-sickness medication available and their effectiveness varies from person to person. If your anti-sickness medication does not appear to be working, inform the medical staff so an alternative can be recommended.

The following may help to reduce nausea:

- Eat and drink slowly
- If the smell of food triggers nausea, try cooking in a microwave to reduce odours
- Snack on dry foods
- Avoid very sweet, fatty, greasy, rich and spicy foods
- Try "cold" foods or clear liquids
- Drink plenty of fluids in between meals.

If you experience **nausea and/or vomiting** please let your radiation therapist, nurse or doctor know so medication can be recommended or prescribed. If it is after hours and vomiting is severe, please see your GP or go to the Emergency Department.

3. Diarrhoea

Loose motions and diarrhoea may be due to many factors including anxiety, infection, change in diet, medications or radiation therapy to the abdomen area. This is most likely to occur two to three weeks after the initiation of treatment and should settle a couple of

weeks after the treatment has finished.

Whatever the cause, a temporary change of diet often helps. Follow the general advice below and make sure you drink plenty of fluids. Diarrhoea should be reported to the radiation therapists, nurses or your doctor as medication can be prescribed.

General advice for diarrhoea:

- Remain hydrated drink 1 to 2 litres of clear liquids throughout the day
- Stick to easily digested foods such as:
 - bananas
 - boiled potatoes
 - rice or pasta
 - white bread
- Avoid foods such as:
 - Fatty, fried or spicy foods
 - Milk and dairy products
 - Drinks with caffeine or alcohol

- Try eating 5 to 6 small meals instead of 3 larger ones
 - steamed chicken
 - white fish
 - eggs
 - ielly.
 - Raw fruit & vegetables
 - Nuts, legumes and cereals.

Once your bowels return to normal it is important that you resume a balanced diet which includes fresh fruits, vegetables and wholegrain cereals. If the diarrhoea does not improve and continues to worsen, there is a risk of becoming dehydrated. Please inform a member of staff if you are worried. If it is out of hours please make a GP appointment or go to an Emergency department.



4. Skin Reactions

Some degree of reddening (erythema) usually develops in the treated area approximately 10 to 14 days after the first treatment. Reactions are generally mild and present like sunburn, which can be relieved by a soothing cream. There may be some mild darkening in pigmentation of the skin. Your radiation therapist can explain where the reactions are likely to occur.

The following suggestions may help minimise reactions:

- Gently wash skin in the treatment area with lukewarm water and a non-perfumed gentle soap such as 'Simple' Soap, 'Unscented Dove' or a non-soap wash such as 'QV wash'
- Gently pat the skin dry using a soft towel do not rub
- When you commence treatment start moisturising with the Sorbolene (or similar) cream provided. Apply the cream twice a day to the entire treatment area and gently massage into the skin until it is absorbed. If you have not been given this cream, please ask the radiation therapists or nursing staff. Alternative soothing creams will be provided if the area becomes itchy or sore.
- ▶ Wear loose fitting clothes. Tight clothing can irritate the affected areas
- Avoid exposure of the affected area to direct sunlight
- When swimming outdoors always cover the treatment area with a cotton T-shirt or rashie. Swimming in chlorinated pools may worsen the skin reaction. If you do wish to swim in a chlorinated pool, it is advisable to shower and change into dry clothes as soon as possible after your swim.

You will have regular skin checks during your treatment, however, please report to a nurse, radiation therapist or radiation oncologist if you experience itching, irritation or blistering so that extra care and advice can be given.

Your skin will be more susceptible to sun damage after radiotherapy. Shading from direct sunlight by clothing is recommended for a period of 18 months to 2 years after treatment. A maximum sun block lotion (at least SPF 30) is recommended and care to avoid burning should always be exercised

5. Fatigue

Fatigue associated with treatment can occur at any time during the treatment, but in general usually develops as the course of radiation therapy progresses. There can be many causes, but the main one is your body requires extra energy to heal healthy cells.

Daily travelling, working and running a household can also contribute to this tiredness.

You may find that you generally slow down and don't have as much energy. This tiredness may be worse if you are also having chemotherapy. Ensure you have adequate sleep, make sure you allow time to rest and drink plenty of fluids. Mild forms of exercise, such as walking, can be beneficial especially if you make it social by involving friends or family. There are exercise programs that are evidenced to benefit patients with fatigue. Please ask the staff for further information.

This tiredness may continue for a period of time after you have finished your course of radiation therapy, but this is normal.

Emotional wellbeing

It is completely normal for you to feel emotional for some time after the diagnosis of cancer. Sleeping, eating and mood disturbances are all quite common under these circumstances.

You can try spending time with those people that make you feel good, relax and do things you enjoy. Try to exercise regularly and say no to those activities you don't feel like doing.

You should tell the radiation therapists or nursing team if you feel you are having difficulty coping with your diagnosis, treatment, domestic and travel arrangements or finances. They will organise for you to see trained professionals as needed.

Pregnancy and fertility

For women, it is strongly recommended that you use a reliable form of birth control during and shortly after treatment. Pregnancy and radiation therapy can be harmful to the unborn baby. Please inform a staff member immediately if you suspect that you may be pregnant.

Radiation therapy to the abdomen can cause temporary or permanent fertility problems. It is important for you to discuss your future plan with your doctor prior to starting your treatment.

For men if you are sexually active and your female partner is fertile, please continue to use a reliable form of contraception while undergoing treatment.

Chemotherapy

Chemotherapy can be recommended in addition to surgery and radiation therapy. Specific reactions can occur in relation to the use of chemotherapy and as they will vary for each individual, your doctor will discuss these in detail with you.

If there is any change to your chemotherapy schedule it is important that you make the staff in Radiation Oncology aware of this immediately.

Follow up

When radiation therapy is completed your doctor will organise a follow-up appointment. If you experience any problems related to your treatment after completion and before your follow-up appointment, please contact the department by phoning (08) 6383 3000, Monday to Friday from 8:00am to 4:00pm.

This booklet discusses common problems or reactions that may occur when having radiation therapy to the abdominal area. Not all of the reactions described will occur, however every attempt will be made to reduce or relieve any reactions.

For further clarification or information on treatment side effects outlined in this

Booklet, please feel free to ask any of the radiation therapists, nurses or your doctor.



Further support and health information:

Look Good Feel Better

Free call: 1800 650 960 Website: www.lgfb.org.au

'Look Good, Feel Better' is a free workshop run by professionals from the cosmetics industry for women. The practical workshop covers skincare, make-up and headwear demonstrations and participants receive a complimentary Confidence Kit full of skincare and makeup products. Experienced volunteers from the beauty industry help show how to manage the changes that may occur to the skin, hair and general appearance as a result of treatment.

Workshops are run frequently in the Radiation Oncology Department. Please speak to the radiation therapists or nursing staff if you are interested in attending.

WA Psycho-Oncology Service

Telephone: 08 6457 1177

Email: wapos@health.wa.gov.au

This service is available to adult Western Australians diagnosed with cancer. Clinical psychologists apply psychological theory and evidenced-based assessment and treatment strategies to help people address their needs and meet their goals. You may self-refer or ask a health professional to refer you.

The Cancer Council

Telephone: 131120

Website: www.cancerwa.asn.au/patients

The charity works across every area of every cancer, from research to prevention and support. Assisting people form the point of diagnosis though to their treatment and beyond.

Health Direct

Telephone: 1800 022 222

Website: www.healthdirect.gov.au

General guidance for patients: symptoms, diagnosis, treatment options and available

services. 24-hour health advice.

Solaris Cancer Care

Telephone: 08 6383 3475

Website: https://solariscancercare.org.au/ SCGH DD block, Ground floor Hospital

Avenue, Nedlands

Solaris Cancer Care provides up-to-date, practical, evidence informed information on complementary integrative approaches to cancer management, disease prevention, health and wellbeing activities and support services that are designed to help people feel and cope better with their cancer and treatment.

Cancer Australia

Telephone: 1800 624 973

Website: www.canceraustralia.gov.au

Established by the Australian Government to benefit Australians affected by cancer.

References

- https://www.eviq.org.au/clinical-resources/side-effect-and-toxicitymanagement/gastrointestinal/426-management-of-radiationinduced-nausea-and-vom#patient-education
- https://www.eviq.org.au/side-effects-documents/1793fatigue#patient-education
- 3. https://www.eviq.org.au/patients-and-carers/patient-information-sheets/3097-diarrhoea-during-cancer-treatment
- https://www.eviq.org.au/patients-and-carers/patient-informationsheets/3100-nausea-and-vomiting-during-cancer-treatment
- https://www.eviq.org.au/patients-and-carers/radiotherapy-patientinformation-sheets/3101-skin-changes-and-skin-care-duringradiotherap