Skin reactions

The skin in 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 won't happen straight away but tend to develop gradually throughout treatment and usually starts to settle 2-4 weeks after treatment finishes.



gradually become pinker or darker



feel dry or tight, and sore



develop a rash and feel itchy



blister or peel

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.



you may

go swimming if your skin is NOT blistered or peeling

It is best to shower immediately afterwards to wash off the chlorine and then apply moisturiser. Please stop swimming if it irritates your skin



you may

find it more comfortable to wear loose-fitting clothing



please avoid

sun exposure and protect the area from direct sunlight

Hygiene and moisturising

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



washing and bathing

Make sure the water is not too hot; wash the skin gently with products you would normally use and gently pat dry

'DON'Ts' for the treatment area

Please avoid...



rubbing the area



using sticky tape



shaving



using wax, cream or lasers

Note: you would have been asked to shave for your CT appointment, however you do not need to shave during your treatment.

Poforonco

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, urogenital, prostate, ID: 3370 v.2, last reviewed 15 July 2019, eviQ.
Cancer Treatments Online, Cancer Institute NSW https://www.eviq.org.au/radiationoncology/urogenital/prostate/3370-prostate-adenocarcinoma-definitive-ebrt-hypof##side-effects



Radiation therapy side effects: Prostate 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.

Haere Mai Welcome | Manaaki Respect
Tühono Together | Angamua Aim High



Most common side effects

- Fatigue
- · Proctitis rectal changes
- Cystitis bladder changes
- · Skin reactions
- Pain and swelling. Some swelling can occur in the treatment area causing discomfort or pain. Take pain relief such as paracetamol as required. Discuss with your treatment team if the pain continues while taking paracetamol.
- Incontinence (rare).

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.

Before starting treatment, you will have received the information about your daily bowel and bladder preparation. This is important for the accuracy of your treatment but also to minimise these possible side effects.

Contacts

Regional Blood and Cancer Service

Building 8, Level 4, Auckland City Hospital

Auckland DHB

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/work outside your treatment
- · Financial concerns.

Suggestions:

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

Proctitis – rectal changes

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

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

Please advise your treatment team if experiencing these side effects.

What can I do?

- Diet changes low fibre diet. Ask the team for more information on this.
- Try small frequent meals instead of 3 big meals.
- Ensure you drink plenty of fluids (unless on fluid restrictions)
- Anti-diarrhoels (reduce/stop diarrhoea)
- Regular pain medication
- Antispasmodics.



Cystitis - 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.

