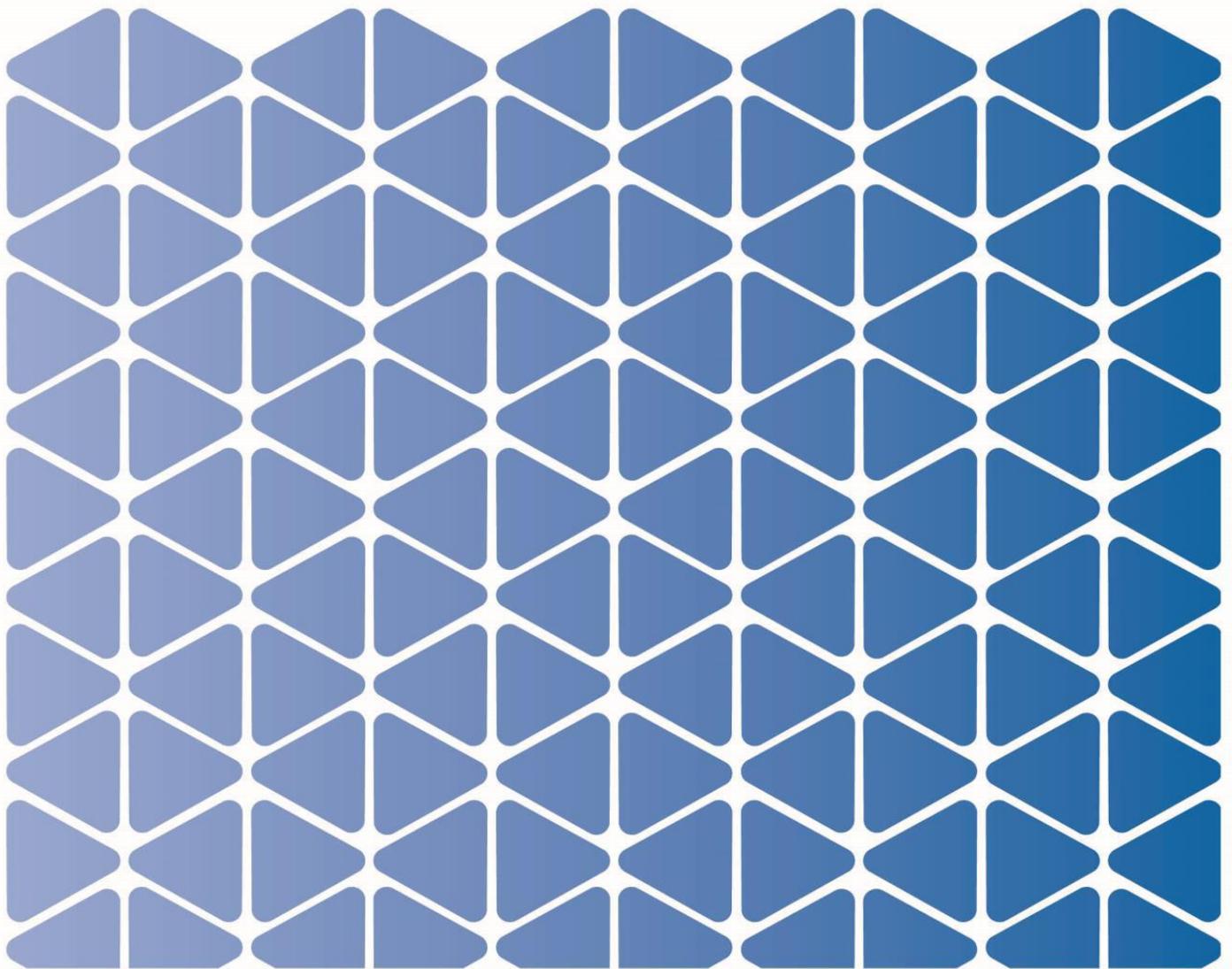




PATIENT INFORMATION

**RADIOTHERAPY TO THE  
OESOPHAGUS**





## Worcestershire Oncology Centre

Improving cancer services in Worcestershire

### Introduction

This leaflet will explain possible side effects which may develop when receiving radiotherapy to your oesophagus.

These effects are individual and will depend on the dose of radiotherapy you receive and the length of your treatment. Everyone reacts to radiotherapy differently and some people have minimal side effects. Acute (early) side effects may start at varying times during treatment and disappear in the weeks after treatment finishes. Late side effects may not occur for months or years after the treatment has finished.

The radiographers will explain your possible side effects in more detail and answer any questions you may have before you start treatment.

You may also be having chemotherapy treatment at the same time as your radiotherapy. **You will be given specific written information and consented separately for this.**

### Acute (early) side effects

*These can occur whilst you are undergoing radiotherapy and in the weeks immediately afterwards. They tend to be cumulative so may not occur in the first week.*

#### **Nausea** (feeling sick):

- If you start to feel sick during your treatment please let the radiographers know as they can get some anti-sickness (anti emetics) medications for you. If the nausea persists or you are actually vomiting then we will get you seen by a doctor who will be able to give you an alternative medicine.

#### **Loss of appetite:**

- Radiotherapy treatment can change your sense of taste and this can lead to loss of appetite which can result in weight loss. Eating little and often can help. Try to choose foods that you fancy and that have high calorie content so for example use full fat cream and yoghurts rather than low fat ones. If you are concerned about your diet we can arrange for you to see a dietitian for advice and it is also possible to get food supplements through your GP.

## **Soreness and difficulty when swallowing (Dysphagia):**

- You may already be experiencing difficulty in eating and drinking before starting your radiotherapy treatment. This may continue and get worse throughout treatment and will not improve until a few weeks after treatment finishes.
- You may find your gullet becomes sore. If this happens you may find softer foods are easier to eat such as scrambled eggs, soups and stews. The radiographers will be able to advise you on the best foods to eat. You may find it useful to avoid hot or spicy foods and alcohol (particularly spirits).
- Regular pain medication can help. Your radiographers can give you medicine called Antacid and Oxycetacaine. This medicine contains a mild anaesthetic which can coat the gullet and needs to be taken 20 minutes prior to eating.

## **Dry Cough**

- If parts of your lungs are in the treatment area, you may develop a dry tickly cough. This can be eased by sipping water or other drinks and it should settle within a few weeks of completing treatment. Your oncologist should let you know if this is likely to happen.

## **Fatigue**

- Most patients having radiotherapy feel more tired, particularly towards the end of treatment. If you feel tired you may need extra rest. However, evidence suggests that gentle exercise such as a short walk can also help.

## **Effects on the Skin**

- These are usually minimal for this type of treatment; however, you may find the skin in the treatment area can become red and/or dry and itchy towards the end of the treatment and for a couple of weeks after. The radiographers will be able to give you further information if you have any concerns.

## **Hair loss**

- Men may lose chest hair in the area being treated. This hair loss can be temporary however in some cases this may be permanent. Your consultant or a member of the team will be able to discuss this with you.

The treatment does **not** make you radioactive. Once the machine has been switched off there is no radiation present. You will not be radioactive and are safe to be near pregnant women and children.

## **Late Side Effects**

*These can occur from months to years after you have completed your treatment.*

- **Narrowing of your food pipe (oesophagus):** Narrowing of the food pipe is called a stricture, and this may remain narrow or become narrow some time after radiotherapy treatment is completed. If you continue to have difficulties swallowing for more than 2 months post treatment you may need further investigations. The stricture can usually be relieved by a small operation to stretch the narrowing and allow food to pass through more easily.
- **Scarring of the lung:** Radiotherapy may leave some scarring on the lung, which may cause shortness of breath or inflammation. This can occur two to three months after treatment. It may be possible to use medication or learn breathing exercises to help reduce this.
- **Heart damage:** Occasionally, radiotherapy to the chest can cause tightening of the covering of the heart (the pericardium). The tightening may need surgery to reduce it. Again your consultant will discuss this if it is relevant to you.

### **After treatment:**

The side effects of the treatment will start to ease off usually within one to two weeks of the treatment finishing. The full benefit of the treatment is not usually reached until some weeks after the last treatment session.

If you develop new symptoms after your treatment is over, or you are concerned that the immediate side effects are not clearing up, you can contact the Macmillan radiotherapy specialist radiographer on 01905 761420 or The Acute Oncology Service 01905 760158

There is often a simple explanation for these symptoms and they do not necessarily mean you will develop the late effects of treatment.

**If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.**

### **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

### **Feedback**

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

### **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

### **How to contact PALS:**

**Telephone Patient Services: 0300 123 1732 or via email at: [wah-tr.PET@nhs.net](mailto:wah-tr.PET@nhs.net)**

### **Opening times:**

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.