

Three large, overlapping teal arcs on the left side of the page, resembling a stylized 'C' or a series of concentric curves.

Radiotherapy to the bladder

A horizontal teal bar with a white border on the right side.

Radiotherapy

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If you have any general enquiries prior to starting your treatment, please contact the Information & Support Radiographer, Clatterbridge Cancer Centre - Wirral, Monday to Friday during office hours (9am-5pm) on **0151 556 5314**.

The Clatterbridge Cancer Centre Hotline 0800 169 5555

If you are unwell during or up to 8 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.



This information is for patients who are going to receive radiotherapy to the bladder. It will explain what to expect when you attend for planning and treatment and details the services that are available to you at The Clatterbridge Cancer Centre.



A photograph of a treatment unit

When Radiotherapy is used

Radiotherapy is used:

- As an alternative to surgery
- In combination with chemotherapy
- In advanced disease to control symptoms, e.g. when passing a large amount of blood

Your doctor will explain why they have recommended radiotherapy for you, and what you can expect.

Please refer to our booklet called "Radiotherapy" for more information on what to expect when you attend the hospital.

Chemotherapy can be used at the same time as radiotherapy in the treatment of bladder cancer. If this applies to you, it will be discussed in detail.

Clinical Nurse Specialist (CNS) Service

A Clinical Nurse Specialist (CNS) is available to all patients (and/or carers) who have a diagnosis of bladder cancer. They provide a link between medical, nursing, radiotherapy and other members of the multi-professional team. Their aim is to assist with the continuity of care for patients who are receiving radiotherapy as an outpatient and for those who are not already linked with a Urology Nurse. Please talk to your radiographer if you feel this service would be useful for you.



Preparation for planning and treatment

When you attend Clatterbridge Cancer Centre - Wirral for your planning CT scan appointment, we will ask you to visit the toilet to empty your bladder. Please do so using your normal amount of force and time. Do not strain to empty every last drop of fluid. Treating the bladder when 'empty' allows the use of smaller treatment fields. We will also ask you to use a small enema to empty your rectum (back passage). This will be repeated at every treatment appointment. By emptying your bladder and rectum each time you attend for treatment, we can be sure these organs are in the same position for every treatment, making it more effective. However, it is important to eat and drink normally before you attend.

General information about the side effects of radiotherapy treatment

Every patient is different and you may not have the same side effects as someone else. Your doctor will talk to you about the side effects that are likely to affect you. Most are temporary, but some may last for weeks or months after your treatment has finished (see possible long term side effects). Long term or permanent effects can occur, but are fairly rare. Often, these effects can be easily managed and may not have a marked effect on your life.

During your treatment, a radiographer or nurse will be able to answer any questions and deal with most of your problems. However, your doctor can also see you if necessary. As you go

through your treatment, how you feel and your ability to cope may change. It is important to let staff know how you feel, so that we can give additional information, support, and medicines etc.

Treatment is usually given on an outpatient basis, but for some it may be necessary to come into our hospital ward to help you cope with your side effects, though this is rare.

Side effects during and immediately after treatment

You will be reviewed during your treatment and given advice and medicines, if necessary, to help you cope. It is important to let us know when your side effects start.

The usual pattern for the development of the short-term (acute) side effects is to gradually start about 5-10 days after the first treatment. They usually persist and worsen, the effects being most troublesome about 10 days after the last radiotherapy treatment. After this, the healing process begins.

The side effects usually settle over the following 2-3 weeks, but sometimes effects may persist for months.



Your bladder

The treatment will irritate your bladder. You will probably feel the need to pass urine more often and you may feel a burning sensation. You may also notice a slowing of the stream of urine and feel an urgent need to pass urine. You may also notice blood and debris in your urine; do not worry, this is quite normal. In most cases, it will settle within a month of finishing your treatment.

You can help yourself by:

- Drinking more fluid; about 3 pints of fluid each day until the symptoms settle. Avoid large quantities of caffeine (tea, coffee, energy and cola-type drinks)
- If you wish, you may take alcohol in moderation, but stop if it causes irritation in your bladder
- Letting us know if you develop a burning sensation when you pass urine; if this sensation is severe, you may have an infection. If so, we will give you antibiotics and your treatment will carry on

Unable to empty your bladder during and shortly after the course of radiotherapy?

This happens rarely. The urethra is a tube which connects the bladder to the outside of body. Inflammation can cause it to be squeezed, making it difficult or impossible to pass urine. If you can't pass urine at all, contact us immediately on The Clatterbridge Cancer Centre Hotline help line **(24 hours)** on **0800 169 5555** as not being able to pass urine can make you very unwell. You may need a catheter for a short time.

Your bowels

The treatment is likely to irritate your bowels. This symptom is more likely if you are having the whole pelvis treated.

You may have to open your bowels more often or occasionally they become stubborn. If your bowel habits change, advice on changing your diet may be appropriate as many people find this helpful. Meanwhile, carry on with your normal diet. A dietitian is available for you to talk to about your diet and we will arrange an appointment, if required.

You may also feel the urge to open your bowels, passing only small amounts or just mucus and wind. You may have discomfort and you may pass some blood.

You can help yourself by:

- Letting staff know about any symptoms, so that they can give you advice and/or medicines
- Eating a good balanced diet
- Washing the area around your anus (opening of the bowel on the skin) gently and applying a cream as recommended by your radiographer, nurse or doctor, to soothe and moisturise, if necessary

Pain & discomfort

Radiotherapy can cause pain or discomfort. This can be relieved by using painkillers and other medication, as required. It is important to treat this so that you can continue, if possible, with your normal activities.



Tiredness

It is quite common to feel more tired than usual for several weeks after your treatment has finished. It is important to rest when you feel the need to do so. Accept any offers of help. If you live alone, do only the things that are essential. After finishing your treatment, contact your GP (or District Nurse if you have one) if you feel that this is causing you difficulties, especially if it is affecting your eating and drinking. Gradually, you will get back to normal activities.

Your pelvic skin and pubic hair

Your skin is unlikely to be severely affected; it may become slightly red, dry and itchy. We can give you creams to soothe the skin.

You can help yourself by:

- Wearing loose fitting clothes made from natural fibres, such as cotton, to allow the air to circulate around the treatment area
- Washing the area very gently in lukewarm water with a mild, unperfumed soap, e.g. baby soap. A shower is ideal, patting the area dry with a soft towel. Do not rub
- Only applying creams recommended by your radiographer, nurse or doctor

Temporary thinning or loss of pelvic hair can occur. The loss of pubic hair is most likely to be noticed.

Sexual activity, Contraception and Fertility

If you are sexually active, you can continue to be so while you are having radiotherapy. However, the side effects of radiotherapy can cause temporary discomfort in the pelvic area. You may find that intercourse is uncomfortable or you have no desire for sex. If so, try to talk to your partner and explain how you feel.

If you are sexually active and conception is a possibility, it is important to use contraception while you are having radiotherapy. After completion of radiotherapy, men and women should use effective contraceptive precautions for at least one year. Women should avoid getting pregnant while receiving radiotherapy, as radiation is harmful to the unborn child. (See possible long-term side effects).

Radiotherapy to the pelvic area is known to affect fertility. Retaining your fertility after completion of radiotherapy may or may not be important to you. If required, you will be referred to a local specialist centre for further advice and information. Ideally, it is important to be referred before starting your radiotherapy.

Possible long-term or permanent side effects of radiotherapy (3 months after finishing treatment)

Radiotherapy can cause long-term changes to the normal tissues in your pelvis. These effects may appear months or years after treatment and often respond to simple treatments. Many people do not develop long-term side effects.



If you develop any health problems that you suspect may be related to your radiotherapy, you should discuss this with your GP. If necessary, your GP can arrange for further investigation and/or an appointment with your oncology doctor.

Your bladder is likely to be a bit smaller after treatment, so you may need to empty your bladder more often. You may see some blood in your urine; this should be reported to your GP. A few people have ongoing problems with blood in the urine. This is rare, but usually responds to further interventions arranged via an Urologist. Occasionally, surgery may be required.

Following treatment, some incontinence may occur. For many this is temporary and settles over 3-6 months. Should this be an ongoing problem, you can be referred to a continence team via your oncology doctors or GP. Further information about incontinence and products are listed in the references section.

There is a small long-term risk of damage to your bowel; either some bleeding from the rectum (again, should this occur see your GP) or the need to open your bowels more urgently and/or frequently. This can often be relieved by using medicines and adjusting your diet. Referral to a dietician and other specialist teams can be helpful, especially if you have problems maintaining your weight. Very rarely, you may need surgery.

In men, impotence (inability to achieve an erection) and loss of libido (sex drive) may occur. It is rare and usually develops slowly

over time. If impotence affects you, please see your GP to discuss any possible treatments or referral to specialist services.

In pre-menopausal women, bladder radiotherapy is likely to cause permanent infertility and may bring on an early menopause. In this case, the symptoms may develop soon after completion of treatment. If the symptoms of the menopause affect you, discuss this with your GP.

Follow-up and recovery

As you complete your course of radiotherapy, your care needs will be assessed. If you develop any new nursing needs, we will make arrangements for a District Nurse to visit you. An appointment with a doctor from the oncology team will be made for the majority of patients within the first few months after completion of radiotherapy. This appointment is usually at your local hospital.

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. If you are able, talking to staff about how you feel can be a great help. 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



Oncologist at your follow-up appointments. Referrals to specialist staff, e.g. a psychologist or sexual health advisor, alone, or with your partner, can be beneficial.

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 0000** or by visiting a Macmillan Information Centre (sited in the main entrances of Clatterbridge Cancer Centres - Wirral and Aintree).

If you are feeling low or experience mood swings, it may be useful to talk about how you feel and your recent experiences. Some find it useful to have the support of others who have experience of cancer by attending a local support group. Contact the Macmillan Information & Support Centre for more details.

Alternatively, if you are familiar with using the internet, the major cancer charity websites have online communities.

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.

Are you a smoker?

Smoking is a major cause of bladder cancer. If you are a smoker, we strongly advise you to quit. Help and support to do so is available, free of charge from The Clatterbridge Cancer Centre staff or your GP.

Useful information and websites

The Clatterbridge Cancer Centre

www.clatterbridgecc.nhs.uk

Macmillan Cancer Support

www.macmillan.org.uk

telephone 0808 808 0000

Macmillan Cancer Information and Support at:

Clatterbridge Cancer Centre – Wirral 0151 556 5570

Clatterbridge Cancer Centre – Aintree 0151 556 5959

Smokefree.nhs.uk or 0800 022 4332

Continence products

Age UK (Was Age Concern)

www.ageUK.org.uk or tel. 0800 169 6565

Bladder and Bowel Foundation

www.bladderandbowelfoundation.org or tel. 01536 533255



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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