



## **IMPORTANT INFORMATION AND INSTRUCTIONS FOR PATIENTS RECEIVING RADIATION THERAPY TO THE SKIN**

Your doctors have recommended radiation treatments to your skin. The number and exact location of these treatments will be determined by your radiation oncologist. This hand out will acquaint you with some of the side effects associated with treatment to the skin. Normal tissues included in your treatment fields may be affected by the radiation and therefore undergo some temporary or permanent changes. Some of the information that follows describes how to manage and cope with many side effects that may occur.

The chance that radiation therapy will be effective in treating your tumor depends on a number of factors. Probably the most important two factors are the kind of tumor that you have and the stage, or amount, of disease. As with any type of medical treatment, radiation therapy does not always work and there is a chance that these treatments may not help you. Your doctor will discuss these possibilities with you, but, if you have further questions do not hesitate to ask your doctors or nurses.

Again, side effects listed below do not occur in all patients. They are changes that MIGHT happen during radiation therapy and may range from mild to severe. Because each case is unique, there may be some additional short and long-term side effects that your doctor will discuss with you. Whenever you have questions or concerns, please bring them up to your physician, radiation therapist or nurse.

### **SKIN CHANGES**

**□ Explanation:** The skin over your treatment field may become reddened, itchy or tender after several weeks of treatment. At the end of treatment, your skin may appear tanned and there could be some peeling. The area may feel firmer or fuller than surrounding skin due to temporary fluid accumulation. This fluid accumulation will most likely resolve without any treatment after a few months. Over time, the tissues under the skin may become more firm (fibrosis).

The skin in the involved area will be more sensitive to sun exposure.

**© Solutions/Resources:** Avoid lotions or creams to the skin over the treatment field unless approved by the staff.  
The nurse may give samples or suggest preparations you can use.

Currently, we are recommending AQUAPHOR ointment. You may also use 100% aloe vera gel.

Use mild soaps (e.g., Eucerin, Liquid Olay soap, or Dove) if any. Wash gently and pat dry.

DO NOT remove marks made on your body by the physician or radiation therapist unless specifically told to do so.

Always protect against sunburn. Use products with at least a SPF of 15, or greater.

Small, blue tattoos (the size of a freckle) will be placed to locate your treatment area once your treatments are underway. These tattoos are small permanent records on your skin as to where you received radiation treatments.

Do not shave in the treated areas, unless you use an electric razor.

Do not use hot water bottles or heating pads in the treated area.

Do not wear tight fitting apparel that may rub or irritate the treated area.

## HAIR LOSS

Explanation: Hair loss related to your radiation treatments occurs only in the areas within the treatment fields. For radiation to the skin, this can be hair anywhere on your body that over lies the skin being treated. Hair loss generally begins 2 to 3 weeks into your treatment course and re-growth usually begins 3 to 6 months following the completion of your radiation treatments. Occasionally, the hair does not grow back.

## LONG TERM SIDE EFFECTS/PERMANENT COMPLICATIONS

Explanation: Any type of cancer treatment can result in complications that occur weeks, months or years following completion of treatment. Generally, late complications occur in less than 10% of patients receiving standard treatments.

As with most short term side effects, many long term effects affect body structures included in or adjacent to, the radiation treatment fields. There is an increased risk of damage to blood vessels, with the appearance of visible tiny blood vessels called telangiectasias. Skin, skin color changes and connecting tissues may be affected. Your skin may become more thick or firm feeling (fibrosis) and may have a slightly darker pigmentation or “tan” than the adjacent skin. Your skin may also remain drier following a course of radiation therapy. Lymphedema or a permanently swollen extremity can occur. General effects of suppression of the immune system, endocrine system, psychosocial complications and fertility problems may occur.

Any organ or tissue that is in the treatment area will be affected to a varying degree. The number of treatments, dose per day, total dose and techniques are calculated to try and reduce the risk of long-term damage. Your cancer may require treatment that may

permanently affect tissues or organs. Your physician will discuss this with you.

Radiation therapy has been reported to increase the occurrence of new cancer. This is very unlikely and if it happens, it is usually after many years.

☛ If there is any possibility that you are pregnant, it is important to inform your physician, nurse or radiation therapist immediately. If you or your spouse are considering pregnancy in the next year, please discuss this with your physician as soon as possible.

☺ The possibility that long term consequences may occur following cancer treatment is a major reason that regular, lifelong medical follow-up is essential. Your physician will discuss any problems that may be associated with your particular cancer or type of treatment.

## FERTILITY

Both chemotherapy and radiation therapy can potentially affect fertility. If you are getting chemotherapy, you should talk to your medical oncology doctor (chemotherapy doctor) about any potential impact on fertility and their recommendations.

As for radiation therapy, we generally recommend that while on radiation therapy, patients should take appropriate steps for birth control. This is true for both men and women, as both sperm and eggs can be affected by radiation therapy. Therefore, it is very important that you take measures to prevent starting a pregnancy.

As for long-term fertility issues, this varies dramatically depending on the type of radiation therapy. With many treatments, there is no long-term impact to fertility from radiation therapy. However, for patients that receive radiation therapy to the pelvis or upper thighs, there can be impact on fertility. If that is the case, your radiation oncologist will talk to you about infertility risks, and give you information, if you are male patient, on sperm banking if you wish to preserve fertility. For female patients that wish to preserve fertility, information will be given on oocyte, egg or ovarian tissue banking prior to treatment.

On a long-term basis, even though there may be some impact on fertility, you cannot assume that you are sterile in the future. Therefore, it is generally recommended that if you do not to have a pregnancy in the future, that you apply any necessary birth control measures.

If you have questions regarding this, do not hesitate to talk to your physicians.