



Chris O'Brien Lifehouse

# Radiation Oncology Patient information

Radiation Therapy for lung cancer

## Radiation therapy for lung cancers

Radiation therapy plays a vital role in treating and managing lung cancer. It is commonly used together with surgery and chemotherapy. In some cases radiation therapy may be used alone instead of surgery.

The treatment course depends on a variety of factors including the type of tumour (histology), location, stage of the disease, your general health and age.

Your Radiation Oncologist will advise you as to which regimen is most suitable for you and how the treatment might affect you.

## What should you bring to your planning appointment?

- A referral letter from your doctor (if not already submitted) ;
- Medicare card;
- All private scans relating to your current diagnosis; and
- A list of your current medications (including any medication allergies).

This planning session involves a Computed Tomography (CT) scan that will be used to plan your radiation therapy. This planning CT scan is taken with you in the same position required for treatment, which is different from the position used for standard CT scans. This means previous scans that you have had cannot be used for radiation therapy planning purposes.

## What happens in planning?

Typically you will be lying on your back with your arms up above your head on an immobilisation device. This device supports your arms while they are up and helps to ensure that you are in the correct position. It is important that you are stable and comfortable in this position for the duration of your planning session (up to 30 minutes) and for each of your treatment sessions.

The Radiation Therapists will also ensure that you are lying as straight as possible on the CT scanner bed. They will do this using lasers in the CT scanner room. This process will also be repeated at each of your treatment sessions. Once your Radiation Therapists have positioned you, they will draw some reference marks on your skin.

You will then undergo a CT scan in the treatment position. You may require a special dye (called contrast) which is administered, by a nurse, through a vein in your arm. It is very important that you breathe normally and lie very still during the CT scan as any movement can affect the quality of the scans, which might mean you need to have the scans repeated.

Once the scan is complete, your Radiation Therapists will make three permanent marks on your skin (tattoos). These marks are used as a reference to position you in exactly the same way for each treatment and to ensure the correct area is receiving the radiation. The tattoos are permanent and are approximately the size of a small freckle. At the end of the planning session you will be given an appointment card with details of your first treatment (date and time).

Your Radiation Oncologist will be present during the planning session, which takes approximately 30-45 minutes.

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## What happens during treatment?



Your Radiation Therapist will take you to your treatment room and you will be asked to lie on the treatment bed in the same position you were in during your planning session.

Your Radiation Therapists will then dim the lights so that the lasers in the room can be seen clearly. These will be used to guide the Radiation Therapists in setting you up in exactly the same position every day.

The Radiation Therapists may lightly palpate your skin to feel for palpable bones and move you slightly when they are setting you up. It is important that you follow their instructions carefully and move only when asked, as usually only millimetre adjustments will be made.

The bed and machine will then be moved into the treatment position. The machine may come close to you, but will not touch you at any point during the treatment process.

You just need to stay still and breathe normally.

The Radiation Therapists will have to leave the treatment room to deliver the treatment. There are cameras and a microphone inside the room and your Radiation Therapists will use these to monitor you throughout the treatment. If you need your Radiation Therapists for any reason, raise your hand or call out and your Radiation Therapists will come straight in.

Although the actual treatment only takes a few minutes, the whole treatment session (from positioning to finishing treatment) may generally take about 10-20 minutes each day.

## Treatment side effects

Side effects will vary from person to person depending on your treatment, medical circumstances and customised care plan. Many of these side effects can be managed and will gradually disappear after your treatment has finished. Please let your care team know if you develop any of these symptoms so they can be managed promptly and effectively and you are more comfortable. Some of the possible side effects are listed in the table below.

To find out about complementary therapies that might assist you to manage your symptoms and side effects, contact the LivingRoom team on 02 8514 0038 or email: [livingroom@lh.org.au](mailto:livingroom@lh.org.au).

Side effects	What can help?
<p>Dry, red, itchy skin (in the treatment area) – skin reactions tend to appear after about two weeks of treatment and may develop even further to become itchy and tender as the treatment continues. The skin reaction is similar to that of sunburn. The skin may become pink and may feel warm to touch with mild discomfort</p>	<ul style="list-style-type: none"> <li>• Use a mild or moisturising soap</li> <li>• Bathe using lukewarm water, and avoid scrubbing the treatment area.</li> <li>• Your doctor may prescribe creams/ ointments to help relieve severe itchiness</li> <li>• Apply Sorbolene on the affected area at least once daily</li> <li>• Avoid irritant products containing alcohol, perfumes or additives (in the treatment area) as this can increase skin irritation</li> </ul>
<p>Fatigue (tiredness) – most patients experience reduced energy levels, tiredness and lack of motivation shortly after starting treatment.</p>	<ul style="list-style-type: none"> <li>• Listen to your body and rest if needed.</li> </ul>

Side effects	What can help?
Pain and discomfort on swallowing and eating.	<ul style="list-style-type: none"><li>• If required your doctor can prescribe xylocaine viscous, a local anaesthetic or medication.</li></ul>
Increased coughing and mucous production.	<ul style="list-style-type: none"><li>• Your doctor and nurses will help manage this.</li></ul>

There are some uncommon side effects that may occur months or years after treatment. These are called late effects and may include the following:

- Lung scarring
- Inflammation of the lungs
- Cardiac effects

*If you have any questions or concerns, please speak to your doctor or nurses.*

## Weekly examinations

During your course of radiation therapy, you will be examined once a week by your Radiation Oncologist or Radiation Oncology Registrar. This will require a longer visit on that day and is essential for your treatment. Record your treatment review details below. A doctor is always available should you need to see someone outside these times.

Radiation Oncologist: \_\_\_\_\_

Radiation Oncology Registrar: \_\_\_\_\_

Clinic review time: \_\_\_\_\_

Treatment machine/phone number: \_\_\_\_\_

For more information about Radiation Oncology, please refer to our general booklet '*Explaining Radiation Therapy*'.

## Useful links

**The Cancer Council:** <http://www.cancer.org.au/>

**Cancer Australia:** <http://canceraustralia.gov.au/>

**EviQ Cancer Treatment:** <https://www.eviq.org.au/>

**Cancer Voices NSW:** <http://www.cancervoices.org.au/>

**Targeting Cancer:** <http://www.targetingcancer.com.au/>



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