

WHAT TO KNOW ABOUT YOUR RADIATION THERAPY TREATMENT



ENGLISH



**THE UNIVERSITY
OF QUEENSLAND**
AUSTRALIA



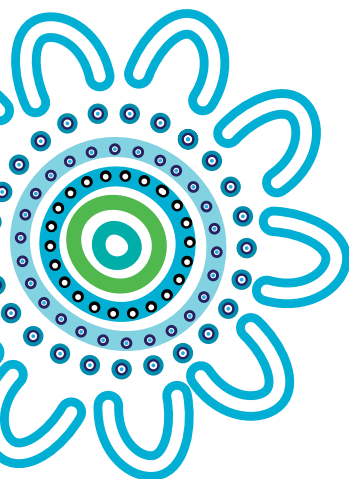
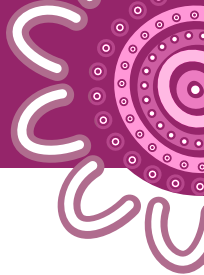
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ABOUT THIS

RADIATION THERAPY BOOKLET



You can watch and listen to this book, by searching 'Radiation Therapy Book' on the FNCWR YouTube channel, or you can listen and read via an ebook audio app which can be installed on your device. If you need assistance accessing these resources, ask your Health Care Worker.



**FIRST NATIONS
CANCER & WELLBEING
RESEARCH PROGRAM**

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The 4Cs Project improving patient-centred care and treatment outcomes.



ABOUT THIS RADIATION THERAPY BOOKLET

This booklet contains information to help you learn more about Radiation Therapy (RT), also called External Beam Radiation Therapy (EBRT).

It includes information about

- » Treatment planning
- » Daily treatment
- » Possible side-effects
- » Ways to look after yourself
- » What may happen when your treatment finishes

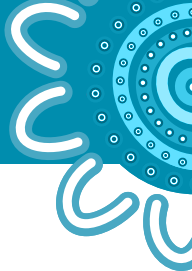
The medical words are explained on **pages 41 to 43.**

We have made an audio version of the booklet so you can listen to this information. Your health team can show you how to access the audio book.

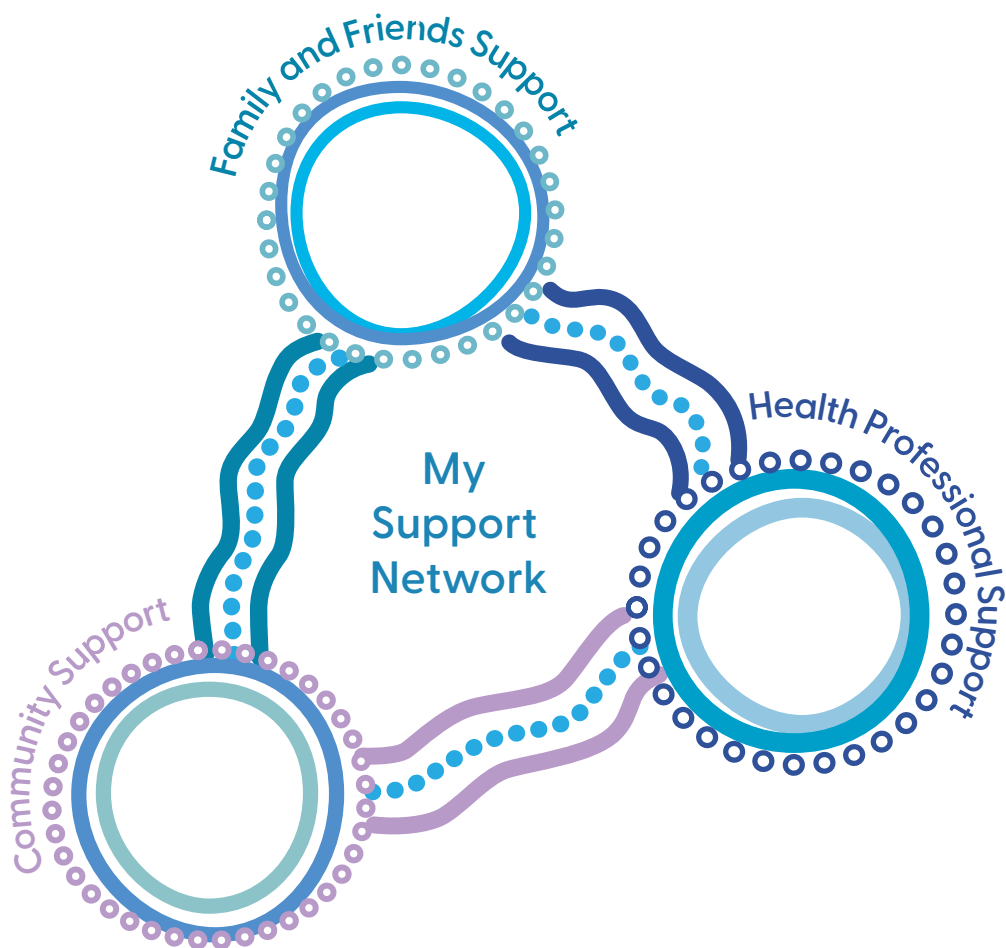
If you need help communicating with the medical team in your language, ask if an Interpreter is available.



YOUR SUPPORT NETWORK



Write down any names and contact details for people who can support you.



Your family, friends and support people can be with you when you talk to your health care team.



Remember

- » You will see different health professionals depending on your needs
- » The health professionals may ask you the same questions.
- » The cancer care team will treat your personal information carefully.

**SEE PAGE 44
FOR MORE
DETAILS**



If needed, you may see other professionals for advice about:

What to eat (*Dietitian*) | Exercise or activity (*Exercise Physiologist*) | Voice or swallowing (*Speech Pathologist*) | Communication in your language (*Interpreter*)

WHAT IS CANCER

Facts about Cancer

- » There are many different types of cancer and it can affect people in different ways.
- » Cancer can happen to anyone.
- » The reason for cancer is not always known – but some things may increase a person's risk of cancer (e.g. smoking, alcohol, family history)
- » Hearing about cancer can be stressful. Feeling worried or scared is normal.
- » Cancer doesn't always cause death – many people survive cancer, especially if diagnosed early.

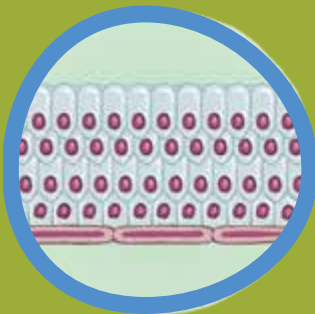
We encourage you to share this booklet with your family and friends, and discuss it with your cancer care team.



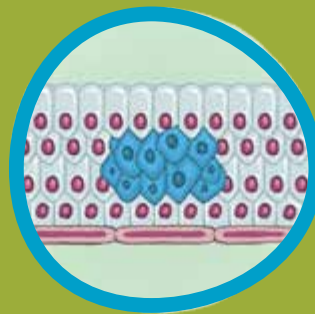
- » Our body is made up of tiny cells we can't see with our eyes. These cells grow, divide, replace worn-out cells, and heal damages after injuries.
- » Sometimes cells grow in uncontrolled ways and form tumours or lumps in the body. These lumps can be either benign (not cancer) or malignant (cancer).
- » Malignant tumours are cancer. These are harmful cells that can stay nearby or spread to other parts of the body (as shown in the picture below).

TINY CELLS INSIDE THE BODY

Normal Cells



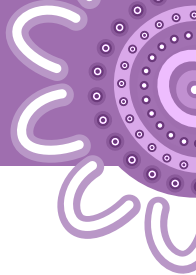
Abnormal Cells



Abnormal Cells
multiplying



TYPES OF CANCER TREATMENT



There are different types of treatment for cancer:

- » Surgery
- » Radiation Therapy
- » Chemotherapy
- » Immunotherapy
- » Hormone Therapy

Some people have more than one type of treatment. This depends on the type of cancer they have.

You can read more about different treatments on [page 41](#).

This book is about Radiation Therapy.

- » Radiation Therapy (RT), also called Radiotherapy or Radio, uses high energy rays to treat cancer. These are like rays of light. You cannot feel them. They do not hurt.
- » Radiation Therapy uses radiation (a special type of X-ray) to kill or damage the cancer cells and stop them from growing.



This book is about a type of Radiation Therapy called “external beam radiation therapy”.

This treatment uses high energy X-rays from a machine to destroy the cancer cells in the area of the body being treated.

Don't forget, you can listen to this book, ask your health worker how you can listen to the audio book or watch it on YouTube.



ABOUT RADIATION THERAPY

Why have Radiation Therapy?

Radiation Therapy can be used to either:

- » Cure many kinds of cancer, either with or without surgery or other cancer treatments (curative treatment).
- » Control the cancer by shrinking it or stopping it from spreading.
- » Help other cancer treatments to be more effective.
- » Relieve symptoms such as pain or bleeding (palliative treatment).

How much radiation is given?

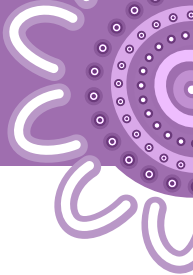
- » To give Radiation Therapy safely and to help reduce side effects, a small amount of radiation is usually given at each treatment session.
- » The radiation targets and destroys the cancer cells so they stop spreading. But it can sometimes damage healthy cells nearby.
- » Having a small amount of radiation each day makes sure the cancer cells are destroyed and the healthy cells can recover.

Radiation Therapy targets and destroys cancer cells and is an effective treatment for many types of cancer.

This book gives you information so you can make an informed decision about your treatment. This is called informed consent.



ABOUT RADIATION THERAPY



How long is Radiation Therapy for?

- » Some people have one, or a few treatment sessions, other people might have up to 9 weeks of daily treatments.
- » The number of treatment sessions you will have depends on the type and size of the cancer, the aim of your treatment (e.g. to cure or manage pain) and whether you are having other treatment (e.g. chemotherapy).
- » Radiation Therapy treatment is usually scheduled from Monday to Friday, not over the weekend or on public holidays. The break over the weekend allows the normal cells to recover.
- » There may be interruptions to your daily treatment because the machines need to be serviced - this is normal and the doctor will allow for these breaks during your treatment.
- » Your Radiation Oncologist (doctor) will talk with you about your treatment plan.

You will have Radiation Therapy at a cancer centre, usually located in the hospital.

A Radiation Oncologist (Radiation Doctor) and a Radiation Therapist (who delivers the treatment) will work together to give you the Radiation Therapy safely and reduce any side effects.



ABOUT RADIATION THERAPY

What happens during treatment?

- » During treatment, you will lie on a treatment bed (or couch) under a machine (as shown in the pictures below).
- » The machine points the radiation beams (X-rays) to the part of your body that needs to be treated. You will not see or feel the X-rays.
- » You will see some red or green lights (lasers) coming from the machine to help the Radiation Therapist to make sure you are in the correct position.
- » The lasers are harmless and have no effect on the body.
- » Further information about radiation treatment can be found on [pages 12 to 22](#).

You will not become radioactive after external Radiation Therapy.

The X-rays will not stay in your body. So it is safe to be with family (including children) and friends, and continue your daily activities.



Radiation Therapy treatment machine.



Getting to Treatment

Getting to treatment can be hard for some people. It is a good idea to ask a nurse or Indigenous Liaison Officer about what travel assistance, transport and parking is available at your hospital.

There may be some services available, here are some questions you might ask:

Parking

- » Is there any free parking?
- » Is there cheaper parking for patients?

Public transport

- » What public transport services stop close to the hospital?

Taxis

- » Where are the taxi ranks?
- » Is there a phone to call a taxi?

Special transport services

- » Are there any volunteer driver services?
- » How do I access the volunteer driver services?
- » Do they pick up from a train station?

Traveling far from home

If you live far away from the nearest treating specialist, you might be eligible for PATS (Patient Assistance Transport Scheme). Information is available online or ask someone from your cancer care team for advice.

Will I need to stay close to the hospital?

If the hospital is far from home, you may need help to find somewhere to stay close to the hospital. Usually there is a hotel or lodge close to the hospital. Sometimes there are cheaper rates for patients and their families.

Please talk to a nurse, social worker or Liaison Officer and ask if they can help you to find a place to stay.

You may also want to ask:

- » Can a family member, friend or escort travel with me?
- » Are there interpreters available?
- » What will I need to bring with me? (e.g. medications, clothing)
- » Can I request male or female staff members?

How much does Radiation Therapy cost?

Radiation Therapy treatment and appointments in the public hospital are free (bulk billed through Medicare).

Please bring your Medicare card or Veterans' Healthcare card (if you have one), and any private health insurance details (if you have this).

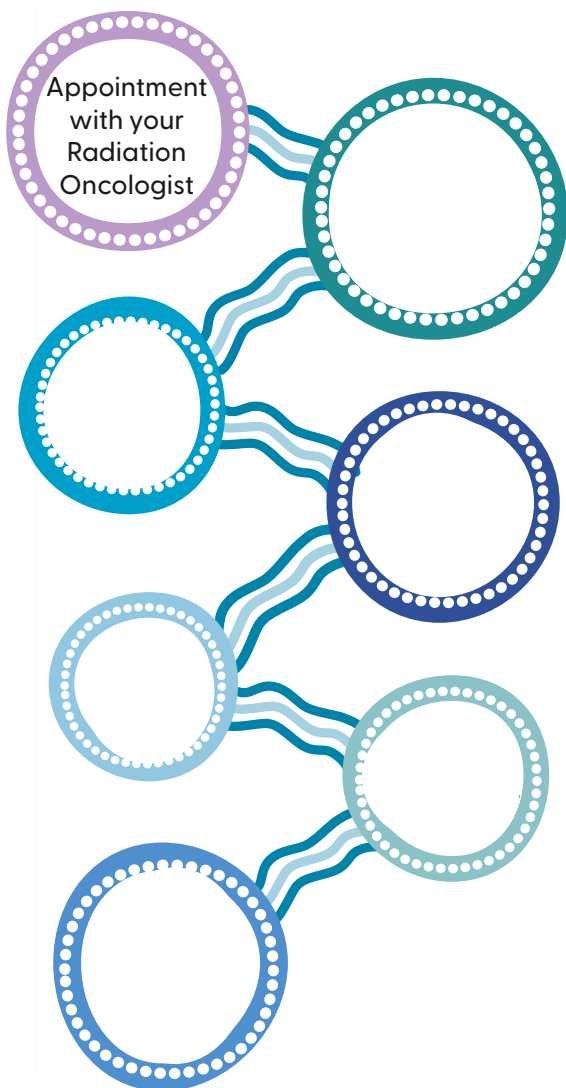
If you are worried about any costs of treatment/medication, talk to your Liaison Officer, nurse or social worker.

If you are being treated in a private centre or hospital, talk to the doctor or office staff about costs before you start treatment.



YOUR TREATMENT JOURNEY

There are a number of steps involved in planning and having your Radiation Therapy treatment. The next few pages tell you about each step.



PLANNING YOUR TREATMENT

Your radiation therapy needs to be carefully planned to make sure the radiation goes to the part of your body that needs to be treated.

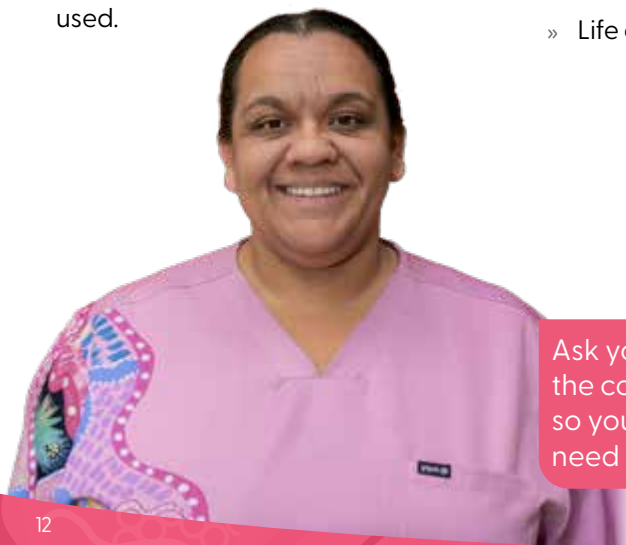
Your Radiation Oncologist will make a plan for your treatment.

1 Appointment with the Radiation Oncologist (Doctor)

The first step is the appointment with the doctor called a Radiation Oncologist.

At the appointment, the doctor may examine you and request some scans or blood tests. They may also talk to you about:

- » The type of cancer you have.
- » The part of the body that will be treated.
- » Why it is recommended that you have radiation therapy.
- » What you can expect the radiation therapy to do.
- » The type of radiation therapy and the kind of machine that will be used.
- » Planning treatment and when you will start treatment
- » What position your body needs to be in for treatment.
- » How long treatment will last.
- » Side effects and how you can look after yourself.
- » How your doctors will watch your health after treatment finishes.
- » Life after treatment.



Ask your doctor if you can record the conversation on your phone, so you can check later what you need to do.

Your Radiation Therapist will help prepare and plan your treatment.

2 Treatment planning appointment (or a CT planning appointment)

The planning appointment can take from 30 to 60 minutes.

- » The Radiation Therapist will take you to the planning area, and explain what and who is involved in the session.
- » You might be asked to change out of your own clothes and put on a special hospital gown, which is like a dressing gown.
- » The Radiation Therapists will use a machine called a CT scanner or CAT scan (see picture on p14).
- » The CT scanner machine will take pictures of the inside of your body and show the size, shape and place of your tumour. These pictures help the Radiation Therapist and doctor to plan your treatment.
- » The Radiation Therapist will ask you to lie still on the CT scanner bed. They will talk about your position on the bed and find the best position so the treatment will target the right spot.

Please remember to bring the following to the planning appointment.

- ☐ Recent scans
- ☐ X-rays of your cancer
- ☐ Blood test results

If you are not sure what to bring, it is best to bring everything.



PLANNING YOUR TREATMENT

- » Next time when you have scans or treatment, they will ask you to lie in the same position.
- » For some types of treatment, a dye is injected into your veins by the nurse to give a clear picture inside your body.
- » With your permission, the Radiation Therapist will take photos of your face or the part of the body that will be treated so they can find the right spot, each time you have treatment.
- » Other scans called a diagnostic CT, MRI or PET might be needed to help with treatment planning. The doctor can explain these if needed.

A CT scanner will be used to help plan your treatment.



3 Treating the right spot

- » Every treatment will target the same place on your body, so the position of your body is very important.
- » Staying still helps to make sure the radiation gets to the part of the body that needs to be treated.
- » To keep your body in the same position, the Radiation Therapist might use: skin markings, face masks, or body moulds.

Skin markings

- » To make sure you are in the same position for each treatment, 2 or 3 small permanent marks called tattoos might be made on your skin using a small needle. This will feel like a pin prick. Each mark is about the size of a freckle (see pictures).
- » You will see red or green lights (or lasers) coming from the scanner. These lights will be lined up with your skin marks to check your body is in the right position for treatment.

Radiation Therapists drawing tattoos (small permanent marks) on a patient's skin.



During the planning appointment, small permanent marks (called tattoos) may be put on your skin, using some ink and a small needle. These marks will show the right place where the radiation will target the cancer.

PLANNING YOUR TREATMENT

Face Mask

- » If your cancer is on your head, neck, mouth or throat, you will have a special mask made for you (see pictures to the right).
- » The mask has air holes. Radiation Therapists will attach the mask to the bed. This mask will keep your head still during each treatment session.

Some people feel anxious wearing a mask. Please tell your Radiation Therapist if you feel worried or scared. They can make changes to the mask by making a hole around the nose, mouth and eyes to help you feel better. They will be able to give you advice to make you feel more comfortable. Often people get used to wearing the mask.

Please note: The equipment and machines may look slightly different, depending on which hospital you have treatment.



A mask will help keep you still in the machine

Body mould

- » A body mould is a plastic cushion that helps keep your body still during treatment.
- » When you lie still, the X-rays are pointed to exactly the right place in your body to target the cancer cells.

Deep Inspiration Breath Hold

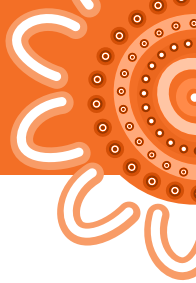
- » You might be asked to take a deep breath during treatment to help the radiation target the right spot.

Radiation treatment does not start immediately after your CT planning. It could take a few days or weeks for the doctor and Radiation Therapist to work out the best treatment plan for you.



Patient lying on a body mould.

HAVING RADIATION THERAPY TREATMENT



We will now tell you about what happens when you arrive for your treatment.

1 Before treatment starts each day

- » The Radiation Therapist or nurse will tell you if you need to do anything before treatment starts. For example, sometimes people might be asked to go to the toilet or not eat food before the treatment.
- » The Radiation Therapist will position your body in the same way as when you came for your planning appointment.
- » If you need a body mould or mask the therapist will put this on you.
- » The skin marks and measurements done during the planning appointment will be used to make sure you are in the best position for each treatment.
- » Setting up the treatment takes 5-10 minutes; it may take a bit longer on the first day of treatment.

The lights in the room will be dimmed to line up the laser lights with the marks on your skin. These lasers do not hurt.

The first day of treatment may take longer than 20 minutes because the Radiation Therapist needs to check the measurements made during the planning appointment.




HAVING RADIATION THERAPY TREATMENT

2 During treatment sessions

- » When you are in the right position, the Radiation Therapist will leave the room. They will start the treatment machine from another room.
- » There are rules around the radiation machines. Other people are not allowed in the treatment room while it is running. You will be in the room by yourself for about 5-10 minutes.
- » The Radiation Therapist will be in a room next door watching and listening to you through a video camera and controlling the machine during the treatment session.

The Radiation Therapist will make sure you feel comfortable and safe before starting treatment. The Radiation Therapist will not stay in the room with you during the treatment, but there is a camera and a microphone so they will be able to see you on a computer screen and you will be able to talk to each other.

If you are wearing a mask and cannot speak, you can raise your hand and get their attention if you need to.

A radiation therapist, seen from the side, is seated at a desk in a control room. He is looking at a large computer monitor that displays medical imaging, including a chest X-ray and a 3D model of a human torso. In the background, through a glass window, a patient is lying on a table inside a large, circular radiation treatment machine (linear accelerator).

Radiation Therapist operating machines and looking after patient during treatment.

HAVING RADIATION THERAPY TREATMENT

- » During treatment, you can listen to the radio or bring your phone to listen to music. It doesn't interfere with your radiation treatment, but it is important to keep very still.
- » The machine makes a buzzing sound when it is turned on and might make loud noises. But you will not feel anything. It is just like having a "long X-ray".
- » The machine may move around you, but will not touch you.
- » You need to stay very still and breathe normally during the treatment.
- » The therapist will tell you when you can move again.

It is important to keep very still during the treatment to make sure the radiation gets to the part of the body that needs to be treated.

The machine will move around you, but will not touch you and you will not feel anything.

Patient being prepared for radiation treatment by the Radiation Therapist



3 After each treatment session

- » The Radiation Therapist or nurse may talk to you about some of the possible side effects ([see pages 22 and 23](#)).
- » They will talk to you about how to look after yourself and stop any side effects you may have from getting worse.
- » You will see the doctor or nurse at least once a week during treatment. If you need anything you can speak to them at any time.
- » Remember to ask the Radiation Therapist any questions each time you come in for treatment.
- » You and your support people can write questions to ask your cancer team on [page 45](#). The Radiation Therapist can ask the nurse or doctor to see you if needed.

If you have any side effects from treatment, you might see a nurse who can help look after you. They can put on or recommend special creams for your skin, change dressings or take blood for tests.

Nurse consulting
with a patient after
treatment.

POSSIBLE EFFECTS OF TREATMENT



Side Effects

- » **The next pages are about how the treatment might make you feel. This is known as Side Effects.**
- » Side effects are different for each person and depend on the part of the body being treated.
- » You can get side effects during or after treatment. Most side effects will go away in 4–6 weeks. Some side effects can occur later, but these are less common.
- » If you get any side effects, tell your doctor, Radiation Therapist or nurse as soon as you start having them. They will tell you how to manage the side effects.
- » If you have any serious side effects, your doctor may change your treatment or give you a break from treatment to give your body time to recover.

Your doctor will tell you what effects you may have.

Telling your cancer care team when the side effects first start means you can start looking after yourself sooner. It might also mean the side effects don't get as bad.

Support group

You can join a support group where you meet people who have cancer. You have the chance to share your feelings and experiences. You can also learn how to cope with your feelings, radiation therapy and side effects.



POSSIBLE EFFECTS OF TREATMENT

Where you feel side effects depends on where you're having radiation therapy.

What you feel depends on where the radiation is going in the body. This illustration shows the different areas you might have side effects depending on where you are having treatment.

Head, neck or throat

You may get a dry mouth and thickened saliva or find it hard to swallow or eat if treated in the head area. See [page 31](#) for help with mouth problems or see [page 32](#) for help with eating.

Chest

You may have a cough if treated in the chest area.

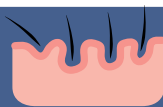
Upper tummy

Your stomach may feel upset or nauseous if treated in the stomach area. See [page 33](#) for help with tummy problems

A little lower

Your bowel or bladder may be affected; and sex may be difficult or painful.

See [page 34](#) for help with [bowel issues](#) or see [page 35](#) for information about sex.



Body Hair

You may lose hair in the area receiving radiation. See [page 28](#) for help with hair loss.



Fatigue

You may feel very tired during and after treatment. See [page 24](#) for help with fatigue.



Skin

You may have dry or itchy skin in the area receiving radiation. See [page 26](#) for help with skin changes.

HELP WITH POSSIBLE SIDE EFFECTS



Your Feelings

People experience different emotions when they are having treatment.

You may feel:

Worried

Scared

Lonely

Sad

Angry

Anxious

Stressed

Frustrated

Down or depressed

It is normal to have these feelings, and there are things that may help you.

Exercise

Sometimes exercise such as walking, yoga or swimming helps people to feel better, particularly if they are feeling a bit down or depressed. Talk to your doctor about what type of exercise is good for you.

Exercise can also lessen side effects of treatment.

Talk to others

You may find it helpful talking to someone you trust about your feelings.

- » A family member or close friend
- » Health professional: doctor or nurse
- » Social worker
- » Indigenous Liaison Officer
- » Psychologist/ psychotherapist
- » Religious minister

You may want to talk to someone who has had Radiation Therapy and/ or other people with cancer. However, remember that someone else's experience of Radiation Therapy may be different to yours.

Being physically active and exercising regularly is important to help you feel better.



Tiredness and Fatigue

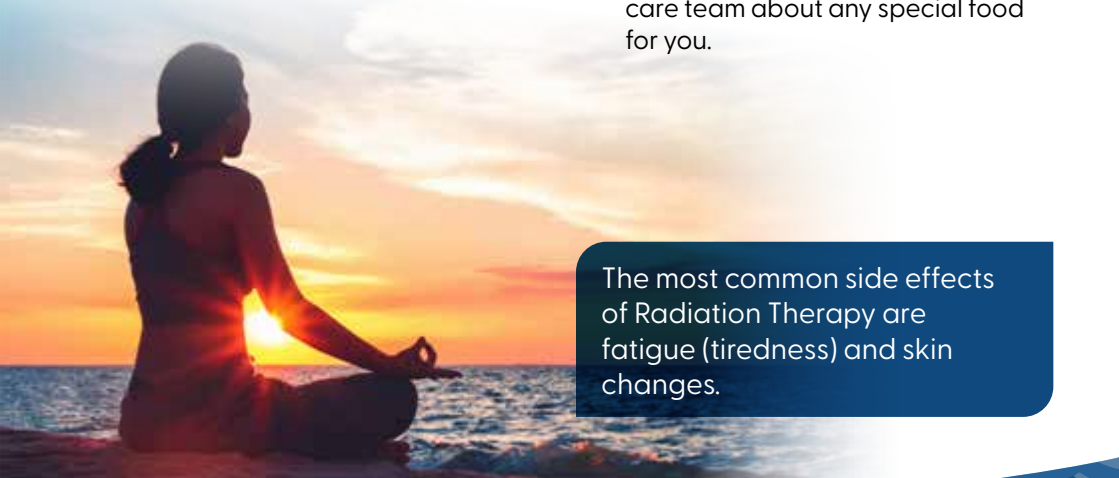
- » Fatigue is the kind of tiredness that doesn't go away when you rest or sleep.
- » Tiredness usually gets worse the longer the treatment has been going on. You will probably feel most tired at the end and for weeks/months after treatment.
- » People experience tiredness in different ways. Some people can keep doing their daily activities but others will not be able to do as much.

Meditate and relax

You may try meditation or activities that make you calmer (e.g., listening to soothing music or breathing slowly while paying attention to each breath).

Ideas that may help you to cope with tiredness from treatment.

- » Spread your activities out across the day.
- » Plan to do less things.
- » Some people may need help with shopping, housework and driving.
- » Do light exercise like walking and swimming. Ask your cancer care team about what exercises are good for you.
- » You can talk to an exercise physiologist or physiotherapist for advice.
- » Meditate or use relaxation exercises (e.g. Dadirri deep listening).
- » Listen to music, read a book.
- » Eat healthy food. Ask your cancer care team about any special food for you.



The most common side effects of Radiation Therapy are fatigue (tiredness) and skin changes.

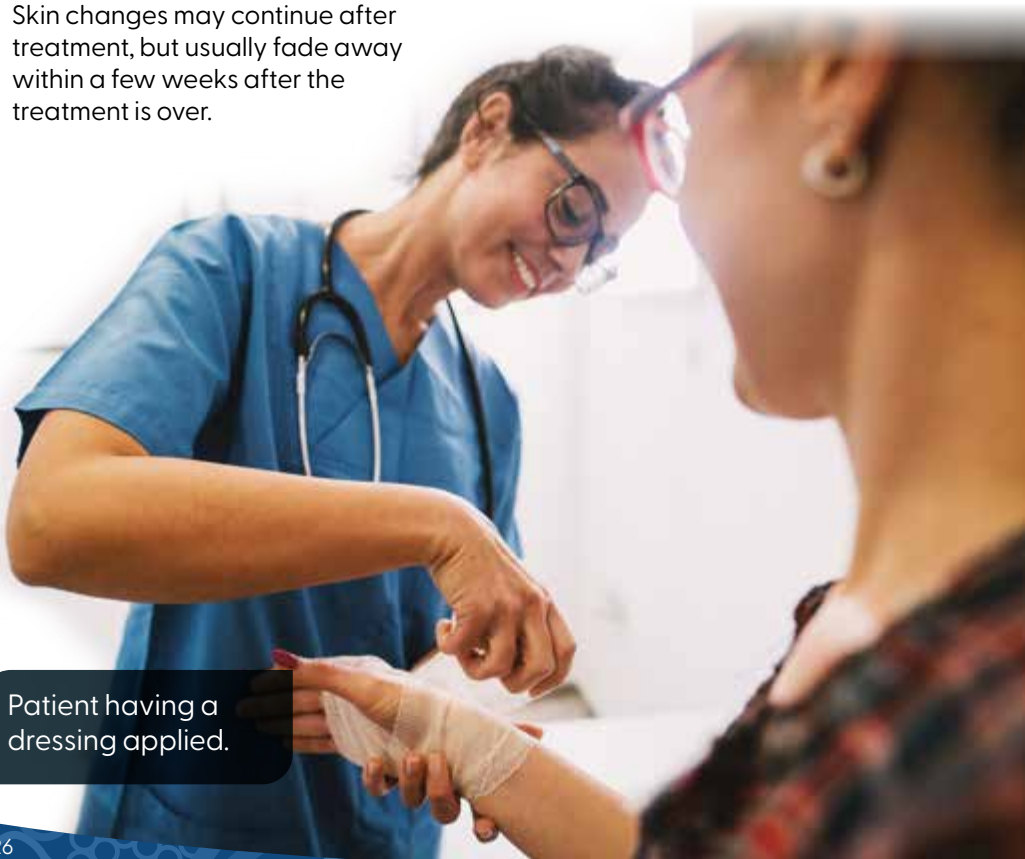
HELP WITH POSSIBLE SIDE EFFECTS



Skin problems/changes

- » The skin on the part of your body that is treated may change throughout treatment.
- » The skin may become red, warm to touch, dry, itchy, sore, flaky and peel off, like sunburn.
- » It might be after 2 or 3 weeks of radiation therapy before you see your skin change.
- » Skin changes may continue after treatment, but usually fade away within a few weeks after the treatment is over.

People react differently to treatment. Skin problems and changes vary from person to person.



Patient having a dressing applied.

Ideas that may help skin problems after Radiation Therapy:

- » Protect the skin against the sun. Cover your skin before going outside.
- » Bathe or soak the area using a salt-water solution to relieve the itching and soreness. Or swim in the ocean.
- » Avoid applying ice packs to the treated area.
- » Shower as normal, but avoid very hot water.
- » Avoid rubbing or scratching the part of the body treated. Gently pat dry with a soft cotton towel.
- » Avoid electric blankets during the treatment.
- » If the treated area involves your head, neck or armpit, the skin is likely to be sensitive. So, avoid shaving the area being treated.
- » Wear loose, soft, breathable clothing (for example, cotton).
- » Applying Sorbolene cream (moisturiser) 2 to 3 times daily may help to stop your skin from getting blisters or sore.
- » You may begin using Sorbolene cream from the first day of treatment.
- » Avoid applying any creams 2-3 hours before treatment, even Sorbolene.
- » Avoid perfumes, deodorants, cosmetics or scented creams directly on the part of the body treated. They may contain alcohol or metals.
- » If your skin starts to peel, continue to use cream and ask your doctor, Radiation Therapist or nurse for advice.

Tell your Radiation Therapist or nurse if you are concerned about your skin. They will be able to recommend ways to help your skin (e.g. special creams).



Applying cream to a patient.

HELP WITH POSSIBLE SIDE EFFECTS

Hair problems

- » You may lose some or all of the hair on the part of your body that is being treated. Your hair will usually grow back after the treatment is over.
- » Sometimes you lose your hair because of chemotherapy not radiation therapy.
- » If your face is the part of your body being treated, you may lose hair on the back of your head.

Some useful ideas when your head is being treated

- » Protect your head against sunburn and the cold by wearing a hat.
- » Use a mild shampoo like baby shampoo. Dry your hair with a soft towel by patting not rubbing.
- » Avoid using hair dryers, curling irons, hair bands, clips or hair spray.
- » Avoid using hair colours, perms, gels or mousse as these may sting your head.

Ideas to manage hair problems



Some people wear a wig

- » You may choose to wear a wig, hairpiece, hat or scarf – whatever you prefer. If you plan to wear a wig, choose it early in your treatment.
- » The Cancer Council Helpline ([listed on page 39](#)) and your cancer care team can help find a wig. Some hospitals have a wig library where you can try different wigs to see which one suits you best.

You can get advice at the wig library and try on different wigs and scarves.



HELP WITH POSSIBLE SIDE EFFECTS



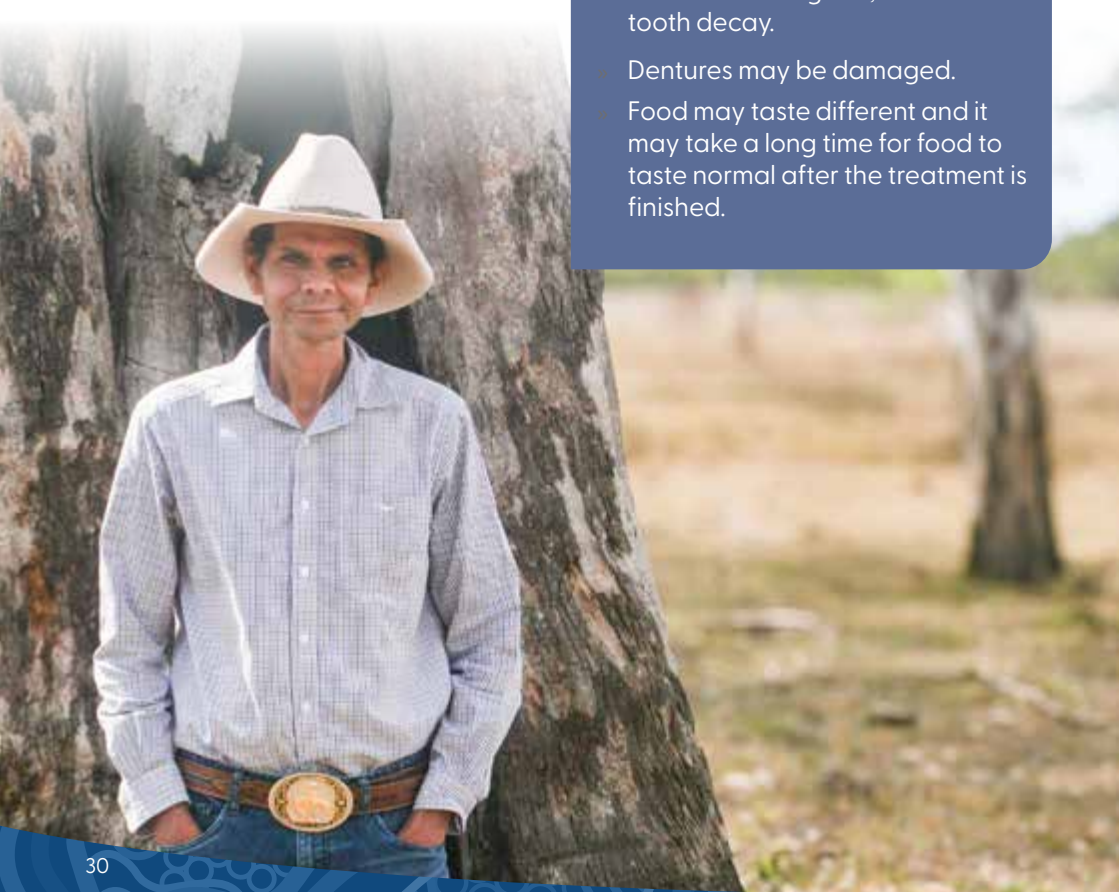
Mouth problems

If you are having Radiation Therapy on your mouth, chest, throat or neck, you may find eating or swallowing food difficult.

This is because the Radiation Therapy can affect the cells in the glands that produce spit (saliva) and can cause a burn inside the mouth, throat or neck.

You may have:

- A dry or sore mouth or your voice may become hoarse or croaky. These symptoms slowly improve after treatment, but may take a few weeks or months.
- Thick mucus, a lump-like feeling or pain in your throat that makes swallowing hard.
- Sore teeth and gums, toothache or tooth decay.
- Dentures may be damaged.
- Food may taste different and it may take a long time for food to taste normal after the treatment is finished.



Some useful ideas if you are having mouth problems

- » Have your teeth checked before starting treatment to your head or neck region.
- » Have regular dentist check-ups after treatment is over (every 6 months).
- » Keep your mouth wet by sucking ice cubes, sipping cool drinks and drinking water.
- » Drink water often during the day and take a bottle of water with you when you go out.
- » If you smoke, talk to your cancer care team for advice on how to stop smoking.
- » Avoid or reduce alcohol
- » Regularly rinse your mouth with a gentle mouth wash.

Ask for advice.

- » If your throat is sore or you cannot swallow: cut, blend or mash food.
- » If eating is difficult or painful, pain relief medication may be available.
- » Ask your dietitian or speech pathologist if you need a special diet.
- » Talk to a speech pathologist if you have swallowing problems.



HELP WITH POSSIBLE SIDE EFFECTS



Loss of appetite and feeling thirsty

- » Some people may lose their appetite or feel very thirsty. This depends on what part of the body is being treated.
- » People who are having their mouth, neck, or throat treated are likely to find it hard to eat and swallow food. You will see a dietitian or speech pathologist who can help work out the best foods for you to eat.
- » It is important to eat healthy food to help during treatment. Speak to the nurse, dietitian or speech pathologist about your food and diet.

Some useful ideas if you are having trouble swallowing or you have lost your appetite

- » Eat small amounts of food several times a day.
- » Try eating softer foods, like yoghurts, fruit purees or soups if solid larger meals are too difficult.
- » You may need nutrition supplements. If you are going to use supplements it is important that you talk with a dietitian who can help you use them in the most effective way.
- » Try to drink water, juice or cordial often during the day and take a bottle of water with you when you go out.



Nausea or sick in the tummy

You may have nausea or an upset tummy when your stomach area is being treated. Nausea is usually easy to control with medication.

Some useful ideas if you are feeling sick in the tummy.

- » Sip water or other fluids during the day to avoid dehydration.
- » Nibble plain biscuits.
- » Ask your doctor if a medication may help you.
- » Contact your cancer care team if you have nausea or if you are vomiting after your Radiation Therapy.



Ideas to manage nausea.

HELP WITH POSSIBLE SIDE EFFECTS

Toilet trouble

If you are having Radiation Therapy on your stomach you may have constipation (hard poo) or diarrhoea (loose bowel or runny poo) which may start within a few days to a couple of weeks. Sometimes you might get diarrhoea for other reasons like food poisoning or chemotherapy.

You may have these symptoms:

- » Feeling the need to go to the toilet often and quickly.
- » Watery bowels (runny poo).
- » Stomach cramps (sore tummy).

It is important to talk with your cancer care team about your diet and food you eat.

Some useful ideas if you are having tummy trouble

- » Eat what your body can cope with.
- » Reduce high-fibre food: whole grain products such as whole grain bread, pasta or cereals; nuts; legumes like peas, lentils and beans.
- » Reduce spicy food like hot curries and chilli.
- » Drink lots of clear liquids (e.g. apple juice, peach nectar, weak tea or clear broth) as soon as the diarrhoea starts to avoid dehydration.
- » If you feel sick, eat or drink as well as you can because your body needs energy.
- » Contact your cancer care team if you see blood in the toilet or if you are going to the toilet to poo often (have more than 6 bowel movements in 24 hours).



Ideas to manage diarrhoea.

Radiation therapy and sex

Radiation Therapy can affect your sex life and make you lose interest in having sex. Your sex drive may be lower because you feel tired, anxious or depressed.

If you are having radiation therapy in between the hips (pelvis) you may have some problems. The problems are different for men and women.

Women might find:

- » Sex too uncomfortable or painful during treatment and for a few weeks afterwards but this should improve.
- » Your cancer care team may suggest using a lubricant or a vaginal dilator. As lubricants can be made from different things it is a good idea to talk to them about which is best for you.
- » Itchy, burning or dry vagina. These changes can last for a long time or not go away.
- » Menstrual period changes or menopausal symptoms. These can include: stopping of periods, hot flushes, dry skin, and dry vagina. Your period might start again after treatment, but this does not always happen.

Men might find:

- » Having and maintaining erections difficult.
- » There are treatments and tools that can help men have erections. Talk to your cancer care team who can refer you to someone who helps with sexual changes.
- » Pain during sex.
- » For a small number of men, sexual function may not recover.

Pregnancy

- » As Radiation Therapy affects normal cells, it is best that you do not become pregnant or make someone pregnant during treatment. It might affect the baby.
- » It is a good idea to use a reliable form of contraception while having treatment. For example, condoms, the pill or an intrauterine device (IUD).
- » You can ask your doctor or cancer care team for advice about the best contraception method for you and your partner.

If you want to have a baby, talking to your doctor can help you decide on the right time after treatment.

NATURAL THERAPIES



Some people also use natural therapies to manage the cancer and help them cope better. Natural therapies are sometimes called natural medicines, bush medicine or complementary therapies.

They include:

- » traditional bush foods or medicines
- » massage and aromatherapy
- » meditation, prayer or spiritual healing
- » herbal medicine
- » acupuncture
- » counselling, art therapy and music therapy.

You may have problems caused by the cancer and its treatment, such as pain, feeling sick, fear or sadness.

You may find that certain natural or bush medicines can help with these problems.

The therapies you use depend on what you want to try and what your doctor advises.

Talk with your doctor if you want to use natural therapies. Some natural and bush medicines may stop your other cancer treatments from working. While some you can take at the same time.

You will need to find the best time for the treatment and natural therapies to work for you.



If you want to use bush medicine, also discuss this with an Aboriginal Health Care Worker or Elder.

Follow-up visits

- » Once your planned treatment is over your cancer team will tell you when and how often you should come back for follow-up visits at the hospital.
- » Soon after treatment you are likely to have regular follow-up visits with your Radiation Oncologist or nurse.
- » At these follow-up visits your team may check for:
 - » Any sign the cancer has come back.
 - » New side effects or if other side effects are better or worse.
 - » Seeing if other treatments are needed.
- » Your cancer care team will organise an appointment with your Radiation Oncologist (doctor) about one to two months after treatment is over.
- » After this appointment, you may see your doctor around every **3 to 6 months** depending on your type of cancer and how bad your side effects were.
- » It is also important to see your local doctor or community health clinic to discuss how you feel after treatment.



A patient talking to a doctor at a follow-up visit.

Some people may feel a bit alone after the busy treatment time is over. The cancer care team is there to help and support you, even when your treatment is over. It is important that you see your doctor for a follow-up check-up after treatment to make sure everything is going OK.

A decorative graphic in the bottom right corner of the page. It features a series of concentric circles in shades of brown and tan, with small dots along the inner rings. To the left of the circles are several thick, white, wavy lines on a brown background, resembling stylized clouds or water.

At some cancer centres, the cancer teams develop a survivorship care plan (SCP) with you and your carers.

A survivorship care plan may include:

- » information about you
- » information about your care team
- » diagnosis details
- » treatment summary
- » signs & symptoms to watch for
- » follow-up care plan
- » wellness plan

It is important to think about life after treatment and what is important to you. Your cancer care team can help you work towards your goals.

Important dates to remember:



SUPPORT AND HELPFUL CONTACTS

Cancer Support Services

Cancer Council

The Cancer Council has many different services for people with cancer and their families.

Cancer Council Helpline 13 11 20

You can ask the helpline for information on support services (e.g. transport, legal or financial support).

Information about cancer is available on local Cancer Council sites. Search for “Aboriginal and Torres Strait Islander” on the following websites:

- » **Cancer Council Australia:**
www.cancer.org.au
- » **Cancer Council NSW:**
www.cancercouncil.com.au
- » **Cancer Council Victoria:**
www.cancervic.org.au
- » **Cancer Council Queensland:**
www.cancerqld.org.au
- » **Cancer Council South Australia:**
www.cancersa.org.au
- » **Cancer Council Western Australia:**
www.cancerwa.asn.au
- » **Cancer Council Tasmania:**
www.cancertas.org.au
- » **Cancer Council ACT:**
www.actcancer.org.au
- » **Cancer Council Northern Territory:**
www.nt.cancer.org.au

Yarn for Life

- » www.yarnforlife.com.au

Here you will find information and resources about cancer specifically for Indigenous people.

Cancer Australia

- » www.canceraustralia.gov.au

Here you will find information about:

- » Cancer screening
- » Diagnosis of different types of cancer
- » Treatments
- » Supportive care

Specific information for Indigenous people is available on this website:

- » www.canceraustralia.gov.au/affected-cancer/atasi/resources-people

‘Look Good...Feel better’ Program

- » www.lgfb.org.au

This is a free national community service program to inform people with cancer how to manage the appearance-related side-effects caused by cancer treatment.

You can visit the website to find the closest workshop to your home and get more information or email info@lgfb.org.au or call 1800 650 960.

Wig Services

Some hospitals or cancer clinics have a wig library where you can borrow a wig and get advice on headwear.

SUPPORT AND HELPFUL CONTACTS

Local Support Services

Interpreter Services

If you need assistance with language interpretation contact your local interpreter service. In the NT, you can call 1800 334 944.

- » **Local Aboriginal Community Health Services**
www.naccho.org.au/member-services/naccho-member-services/

National Aboriginal Community Controlled Health Organisation (NACCHO) has a list of local Aboriginal Community Controlled Health Services. See the website above to find your local service or ask your Indigenous Liaison Officer about local services in your area.

Connecting with Others

- » **Cancer Connections**
www.cancerconnections.com.au

Here you will find information about how you can share your experiences with other people. You may want to join a support group or talk to a trained volunteer who has had a similar experience.

Indigenous Liaison Officers (ILOs)

Ask the hospitals and cancer centres to connect you with the Indigenous Liaison Officer (ILO) or Aboriginal Liaison Officer (ALO).

Family Support

Family and friends can be a great support. Family can come with you to visit doctors and nurses and hear what they say.

Support for Caregivers

- » **Carer Gateway**
www.carergateway.gov.au

Here you will find information to support family and friends who provide care and support, including:

- Accessing financial support,
- Help and advice,
- Taking a break,
- Connecting with other carers.

- » **You can call the Carer Gateway on:**
1800 422 737

Carers Australia

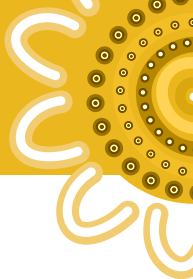
- » www.carersaustralia.com.au

Carers Australia advocates for carers and helps provide access to support services.

Other Helpful Contacts

Ask your health care team if there's any other contacts or services they recommend for you and your family:

Chemotherapy	Medication to kill cancer cells given as a liquid using a drip or pump into a vein, or a tablet taken with a drink of water.
External beam	This type of radiation therapy uses high-energy X-rays radiation therapy to kill the cancer cells. The X-rays come from a machine outside the body.
Hormone therapy	Hormone therapy is medication that reduces or blocks hormones in your body that are likely to help the cancer grow. This is mostly used in breast or prostate cancer.
Immunotherapy	A treatment/medication that helps a person's own immune system to fight cancer.
Internal Radiation Therapy <i>(Also called brachytherapy)</i>	A type of radiation therapy that places radioactive sources or seeds, inside the body, close to the cancer or area of risk. Often these radioactive sources are taken out after a few minutes. In some cases, they remain within the body.
Palliative treatment	This kind of treatment eases symptoms like pain from cancer. It also helps to control the side effects from cancer treatments such as radiation therapy and chemotherapy.
Radiation therapy	A type of cancer treatment that uses radiation (a special type of X-ray) to kill or damage cancer cells to shrink the tumour. There are two types of radiation therapy: external beam radiation therapy and internal radiation therapy.

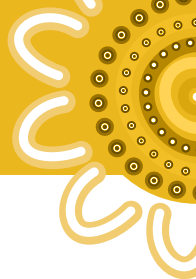


Other words you may hear

Benign	Not malignant. A benign tumour is not cancer.
Cancer	When cells grow in a wrong way resulting in blood cells that do not work well or a lump called a malignant tumour.
Cells	The basic, tiny building blocks of the body.
CT scan	CT means computerised tomography. This is a type of medical imaging or scan. In this type of scan, X-rays run over and through the body and a computer creates a picture of the inside of the body.
Contraception	Methods used to prevent pregnancy. Also known as birth control.
Diet	Food and drink you have each day. Does not mean a way to lose weight.
Fatigue	Fatigue is the kind of tiredness that doesn't go away when you rest or sleep.
Intrauterine device	A small device that is inserted into a woman's uterus (IUD) (womb) to prevent pregnancy. Also called an IUD.
Malignant Tumour	A cancer, meaning that the cancer cells invade or take over the surrounding tissue; they can also spread to other parts of the body (metastasis).
Metastasis	Metastasis is the spread of a cancer to another part of the body. It is also known as secondary cancer.
MRI scan	MRI means Magnetic Resonance Imaging. It is a type of imaging that uses special radio waves and a magnetic field to create a detailed picture of the body.
Nausea	This is a feeling when your stomach is upset or queasy and you feel like you want to throw up.

Nourishment	The food you need for growing, being healthy and keeping in a good condition.
Nutrition	The food and drink you have each day.
Pelvis	The part of your body between your hips.
PET scan	PET means Positron Emission Tomography. This type of imaging uses a special radioactive substance to look for cancer cells in the body.
Simulation	The process to plan the radiation therapy, so the X-rays point to or go to the cancer cells and not to the normal cells.
Support group	It is a meeting where people share their experiences.
Surgery	Removing the tumour with an operation.
Symptom	Changes in the body that a person feels and that are caused by a disease or treatments. For example pain or tiredness are symptoms.
Tumour	A lump with cells that grow in an uncontrolled way.
Vaginal dilator	A special piece of round-tipped plastic that comes in different sizes. They are used to stop shrinking and tightening of the vagina after radiation therapy treatment. They help stretch the vagina to make sex more comfortable.
Vomiting	When you feel nauseous and throw up.

PEOPLE IN A CANCER CARE TEAM AND WHAT THEY DO



General Practitioner	Local doctor who provides ongoing care and looks (GP)/ Local Doctor after your general health. Your radiation oncologist will be in touch with your GP over the course of your treatment.
Radiation Oncologist	A doctor who specialises in radiation therapy and is responsible for managing your treatment plan and care.
Registrar	A qualified doctor who is training to be a radiation oncologist. They are supervised by your radiation oncologist. You may see several registrars over the course of your treatment.
Radiation Therapist	A radiation therapist plans and delivers your radiation therapy. A team of radiation therapists operate the machinery that delivers treatment.
Radiation Oncology Nurse	A nurse who specialises in caring for people having Oncology radiation therapy. Tells you about what to expect from treatment such as the side effects, and how to look after yourself.
Dietitian	Advises you about food and nutrition during and after radiation therapy.
Speech Pathologist	Helps you to cope with side effects that may affect your speech, voice or swallowing.
Psychologist	Offers emotional support during and after your radiation therapy.
Physiotherapist	Helps you with physical problems that may develop because of cancer and its treatment. They may provide advice on different exercises, and ways to reduce pain.
Social Worker	Helps you connect with support services and may offer psychological support.
Indigenous Liaison Officer (ILO)	Provides emotional, cultural and social support to you and Liaison Officer (ILO) your family. Can also help staff to make sure they provide culturally sensitive health services. Can also help organise transport and accommodation.
Hospital Liaison Officer	Help patients and/or family members understand hospital processes and treatment.
Social Emotional Wellbeing (SEWB) Officer	Can offer emotional and social support



Write down any questions, worries or support needs you would like to check with your cancer care team.

ACKNOWLEDGEMENTS

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For further information see Smith et al (2019) A low literacy targeted talking book about radiation therapy for cancer: Development and acceptability. *Supportive Cancer Care*, 27(6) 2057-2067.

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This adapted book was redesigned in 2025 with supporting artwork by Craig Carson, Wakka Wakka/Cobble Cobble, Graphic Design by Colleen Lourenco, First Nations Cancer and Wellbeing Research Program Designer.

The 4Cs Project has been led by Professor Gail Garvey AM, and managed by Dr Lorraine Bell, Menzies School of Health Research.

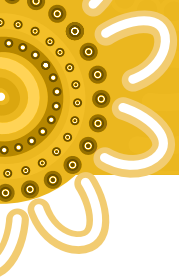
Please contact **Professor Gail Garvey AM** for further information about this book: www.public-health.uq.edu.au/research/fncwr



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The 4Cs Project is represented by the above artwork created by Casey Coolwell, the Aboriginal artist and graphic designer behind design agency CHABOO. Casey is a Quandamooka, Nunukul woman from Minjerribah with links to Eulo and the Biri people of Bowen.





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