

Central Coast Cancer Centre

Radiation Oncology Service

**Information about radiotherapy
for head & neck cancer**



All enquiries Phone: (02) 4320 9888 Fax: (02) 4320 9780

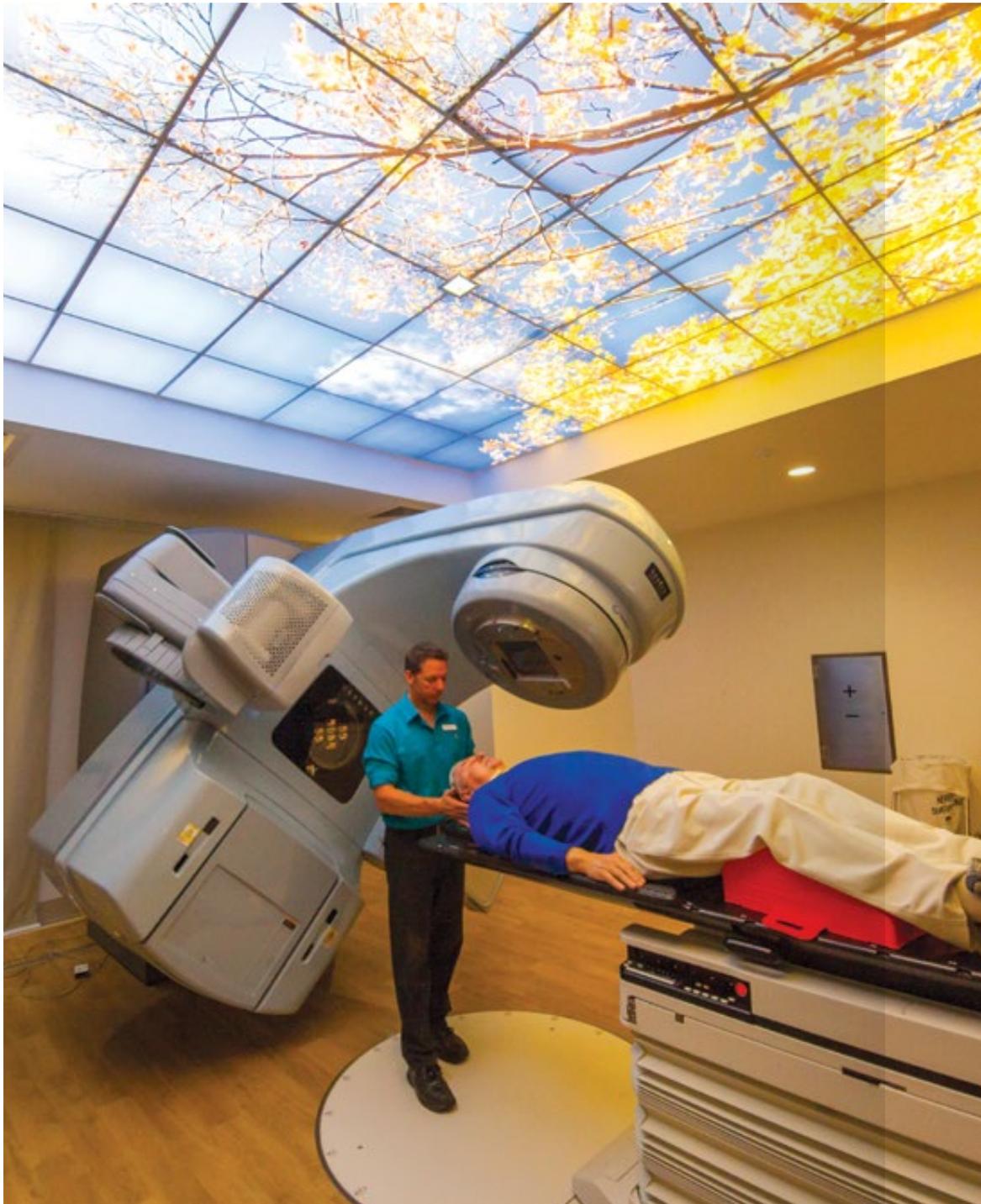


Health
Central Coast
Local Health District

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Introduction

The Central Coast Cancer Centre offers the latest technological advancements combined with comprehensive and supportive care for patients undergoing head and neck radiotherapy treatment. The service is supported by many health professionals including radiation oncologists, clinical nurse practitioners, dietitians, speech pathologists and a dental team.

This booklet should be read along with the 'radiotherapy information for patients, families & carers' booklet which contains information about our staff and the services available at the Central Coast Cancer Centre, including transport and parking information.

Specialist Appointment Information

Date:.....

Time:.....

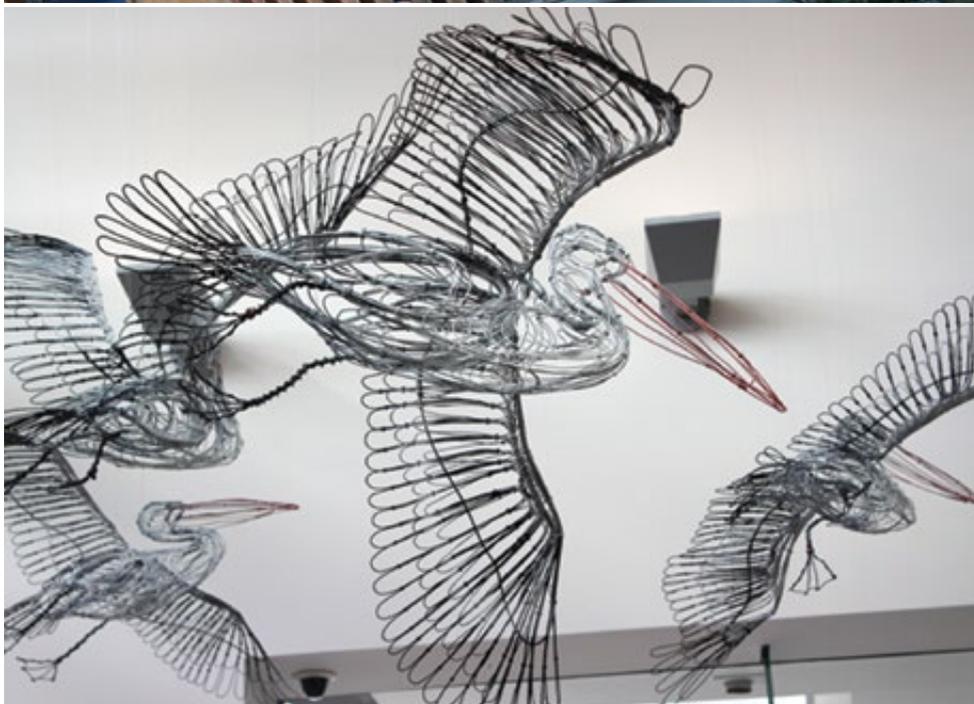
Location: Central Coast Cancer Centre, Gosford Hospital

Cancer Day Unit, Wyong Hospital

Radiation Oncologist:

Cancer Nurse Coordinator:.....





Initial appointment with the radiation oncologist

If radiotherapy has been recommend as part of a treatment plan, the radiation oncologist will explain:

- The expected benefits of radiotherapy treatment.
- The exact areas that will be targeted with radiotherapy.
- The number of daily treatments needed.
- The possible early and late side effects of treatment and how to prevent and manage these.
- What will happen at the radiotherapy planning session and during treatment.

If chemotherapy is recommended, a referral to a medical oncologist will be arranged to discuss chemotherapy and any potential side-effects.

Preparation for radiotherapy treatment

Before starting radiotherapy treatment, patients may need one or more of the following preparations:

Dental assessment

This identifies and treats existing tooth decay and/or gum disease prior to radiotherapy treatment. Some patients will need teeth removed prior to starting radiotherapy due to the high dose of radiation delivered to the jaw bone.



Fig 1. Nasogastric feeding tube inserted through the nose

Feeding tube

Some patients may benefit from a feeding tube to help maintain nutrition and avoid weight loss during and after treatment.

Dietitian review

A dietitian will assess nutrition prior to treatment as well as develop a plan to maintain weight and nutrition during and after treatment.

Speech pathology review

A speech pathologist will assess swallowing, speech, voice and mouth opening prior to, during and after radiotherapy.



Fig 2. PEG Feeding Tube inserted through the abdomen

Nursing review

A nurse will determine if any additional support services may help during treatment.

Smoking

It is extremely important that patients stop smoking as soon as possible. Smoking reduces the effectiveness of the radiotherapy treatment, and makes the **side effects, and recovery** more difficult.

The doctors and care co-ordinators can assist with options to help stop smoking, including details for the NSW smoking Quitline (www.icanquit.com.au)

Radiotherapy planning

The Radiation therapists use specialised equipment to ensure patients are in a stable and comfortable position for treatment. A customised thermo-plastic mask helps the patient maintain the same position each day for treatment and is made during the planning appointment.

The mask is made by warming a plastic mesh and moulding it to the shape of the face, head and neck. Patients are able to breathe and communicate through the mesh holes but are encouraged to alert staff if feeling claustrophobic.



Customised mask



Patient having a planning CT scan

Important preparation for the planning CT scan

It is recommended to drink several cups of water before and after the scan to help with body hydration.

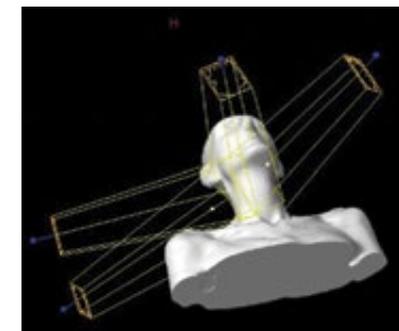
A dye called '**contrast**' is often needed to help the doctor see the tumour and nearby healthy tissue. If contrast is needed, additional instructions will be provided.

The radiation therapist will perform a CT scan which is later used by the radiation oncologist to create a personalised radiation treatment plan.

The planning appointment will take approximately 60 minutes and a further 20 minute wait is required for routine observation after contrast.

The radiation treatment plan ensures the radiation is delivered to the tumour while reducing the dose to normal tissue around it. This process often takes many days to check and approve prior to treatment commencing. The Central Coast Cancer Centre offers Intensity Modulated Radiotherapy (IMRT) and Volumetric Modulated Arc Therapy (VMAT) technology for suitable patients.

Nursing staff will discuss skin care during radiotherapy and provide creams to take home and use during treatment. The nursing staff will help to minimise and manage any side effects during radiotherapy.



Personalised radiation treatment plan created using the planning CT scan

Radiotherapy treatment

Patients will be positioned for treatment using the same specialised equipment used at the planning appointment including the custom made mask.

Some patients have chemotherapy administered before their radiotherapy treatment, which can all take place at the Central Coast Cancer Centre.

Each daily treatment takes approximately 10-20 minutes to complete, however we suggest allowing up to one hour each day including waiting times. The machines have scheduled maintenance fortnightly on Thursdays so appointment times may be changed on these days.

The radiation oncologist or medical registrar will see patients weekly to monitor treatment progress and answer any questions. This 'weekly treatment review' will be printed on an appointment sheet.



Patient on treatment with face mask.

Speech pathology and dietitian appointments are on Tuesdays and Thursdays and in between weekly doctor reviews. The Head and Neck Cancer Nurse Coordinator will remain in close contact to ensure patients and carers are well supported.

The radiation therapists or radiation oncology nursing staff can arrange extra medical reviews if the patient or carer has any concerns.

Follow up after radiotherapy treatment

Nurse follow-up

The radiotherapy nurses will review the patient one week after radiotherapy finishes. This can be done via a phone call if side effects from treatment are minor, or a more thorough review at the Cancer Centre if side effects persist.

Doctor follow-up

An appointment will be arranged for the patient to see the radiation oncologist after radiotherapy finishes. The doctor will assess recovery from any side effects and the gradual return to a normal routine. The doctor will also discuss longer term follow up arrangements which may involve the surgeon, radiation oncologist and/or the medical oncologist alternating for at least five years.

Side effects of radiotherapy

The radiation oncologist will explain the expected side effects depending on the dose and the area being treated.

Expected side effects during treatment

Tiredness

Tiredness is a common side effect with treatment and can persist for some months after treatment has finished. The level of tiredness varies between patients.

Dry mouth

Radiotherapy may affect the salivary glands which can cause a dry mouth or thick mucus during treatment. This can take several months after treatment to improve, however some patients may be left with permanent dryness. Please inform our team if this causes any concerns.

Sore mouth/throat

This is common with treatment and can continue for several weeks after treatment finishes. The nurses will discuss oral care and pain medication if needed.

Swallowing difficulty

The radiotherapy may cause difficulty with swallowing. The doctor and speech pathologist will assess this during treatment and help to manage this side effect.

Change of taste

Radiotherapy affects tastebuds in the mouth and throat. A metallic or cardboard - like taste is common. Taste changes may occur during treatment and can persist after finishing treatment.

Skin changes

Skin on the face and neck may become red, dry, darken in colour, blister, peel or crack. The nursing staff will provide advice on creams and dressings if skin changes occur. Written information is available to help with skin care instructions. All creams or ointments should be discussed with the doctor **before** use to avoid skin irritation.

Specific side effects that may occur for some treatment areas

Weight loss

Difficulty swallowing, mouth pain and changes to taste can all contribute to a lack of nutrition and weight loss. This needs to be carefully managed with the help of a dietitian.

Hair loss

Hair loss can be expected and is limited to the area of the body being treated.

Voice changes

Hoarseness and vocal fatigue can occur during treatment to the voice box.

Blocked nose, nasal crusting

Treatments to the nose area can cause a blocked nose, nasal crusting and minor bleeding. The doctor can prescribe treatments to help with symptoms if needed.

Blocked ears

Treatments near the ear can cause blocked ears or muffled sounds. These effects usually occur during treatment and can persist after completion of treatment.

Possible side effects after treatment

Persistent dry mouth

Saliva production can take months to recover. Some patients may be left with permanent dryness of the mouth or thick saliva. There are a range of oral care products available to help with this.

Dental problems

Teeth are prone to disease and cavities when the mouth is dry and no longer protected by saliva. It is important to visit the dentist regularly after radiotherapy is completed. Inform the dentist of

any radiotherapy and suggest they contact the radiation oncologist before extracting teeth.

Swallowing issues

Ongoing swallowing difficulties may persist after treatment. The speech pathologist will continue to review patients after treatment finishes and monitor speech and swallowing progress.

Hearing changes/blocked ears

Some patients may develop blocked ears or hearing loss after treatment. It is important to discuss this with your doctor.

Cataracts

Radiotherapy near the eyes may increase the risk of developing cataracts (clouding of the lens in the eye). Please discuss any vision problems with your doctor.

Lymphoedema

The area under the chin can become firm and swollen, similar to a double chin. This is a common side effect. Please inform your health care team.

Thyroid problems

Radiotherapy to the neck can cause the thyroid gland to become underactive. GPs should monitor thyroid function yearly as part of a patient's routine health check.

Head and neck cancer supportive care

Cancer Nurse Coordinator

A dedicated Cancer Nurse Coordinator is available for patients having treatment to their head and neck. The coordinator will be a central point of contact and help with:

- Coordination of treatment appointments.
- Information about cancer, treatments and services available.
- Communication between GPs, specialists and allied health professionals.
- Access to home care, community nursing, counselling and financial support services.

Dietitian

Patients having head and neck treatment will see a dietitian for help with:

- Assessing nutrition status.
- Managing side effects to help maintain weight.
- Nutrition supplements or tube feeding if these are needed.

Speech pathology

Head and neck patients will see a speech pathologist to help with:

- Assessing and managing swallowing for safe eating and drinking.
- Managing side effects that may make it difficult to eat (e.g. mouth ulcers, painful swallowing, dry mouth).
- Communication if changes to speech and voice are noticed.

Some useful online resources include:

Quit smoking
www.icanquit.com.au

Head and neck cancer institute
www.beyondfive.org.au



Central Coast Cancer Centre Site Map



Thank you for your patience and understanding as we transform Gosford Hospital

Central Coast Cancer Centre

General enquires

Phone: (02) 4320 9888

Doctor referrals

Fax: (02) 4320 9780

www.cclhd.health.nsw.gov.au/ourservices/CCCS