

# **Bowel Cancer: Radiation therapy treatment**

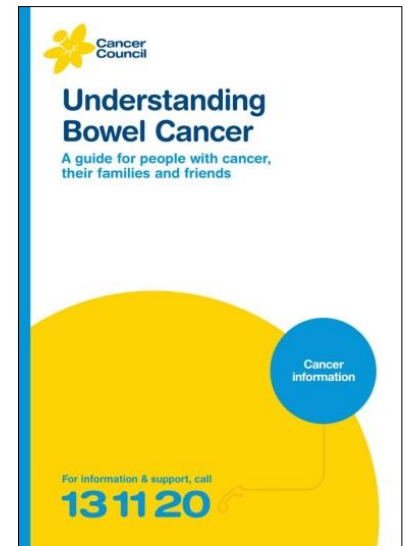
**Information for patients,  
families and friends**

## About this booklet

This booklet is designed to give you information about radiation therapy treatment for bowel cancer and what to expect.

If you have any questions please speak to your Radiation Oncologist or the other helpful staff at Alfred Health Radiation Oncology during your next visit.

The Cancer Council of Victoria produces an easy to read bowel cancer information booklet. Copies of the booklet can be found at Alfred Health Radiation Oncology or go to their website [www.cancervic.org.au](http://www.cancervic.org.au).



## What is bowel cancer?

Bowel cancer occurs in any part of the large bowel, mainly in the colon and rectum. It is the second most common cancer in Australia, with 14,000 people diagnosed every year.

The most common treatment for bowel cancer is surgery. Radiation therapy is often given in combination with surgery, and may include chemotherapy depending on your situation. Your Radiation Oncologist will discuss these options with you.

## **Side effects**

Below is a list of the most common side effects associated with radiation therapy to the bowel. Side effects may not be limited to the following, so if you have any concerns please speak to your Radiation Oncologist.

Side effects may also relate to the addition of chemotherapy or surgery in your treatment plan.

Side effects can be divided into two groups:

- Acute – Those which happen during treatment.
- Late – Those which happen after treatment is completed.

## **Acute side effects**

### **Tiredness**

Most people experience tiredness during radiation therapy treatment. This is usually mild and begins 2-3 weeks after treatment starts and continues 2-6 weeks after treatment is finished. If you are having chemotherapy it is likely you will experience more tiredness, which will last longer after your treatment is finished.

Tiredness is not normally debilitating and in itself should not affect your daily activities or the ability to drive. However, you may wish to go to bed earlier or take a rest in the afternoon. We strongly encourage you to continue your regular activities like walking or light exercises.

## **Bladder irritation**

When pelvic radiation is given, the bladder and urethra may also become irritated such that you might notice urination becomes more frequent, especially at night. Occasionally a mild burning sensation when passing urine may be experienced. Appropriate medications may be given by your Radiation Oncologist to decrease this problem.

## **Redness of the skin**

You may notice some redness of the skin in the area being treated 2-3 weeks after the treatment has started. It may become more red towards the end of the treatment and can include temporary itching and discomfort.

This reaction in the region of the buttocks and peri-anal area may be more prominent. You will receive instructions from your nurse who will supply creams and local dressings as necessary.

## **Bowel irritation**

When the pelvic area is treated, there can be a problem with diarrhoea and abdominal cramping. These symptoms are typically improved by appropriate diet and medications as required. A dietician can review you during your radiation therapy treatment if required.

Radiation therapy to the bowel may cause the following problems:

- Urgency – A sudden need to open your bowels.
- Tenesmus – A feeling of repeatedly needing to open the bowels.
- Incontinence – Leakage/soiling.
- Flatus – Wind.
- Passing blood or mucus when you open your bowels.

These symptoms should begin to improve once the radiation therapy has finished. It may take a few months for the bowel to settle down. Most patients have a permanent change to their bowel habit which is usually mild and will be in part determined by the type of surgery performed.

## **Hair loss**

Radiation therapy will cause hair loss in the area being treated often two to three weeks after treatment starts. The hair should begin to grow back again within a few weeks to months of the treatment finishing but hair loss can be permanent for some people.

## **Contraception**

### **Male**

If you are having radiation therapy treatment, it is safe for you to have sexual intercourse. As you may produce sperm for some time during and after radiation therapy you will need to avoid fathering a child. Some doctors recommend using contraception for six months and others for up to two years after treatment. Sperm produced during or after radiation therapy may still be fertile but damaged, and could cause abnormalities in a child conceived during or soon after pelvic radiation therapy.

### **Female**

Radiation therapy may cause an early menopause in pre-menopausal patients and if you are no longer producing eggs you will not be able to become pregnant. It usually takes about three months or longer after the radiation therapy finishes to stop producing eggs. During this time it is important to consider contraception.

## **Late side effects**

### **Skin**

In some cases the skin in this region may appear darker in colour after radiation therapy treatment. Your skin may also become dry, thin, lose its elasticity or may scar. These changes can take many months to resolve and in some cases your skin may never return to its original colour or feel.

### **Bowel**

Faecal incontinence (inability to control bowel motions) is a potential side effect of radiation therapy to the pelvis. The possibility of this side effect depends on the site of tumour, the type of radiation therapy and surgery. The risk is higher with a tumour close to the anal sphincter and with shorter course radiation therapy.

Chronic diarrhoea or a change in bowel habit may occur.

Rare delayed complications of radiation therapy can include bowel obstruction (part or complete blockage of bowel), perforation (hole or tear of bowel) or adhesions (tissues and organs sticking together), which may require management and treatment by your surgeon. This risk is decreased with modern radiation therapy treatment techniques.

### **Fertility**

Radiation therapy may affect your fertility and can cause infertility.

#### **Male**

If there is a wish to potentially father children you may request to be referred to an andrology or fertility specialist. This must be discussed before commencement of radiation therapy to arrange referral. For some men, it may be possible for their sperm to be collected before the treatment starts (sperm banking). The sperm can then be stored for potential use in the future.

## **Female**

After pelvic radiation therapy, for pre-menopausal patients, you will not be able to become pregnant. Before treatment starts some women may wish to see a fertility specialist to discuss the possibility of storing eggs or embryos (fertilised eggs). Please discuss this before your radiation therapy starts with your Radiation Oncologist.

Other side effects of radiation therapy to the pelvis include: vaginal discomfort with intercourse (dyspareunia), vaginal dryness, and menopause.

These possibilities will be discussed and specific guidelines given to you during and after radiation therapy by your Radiation Oncologist and nurse.

## Alfred Health

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## Further information:

### The Alfred

[alfredhealth.org.au](http://alfredhealth.org.au)

### Alfred Health Radiation Oncology

[alfredhealth.ro](http://alfredhealth.ro)

### Latrobe Regional Hospital

[lrh.com.au](http://lrh.com.au)

### Cancer Council Victoria

[cancervic.org.au](http://cancervic.org.au)

If you would like to provide feedback or request a copy of this information in a different format, contact us at [patient.information@alfred.org.au](mailto:patient.information@alfred.org.au)



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Developed & reviewed  
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