



Discharge information (Gynaecology)

Your diagnosis

Your treatment

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You have now been discharged from further arranged follow-up by the clinical oncology team at The Christie. Occasionally after discharge from follow-up, symptoms can develop that you may find worrying. Very occasionally these symptoms are related to the cancer or the cancer treatment. This leaflet is to help you know what to look out for and who to contact if needed.

Possible side effects of the treatment

Following pelvic radiotherapy or chemo-radiotherapy some patients can develop persistent bowel or bladder symptoms as a consequence of their treatment. These can develop months or years after radiotherapy, but severe side effects only occur in a small number of patients.

Some patients develop treatment effects in the vagina area that may affect their sex life. The impact of these effects can vary from person to person.

After pelvic radiotherapy and when chemotherapy is given at the same time as radiotherapy, there is a risk of thinning of the bones (osteoporosis) and sometimes hairline cracks (stress fractures) can occur in the pelvic bones or backbones. These may cause pain and can be seen on scans.

What can you do?

Bowel symptoms can often be helped by simple measures as cutting down on fruit and vegetables and eating a diet that is lower in fibre. Some patients find it helpful to take Fybogel or Normacol which act to regulate and normalise their bowel habit. Other people sometimes use anti-diarrhoea tablets to help with controlling their bowels such as loperamide (Imodium[®]).

Urinary symptoms can be made worse by drinking caffeine and you may be helped by switching to decaffeinated drinks. In addition many women find their urinary symptoms are improved by losing weight.

Pelvic floor exercises can be helpful if you have a tendency to incontinence when you laugh or sneeze. Tablets such as Oxybutinin (which your GP can prescribe) may help if you find you have to rush to get to the toilet in time. More information about urinary incontinence and what might help is available on NHS Choices <http://www.nhs.uk/conditions>

Hormone replacement helps to strengthen bones after pelvic radiotherapy when the treatment has caused the menopause. Not all patients can take hormone replacement therapy (HRT), so it is important that you keep up your calcium intake from dairy products such as milk and cheese) and maintain adequate vitamin D levels (eggs and oily fish are good sources as is sunlight). Weight bearing physical exercise, for example walking, is also very important for maintaining bone strength.

Many of the effects of radiotherapy can be made worse by a lack of oxygen getting to the parts of the body treated by radiotherapy. Stopping smoking is the best way for you to increase the oxygen getting to your tissues and this may help prevent or lessen side effects. Most people who smoke are much more likely to stop smoking if they have support. Your GP or local pharmacy should be able to direct you to your local stop smoking service.

When should you contact your GP?

It is important to note that most symptoms you may experience, including those listed here, will be unrelated to the cancer or the treatment. However, if you develop these persistent problems lasting longer than three weeks, then you should see your GP who may refer you back to The Christie for a discussion or for further tests.

- Having frequent sudden urges to empty your bowels which interfere with your quality of life.
- Having difficulty controlling your bowels.
- Persistent lower back or pelvic pain which is getting worse and especially if it is waking you at night.
- Bleeding from your vagina.

For more information, see the Macmillan booklet 'Pelvic Radiotherapy in Women: Possible Late Effects'.

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

We try to ensure that all our information given to patients is accurate, balanced and based on the most up-to-date scientific evidence. If you would like to have details about the sources used please contact **patient.information@christie.nhs.uk**

For more information about The Christie and our services, please visit **www.christie.nhs.uk** or visit the cancer information centres at Withington, Oldham or Salford.

Contact The Christie Hotline for
urgent support and specialist advice

**The Christie Hotline:
0161 446 3658**

Open 24 hours a day, 7 days a week

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