



Radiotherapy to the spine and para-spinal region for sarcoma

A guide for patients and their carers



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Christie website

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.

Introduction

This booklet has been written for patients who are about to receive radiotherapy treatment to their spine or adjacent tissues for soft tissue sarcoma or bone sarcoma. The booklet describes:

- What is radiotherapy?
- How your treatment is planned and delivered
- The side effects that you may experience during and after treatment and how best to cope with them.

We understand that this can be a daunting time for patients. You may feel that you have been given lots of information in a short period of time. We hope that this booklet answers some of your questions. If you still have questions or concerns, please let your doctor, nurse or radiographer know. We are here for you.

The Christie is a specialised centre for radiotherapy and patients come for treatments that are not available at general hospitals.

You may have heard about radiotherapy from people you know or from patients. Their information may not apply to you.



Please note:

Mobile phones can interfere with the treatment equipment. Please look out for signs letting you know if it is safe to use your mobile phone. If you do have one with you, you may need to turn it off.

What is radiotherapy?

Radiotherapy uses exact, carefully measured doses of radiation to treat diseases. It is often given in small doses, over a specified period of days or weeks. It is a quick and painless procedure. High energy radiation beams are used to treat where the tumour was/is, plus a small surrounding area. Radiotherapy can either be given before or after surgery. In both situations radiotherapy is being used to try and kill off microscopic cancer cells around the tumour margin which if left untreated could cause the sarcoma to regrow. If surgery is not possible, radiotherapy may be given on its own to aim to control the disease.

External beam radiotherapy can be delivered in many different ways using high energy radiation beams. These can either be photons, electrons or protons. Photons and electrons are delivered from a machine called a linear accelerator whilst protons are delivered from a machine called a cyclotron.

From mid 2018 The Christie NHS Foundation Trust will have a proton beam therapy (PBT) service. However, it is not appropriate to treat all kinds of cancers with proton beam therapy. This will be decided by your oncologist and discussed with you.

If it is appropriate to treat you with protons, there may be occasions when part of your treatment may be given with photons. This will be discussed during the consent process.

The radiographers treating you are highly trained professionals. They will be able to answer any questions or concerns you may have.

Radiotherapy should not be confused with chemotherapy, which uses drugs to treat cancer. In some situations, your doctor may recommend both radiotherapy and chemotherapy.

How does radiotherapy work?

Our bodies are made up of cells and all cells are able to divide. If radiation hits a cell that is dividing, the cell will be damaged. Cancer cells are much less able than normal cells to repair the damage, so more of the cancer cells will be destroyed. Radiotherapy is planned to treat as little of the normal body tissue as possible and treatments are usually extended over a period of weeks. This allows the normal cells to recover from the effects of the radiation. The number of treatments you need will vary.

When will radiotherapy begin?

The specialist doctor who is in charge of your treatment is a clinical oncologist. A team of doctors, radiographers and nurses will care for you and a named consultant will be responsible for your treatment.

In choosing your treatment, your doctor at The Christie has carefully considered the nature of your illness and your particular needs with regard to your treatment plan. The exact schedule will be decided by your doctor and confirmed on your first visit to the radiotherapy department.

When you attend for your initial radiotherapy planning appointment the radiographers will be able to tell you when your treatment is planned to start. As everybody's treatment varies the amount of time needed to plan the treatment varies.

Agreeing to treatment

Consent to treatment

The doctors, nurses and specialist radiographers will give you some written information to support what they have said about your treatment. At the time your treatment is being planned, a member of your treating team will discuss the intended benefits and possible side effects with you.

We will ask you to sign a consent form agreeing to accept the treatment that you are being offered. The basis of the agreement is that you have had The Christie's written description of the proposed treatment and that you have been given an opportunity to discuss any concerns. You are entitled to request a second opinion from another doctor who specialises in treating this cancer. You can ask your own consultant or your GP to refer you. Your consent may be withdrawn at any time before or during this treatment. Should you decide to withdraw your consent then a member of your treating team will discuss the possible consequences with you.

Radiation can be harmful to the unborn child. It is important to let the radiographers know if you have missed a period, or suspect that you might be pregnant before you are exposed to any radiation.

What are the benefits of this treatment?

Radiotherapy works by damaging cancer cells while causing as little damage as possible to normal cells and can be given before, after or instead of surgery. The benefits of radiotherapy vary from one person to another depending on the sort of illness.

The aims of treatment may include an attempt to:

- reduce the chances of the cancer coming back after surgery (if applicable) and improve cure
- shrink the tumour which may slow down its progress and give relief from troublesome symptoms.

Are there any alternatives to this treatment?

There may be other treatment options available but the doctor at your local hospital will have advised you about the possible options for you before referring you to The Christie. Your Christie consultant will be happy to discuss any questions or concerns you may still have.

What will happen if I do not have this treatment?

There is a risk that your cancer may continue to grow and your symptoms may get worse. You can discuss what to do next with your doctor.

Planning of treatment

Before treatment is given, we need to calculate the best way of treating you. This will involve several visits to the radiotherapy planning department.

Patients that have had surgery before radiotherapy or proton beam therapy must have fully healed scars before any form of radiotherapy can be given. It is important patients continue their post-operative physiotherapy or exercises to ensure they are able to lie in the most favourable position for their tumour site. This may mean delaying the planning of treatment. It may also mean we are unable to offer proton beam therapy (PBT) if a safe and comfortable position cannot be achieved.

Radiotherapy planning CT scan

The location of the tumour will determine your treatment position. This will be either lying on your back or lying on your front. Once the most appropriate position has been determined, this will be the same for both planning and treatment. We may also need to make immobilisation aids to help maintain the correct position throughout planning and treatment. If these are required they could be in the form of a mould customised to the size and shape of your head, neck and shoulders or a bag, similar to a large bean bag that is then moulded to your size and shape.

The need for either of these is determined by which part of the spine or para-spinal area we are treating. Your clinical team will discuss this with you if applicable. They will also discuss with you the use of tattoos. These are very small permanent ink spots put into your skin that the radiographers will use to ensure you are in the correct position for planning and treatment on a daily basis. These marks are permanent and are more reliable than temporary marks that can wash off.

To help with the planning of your treatment, you will have a CT scan of the exact area to be treated with dye (contrast) injected into a vein. The scans which are undertaken to plan your radiotherapy are solely aimed to give enough information to plan the radiotherapy accurately. These scans are not diagnostic and therefore do not give sufficient information to assess the status of your cancer or any other abnormalities

Where proton beam therapy treatment is appropriate you may be required to have a further CT and MRI planning scan.

There is nothing to feel or see during the planning scans, but you may be aware of slight movements of the bed you are lying on.

Once you have had your scan, you will be given a planned date and time of when your radiotherapy will begin. Occasionally, this date will be changed if the planning cannot be completed in time. You will be contacted directly by the radiotherapy department if this is the case.

What happens during treatment?

Radiotherapy treatment

The radiotherapy treatment is daily, Monday to Friday. Appointments could be in the morning, afternoon or evening. On the day of your first treatment, you will come to the radiotherapy department. If you are inpatient and need assistance getting to the department a member of hospital staff may collect you from your ward and escort you to the department. On the treatment unit the radiotherapy support worker will help you plan the appointments for your treatment.

The radiographers will have the details of your treatment which the doctor has carefully planned. They will explain to you exactly what will happen. The Christie is a training hospital, so you may meet male and female students in the radiotherapy department who may be involved in the delivery of your treatment. If you have any objections let the radiographers know.

The radiographers will have a brief chat with you and discuss the treatment procedure and reiterate potential side effects. They will also check whether you are still happy to go ahead with your treatment. This is an opportunity to ask any remaining questions you may still have.

The radiographers will take you into the treatment room and ask you to remove or loosen any clothing that covers the area being treated. They will assist you on to the treatment

bed. For each session you will be lying on the treatment bed in the same position as your radiotherapy planning scan. The radiographers will then adjust both the treatment bed and your position so that you are in the correct position for the treatment. They will try to make you as comfortable as possible as you will be asked to keep still for the duration of the treatment.

The radiotherapy machines are quite large and you may find them a little frightening to begin with, but there is no need to worry – the treatment is painless. Each session may take between 15 and 30 minutes, dependent on the area being treated, but the actual treatment only lasts a few minutes. The radiographers operate the machines from outside the room so when all the adjustments have been made and you are in exactly the right position, the radiographers will make sure you are alright and then leave the room and switch the machine on. There is nothing to feel and nothing to see. The machines make a buzzing noise when they are giving treatment.

During your treatment, the radiographers will need to take images of the area you are having treated. This will be done at the same time as your treatment; you probably won't even notice the images have been taken. These images are to check that you are in the correct position and not to check how the tumour is responding to treatment.

Please do not feel abandoned; cameras inside the room give the radiographers a clear view of you at the control desk. They will be watching you all the time. If you feel you need to cough or sneeze, the radiographers will tell you beforehand how to let them know this. They will switch off the machine and come in immediately.

Once your treatment has finished they will help you off the bed. You are then able to return home, to your ward or where you are staying during proton therapy treatment.

It is very important that you do not miss treatments as this may make your treatment less effective. If you feel you are unable to attend for any reason please telephone the staff on your treatment machine and discuss the problem with a radiographer. Call the radiotherapy department on 0161 446 3485.

There are usually no treatments given on Saturdays and Sundays and this is taken into account when your treatment is planned. Treatment is given on bank holidays with the exception of Christmas Day, Boxing Day and New Year's Day. However, we may treat on Saturdays or Sundays either side of this period to compensate for these bank holidays. Please check with the radiographers treating you if there is a bank holiday during the course of your treatment.

You will usually be treated on the same machine throughout the course of your treatment. However, there may be occasions you are treated on a different machine due to frequent servicing or machine breakdowns. Do not worry; this will not compromise your treatment.

If you feel particularly anxious or you are having difficulties with having radiotherapy, please speak to the radiographers. There may be things that they can suggest that might help such as referring you for support to the CALMS team who provide complementary therapies.

Some questions about treatment

Will it hurt?

No, the treatment does not hurt. However you may find the treatment position uncomfortable and may require simple pain relief. If you already take pain killers, continue to take these as prescribed. It is advisable to bring these with you to each appointment.

Will I lose my hair?

You may lose body hair in the area being treated and can sometimes begin during and after treatment. Hair loss may be temporary or permanent. Your radiotherapy doctor will advise you if the lost hair is unlikely to regrow.

Is it safe?

Radiation used in medical treatment is given in controlled, carefully measured doses. The aim is to include all tissues that could possibly contain cancer cells whilst minimising the dose to the normal tissue.

Will I be radioactive?

No. Patients treated by external beam radiotherapy do not become radioactive. The radiation does not stay in your body after treatment, so you cannot do anyone else any harm. It is safe for you to mix with other people including children and pregnant women and to have visitors if you are on the ward.

I already have problems with my health. Will radiotherapy make them worse?

Not usually. The treatment may make you feel more tired than normal. Please tell your treatment team about any existing medical conditions and continue with any medication that you may be taking unless your doctor or nurse tells you otherwise. Ask your Christie doctor if you are worried about any other health problems.

Can I come for treatment at any time of the day?

If you are having treatment as an outpatient, the radiographers will give you an appointment time for the first treatment when you attend for your planning session. You will be asked about a preferred treatment time. Whilst we will try to accommodate patient's preferences, there may be times this is not possible.

Please also be aware there may be days your appointments will be scheduled around your consults clinics and for certain patients after 5pm. Please try and be as flexible as possible and give priority to your treatment sessions over general appointments. The time you prefer may not be available at the start of your treatment because of the large patient numbers on the treatment unit.

If you need a specific time with valid reasons, please give the treating team at least 48 hours' notice. The time we give you may vary half an hour either way each day due to 12 emergencies and so on. Please check your appointment time for the following day before you leave, in case of any changes.

Appointments will be made for you to meet your consultant or one of the review team weekly to check that you are coping with the side effects of treatment. We will give you a morning or afternoon appointment to fit in with your consultant's clinic.

If you are an inpatient, the treatment team will send a care assistant for you when they have a free slot. If you are going on weekend leave, please let the staff know and they will do their best to treat you before lunch.

Will I be treated as an outpatient or an inpatient?

You will usually have your treatment as an outpatient. Some people continue to work during part of their treatment. However, after daily travel and treatment, you may feel tired and need to rest.

Your doctor will have discussed with you about travelling daily for your treatment as an outpatient. However, if you do become unwell during your treatment you may need to be admitted as an inpatient to support you through your radiotherapy.

What happens if I need ambulance transport to and from the hospital?

Many patients are able to bring themselves or can ask a friend or relative to help them out. If you think you may need ambulance transport, please discuss this with a radiotherapy support worker or radiographer on your first visit to the radiotherapy department. Ambulance transport can be arranged subject to eligibility criteria based on medical need. There also needs to be a medical need for you to bring an escort on hospital transport.

There can be delays for some time either side of your appointment because of the high demand for transport. Please take this into account when you are deciding whether to use ambulance transport or not.

Contact the transport liaison office at The Christie directly on **0161 446 8114 or 8143** for advice and bookings (Monday to Friday, 8.00am – 6.00pm).

Prescriptions

Prescriptions from The Christie pharmacy are free for NHS patients. You will need an exemption certificate to get free prescriptions from a community pharmacy. Exemption certificates are available from the pharmacy at The Christie and from your GP.

Side effects of treatment

There will be some side effects which gradually appear during your course of radiotherapy, although these will vary from person to person, depending on which part of your body is treated, and on the number of treatments you have. Even people who have had very similar treatments can have different side effects. Your radiotherapy doctor will discuss this fully with you. There are side effects that occur during treatment, some happen soon after treatment and some can occur months or years after radiotherapy.

Most people notice the side effects during the second half of their course of treatment. These will continue after you have finished your treatment, but they should gradually fade by 4 to 6 weeks after treatment. There is a possibility of late and/or permanent side effects from radiotherapy that may develop after radiotherapy has completed.

During your course of radiotherapy, one of the doctors or radiographers on the team looking after you will see you regularly to assess how you are managing with side effects from treatment.

Skin reaction

You may notice the skin in the area being treated becoming red, darker, flaky and itchy during radiotherapy treatment. This is a normal reaction. The extent of a skin reaction in the

treatment area will vary for each person depending on the area being treated and the type of treatment you have. You may notice that your skin in the area being treated becomes more sensitive and can feel tighter than usual and warm to the touch.

Some patients, towards the end and just after treatment, may experience peeling of the skin and 'weeping' which can be very sore and require dressings for a few weeks to help with the healing process. This will be assessed by the radiographers and your treating team, who will provide support with this and regular skin assessment, until the area is fully healed. Patients who have proton beam therapy are likely to have more intense skin reactions.

The radiographers and your treating team will advise you how to look after your skin during radiotherapy and whilst you have a radiotherapy skin reaction. There is a Christie information leaflet which you may find helpful 'Skin care during and after your radiotherapy treatment'. This will be provided by your treating team or can be accessed via the Christie information centre or the patient information section of the Christie website.

Tiredness

Tiredness is one of the most common side effects of radiotherapy treatment. Some people describe feelings of extreme fatigue, although some continue to work and carry out busy lives as normal. You can help yourself by taking time to rest and relax. Do not be afraid of asking family and friends for help. Some patients find that it helps to have a short rest each day after having their treatment. However, it is beneficial to take gentle exercise as well as taking rest. There is a Christie booklet demonstrating a simple exercise programme. Please ask staff for a copy.

Hair loss or hair thinning

You will only lose hair in the area being treated. You may experience hair loss or thinning of pubic hair approximately 2-3 weeks into treatment. This loss may be temporary or permanent. Your radiotherapy doctor will advise you if the lost hair is unlikely to regrow.

Sore throat

If you are having treatment to the upper or mid back, you may develop a sore throat, discomfort swallowing or a dry cough. These symptoms can usually be treated with medication which your team can prescribe.

Appetite

It is very important to keep your weight stable before and during the treatment. Try to eat small frequent meals or snacks throughout the day. Ask the radiotherapy or nursing staff for a copy of 'Eating: help yourself' which has detailed information about coping with problems such as difficulty in swallowing, nausea and lack of appetite. Make sure you drink plenty of fluids.

You may need nutritional supplement drinks if you are losing weight or you are not eating very well. Please speak to the radiographers, nurses or Christie doctor if you feel you are losing weight. Ask for a copy of the 'Nutritional products' booklet for ideas. Nutritional supplement drinks are available on prescription from your doctor.

Back stiffness

If you have had stabilisation rods and screws in your back prior to treatment you may experience pain and stiffness in the area during treatment.

Nausea & vomiting

Occasionally some people may have feelings of sickness (nausea). This can usually be effectively treated by anti-sickness medication which can be prescribed by a member of your team.

Bladder or bowel changes

If you are having treatment to your lower spine/para-spinal area you may experience a change in bowel habits. This includes a sensation of wanting to open your bowels without passing a motion, increased bowel gas (flatus), loose or more frequent bowel motions and diarrhoea.

You may also experience the need to pass urine more frequently and a stinging sensation when passing urine. If you notice any changes to your bowel or bladder functions please tell a member of your treating team.

Late or permanent effects of treatment

It is possible for some types of reaction to occur months or years after the treatment has finished. Although this is less common these days because of improvements in treatment, the degree and frequency depends upon the type of treatment, dose of radiotherapy and the particular site treated. These late effects are the hardest to predict and unfortunately, when they do occur, they are permanent. Your doctor at The Christie will discuss any possible late effects with you as part of the consent process. These possible effects may include:

Back stiffness and pain

If you have had to have stabilisation rods and screws in your back prior to treatment, the area treated may become more stiff and painful after treatment. This may be ongoing for many months.

Even if you have not had any surgery prior to radiotherapy or proton beam therapy, your spine can also be quite painful for a prolonged time after treatment. This can be around 18 months and is partly because of the damage from the tumour and partly from the swelling and inflammation caused by the treatment as it is working. This could continue for years after treatment.

Wound complications

There are potential benefits of giving radiotherapy before an operation. However, there can be an increased risk of wound complications when any form of radiotherapy is given before surgery. This will be discussed with you by the treating team.

Long term bowel and bladder changes

Patients who have tumours in the very base of the spine (sacrum) may have a long term risk of altered bowel and bladder function months or years after treatment completes that requires medication to control symptoms. These symptoms can vary from mild diarrhoea to bleeding from the bowel. In some cases these late effects may be permanent and require subsequent surgery.

Fibrosis

Some patients may experience long term fibrosis or thickening of the muscle and tissue in the treated area. The skin in this area may feel 'leathery' due to a loss of elasticity and suppleness. Good skin care, the use of water based moisturisers and sun avoidance, can minimise these effects. However, flexibility and mobility may be reduced as a result of treatment.

Fracture and nerve damage

There is a small risk that the bones in the treated area will be at increased risk of fracture and there may be problems with healing. This is more likely in patients with sarcoma arising in the bone and those patients having very high dose radiotherapy. Patients may already have pain from their sarcoma both in the bone and pressing on nerves. After therapy this type of pain may increase during and immediately after treatment. This bony or nerve pain may persist for months to years.

Infertility

Depending on the location of the tumour, if you are having treatment to the lower back it can cause infertility which is permanent. If infertility is a possibility, your team will discuss this with you in more detail.

Second malignancy

The use of radiotherapy does carry a small risk of inducing a new, different cancer in the treated area. This is something which may happen many years later, but is a small risk for most patients. If you have any concerns about this, please discuss with your medical team.

Support

This booklet deals with the physical aspects of your treatment, but your emotional wellbeing and that of your family is just as important. Having treatment can be deeply distressing for some patients. Within the radiotherapy department there will be access and support from your specialist nurse, the information centre, the treatment radiographers and your radiotherapy doctor. However, if you feel you require further medical or emotional support, you

can be referred to a variety of health professionals who can help with any worries or difficulties you may be having.

All the staff are here to make sure your treatment goes as smoothly as possible and to support you through this difficult period. We will try to help with any questions or problems you may have.

Aftercare

The side effects you have experienced will continue after treatment has finished. It is common to experience a worsening of these for a couple of weeks after treatment completes.

If you have any queries about side effects in between completing your treatment and the time of your first follow up appointment you can ring The Christie Hotline (24hrs/ day) or one of your specialist team during normal working hours Monday to Friday.

The expected side effects will also be communicated to your local team and regular follow ups and scans will be arranged.

For patients having proton beam therapy we will be asking you to return to The Christie regularly for us to hear about your side effects as well as asking your local team to report all side effects to us on a regular basis. You will also be asked to have regular X-rays and scans at your local hospital to let us know how you are getting on over the years.

Other information

You may have particular queries that are not answered here. Please do not hesitate to ask the staff.

Patients having proton beam therapy who are travelling from outside of the area will be given additional information on the local area.

Relatives and carers

Please share this booklet with your family and friends. It is important that they feel well-informed and understand what is happening. Families and carers can have a role in helping you. There are also additional information resources on radiotherapy and proton beam therapy. Please ask your doctor, a radiographer or the ward staff.

Inpatients should be able to go home as soon as their course of treatment is finished, or very shortly afterwards.

Appointments

Once you are having treatment, if you have any problems with your appointment time, please contact the radiotherapy department on **0161 446 3485**. It is helpful if you can quote your hospital number – it will be on your appointment card or letter.

If you change your address, telephone number, GP or emergency contact, please let a member of staff know your updated details.

Car parking

For parking at the main Withington site, please check the website (www.christie.nhs.uk) for the latest details, or ask at the information centre for a copy of the leaflet 'Travelling

and car parking for patients and patient's visitors to The Christie'.

Useful contact information

Radiotherapy (department 39):

0161 446 3485

Proton Beam Therapy Centre (department 22):

0161 918 2300

Sarcoma Secretary:

0161 446 8323

Sarcoma Clinical Nurse Specialists:

0161 918 2196

The Christie Hotline:

0161 446 3658

Macmillan Cancer Support

This is a national charity which runs a cancer information service. The cancer support service freephone number is **0808 808 00 00** (Monday to Friday, 9am – 8pm). If you are hard of hearing, use the textphone **0808 808 0121**.

If you are a non-English speaker, interpreters are available. Specially trained cancer nurses can give you information on all aspects of cancer and its treatment. Information and advice about finance and benefits are also available.

Macmillan Cancer Support publishes booklets which are free to patients, their families and carers. You can get a copy by ringing the freephone number or by visiting their website: **www.macmillan.org.uk**

Information is available on cancer treatments – such as 'Understanding radiotherapy' and 'Understanding

chemotherapy'. There are also booklets on living with cancer – some of these are listed below:

- Talking about your cancer
- Talking to children and teenagers when an adult has cancer
- Cancer and complementary therapies
- Travel and cancer

The cancer information centres have a full range of booklets free to patients and their relatives or carers. There are information centres at The Christie at Withington, Salford and Oldham.

Sarcoma UK

A website and newsletter offering further links and advice to patients and their families

Email: supportline@sarcoma.org.uk

Website: www.sarcoma.org.uk

Sarcoma UK support line: **0808 801 0401**

Cancer information in your language

If English is not your first language, you can speak to a nurse at Cancer Research UK through a qualified interpreter. The service is free and over 170 languages are available on **0808 800 4040**.

Christie information

The Christie produces a range of patient information booklets and DVDs. Some of these are listed below:

Booklets are free to patients coming to The Christie and are available from the cancer information centre. If you are an inpatient and would like a copy please ask the ward staff.

If you are an outpatient please ask your nurse, doctor or radiographer.

Short films can be viewed on The Christie website at www.christie.nhs.uk under 'patient information' or you can borrow it in DVD format to watch at home. Ask the staff on the ward, in outpatients or in radiotherapy for copies. Available in English, Urdu, Bengali, Polish and Punjabi.

Where to get help: services for people with cancer

This provides sources of help when you have cancer, where to go for financial help, palliative care and cancer support groups.

Eating: Help yourself

This gives advice on eating problems when you don't feel well and you are having treatment. Other booklets give helpful advice on diet: 'Advice about soft and liquidised foods' and 'Nutritional products'. Please ask staff for a copy.

Be Active, Stay Active: a guide for exercising during and after treatment for cancer

A booklet with a simple exercise programme you can follow. There is also more information about coping with fatigue and the benefits of exercise.

Benefits and finance

You may have had to stop work and had a reduction in your income. You may be able to get benefits or other financial help.

Personal Independence Payment (PIP) is a social security benefit and has replaced Disability Living Allowance (DLA)

for new claimants. It's for people who need help either because of their disability or their illness. You can apply if you are aged 16 – 64.

People aged 65 or over who need help with personal care or supervision could be entitled to Attendance Allowance.

Your carer could get Carer's Allowance if you have substantial caring needs.

Find out more today:

- To get a claim pack for Attendance Allowance, call **0345 605 6055** and for PIP call **0800 917 2222**.
- For DLA: If you were born on or before 8 April 1948 call **0345 605 6055**, if you were born after 8 April 1948 call **0345 712 3456**.
- Carer's Allowance: call **0345 608 4321**.
- For benefits advice, contact Maggie's centre on **0161 641 4848** or email manchester@maggiescentres.org
- The Christie at Oldham has a benefits advice session on Thursday afternoons, call **0161 918 7745**.
- Contact your local social services department for help with equipment and adaptations, or for an assessment of care needs. Visit www.gov.uk for further information.
- Macmillan Cancer Support can give advice on helping with the cost of cancer on **0808 808 00 00** or www.macmillan.org.uk

Student training

The Christie is a training hospital for postgraduate and undergraduate trainees so you may meet male and female students in all areas of the hospital. We train doctors, nurses, radiographers and other therapists in the treatment and care of cancer patients.

Placements at The Christie are an important part of student training, so by allowing them to assist in your care, you will be making a valuable contribution to student education.

Students are always supervised by fully qualified staff. However, you have the right to decide if students can take part in your care. If you prefer them not to, please tell the doctor, nurse, radiographer or other therapist in charge as soon as possible. You have a right to do this and your treatment will not be affected in any way.

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**

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

Visit the Cancer Information Centre

The Christie at Withington **0161 446 8100**

The Christie at Oldham **0161 918 7745**

The Christie at Salford **0161 918 7804**

Open Monday to Friday, 10am – 4pm.

Opening times can vary, please ring to check
before making a special journey.

The Christie NHS Foundation Trust

Wilmslow Road
Manchester M20 4BX

0161 446 3000
www.christie.nhs.uk

The Christie Patient Information Service
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