Radiotherapy department

Stereotactic Ablative Body Radiotherapy (SABR) to the adrenal gland

Introduction
This leaflet aims to help patients who are going to receive stereotactic ablative body radiotherapy (SABR) for cancer treatment to their adrenal gland. Please read this leaflet alongside The Christie booklet ‘Radiotherapy - a guide for patients and their carers’. Your clinical oncologist (specialist doctor) will also discuss the treatment with you.

This leaflet will explain:
• what SABR is and what the benefits of this treatment are
• general information about the planning of your treatment
• general information about what happens on the day of your treatment
• general information about side effects of treatment
• who to contact when you need advice

What is SABR and what are the benefits of this treatment?
SABR to the adrenal gland involves the precise delivery of high dose radiotherapy. SABR is given over fewer treatment sessions than conventional/standard radiotherapy which may increase the chances of controlling the tumour and reducing symptoms more effectively than standard radiotherapy.

Ensuring accuracy of treatment
To give accurate treatment we need to ensure that your adrenal gland is in the same position each day when you come for treatment planning and treatment delivery. The position of your adrenal gland is affected by many things; the two that have the most impact are breathing motion and the movement of the digestive tract.
• We have a device which attaches to the treatment couch and is then adjusted to create some pressure on your abdomen. This is to try to minimise the amount of movement of your adrenal gland caused by breathing motion. Using this device should not be painful and you will still be able to breathe freely.
• Filling and emptying of the stomach and digestive system can cause distortion (alteration of the original shape) of the adrenal gland. To minimise this we ask that you do not eat or drink anything 2 hours before having your scan or treatment. It is important that you have eaten a light snack on the day as prolonged fasting causes a build-up of gas.
• Just before your scan or treatment, we sometimes give you a measured cup of water to drink. This may help us to see your adrenal gland better.
Planning your treatment
You will have an appointment in the radiotherapy department before actually starting the treatment. At this appointment:
• We will ask you to lie on a treatment couch in the position you will be treated in - this will be with your arms above your head, resting on a board.
• We will fit the device over your abdomen and take some images of your breathing motion to ensure that the device is adequately limiting your motion.
• Following this you will have 2 CT scans in the same position with the device in position. You will be given a contrast injection to enable the doctor to clearly see the area of treatment.
• The first scan will be taken whilst holding your breath.
• The second scan will be taken whilst breathing normally.
• In order to reproduce your position for each treatment we would like to give you some permanent reference marks (pin size tattoos) on your skin.
The appointment may take up to 2 hours. Please bring your regular medication with you and maybe something to read. It may be beneficial to take painkillers 30 minutes before each session if you have any pain.

When will I start my treatment?
Treatment will usually start within a few weeks after your first appointment. You will be given a list of treatment appointments when you attend for your CT planning scan.

What happens on the day of treatment?
SABR is normally given over three treatments, usually on alternate working days.
A team of radiographers, physicists and clinicians work together in the CT scanner and treatment rooms and you may hear them sharing information and giving instructions relating to your treatment.
A scan of the area you are having treated will be taken before, after and sometimes during each treatment. These scans are purely to check that you are in the correct position and NOT to check how the tumour is responding to treatment.
You will be alone in the radiotherapy treatment room while the machine moves around you and delivers treatment. CCTV on the control desk gives the radiographers a clear view of you and they will be watching you all the time. If you feel the 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. You will not feel the treatment and it is important that you stay as still as possible during the treatment process. Treatment can take between 30 - 60 minutes.

Consent
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.

Side effects of treatment
As your treatment progresses you may experience some side effects or reactions. Not everyone will have all of these reactions. These are normal reactions and usually temporary. Please tell us if your symptoms are troublesome.
Short term side effects
(usually settle within 6 - 8 weeks following treatment)
May affect more than 20% of patients.

- **Nausea and vomiting** - this can happen just a few hours after treatment or at any time during the treatment course.
- **Changes in bowel habits** - you may experience some changes in your bowel habits such as diarrhoea. Drinking plenty of liquid will replace lost fluids if this happens.
- **Pain** - you may experience increased pain temporarily in the area treated.
- **Tiredness (fatigue)** - you may feel more tired than usual for several weeks after the radiotherapy has been completed.
- **Skin reactions** - the skin where you are having the radiotherapy may change. Skin reactions can vary, but the common symptoms are redness, dryness and itchiness.

Tell the radiographers if you experience any of these side effects or have any new symptoms. They will make sure that you receive the support and any medication that you may need.

Late side effects
(may occur months to years after treatment)
These side effects are rare, but may be permanent. Your doctor will discuss any side effects with you that are relevant to your treatment and the risk of these happening.

- **Liver and/or kidney damage** - this can be monitored using blood tests.
- **Damage to the bowel** - this may lead to a blockage or perforation in the bowel (gut) requiring an operation.

Follow up
You will be seen by your SABR consultant between 4 - 6 weeks after your SABR treatment has finished. After this, you may not routinely see your SABR consultant, but will continue with follow-up appointments with your referring doctor.

Contact details (via consultant's secretary)
Dr N Bayman - 0161 446 3337
Dr D Woolf - 0161 446 3336
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 information and advice visit the cancer information centres at Withington, Oldham or Salford. Opening times can vary, please check before making a special journey.

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