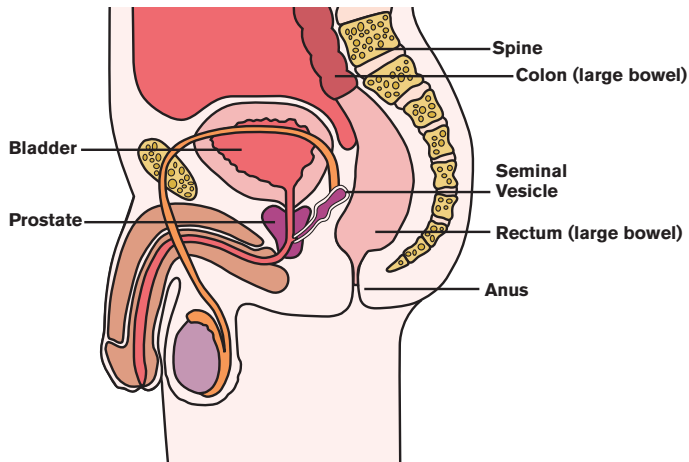


Prostate

This information is to be used in conjunction with **My Treatment Booklet**. It provides unique details about receiving radiation to the **prostate** and possible regional lymph node (gland) areas.



Pathway



1 First specialist appointment

Please refer to My Treatment Booklet.

2 Orientation

You will receive a phone call approx. five days before your orientation appointment to explain specific **bowel and bladder preparation instructions**. These instructions will also be emailed and a prescription for 'micolette enema' given or sent.

At the orientation appointment, a patient care specialist (radiation therapist or nurse) will explain the procedure in more detail and answer any questions or concerns you may have about the process or treatment.

We will review the bowel and bladder preparation instructions with you and answer any questions you may have.

3 Planning CT Simulation

Please eat normally and follow your bowel and bladder preparation instructions.

Position

You will most likely lie flat on your back with a support under your knees. Your hands will be clasped high on your chest and you will have head and neck support. The radiation therapists will make sure you are as comfortable as possible.

For some patients, three small (1mm approx.) permanent reference marks will be made on your skin to help position you each day for treatment. One on the side of each hip and one on your abdomen at the top of the pubic hairline.

Scan

You will have a CT scan in the above position.

You will also have a MRI scan which may or may not be on the same day. Bladder and bowel preparation for the MRI will be confirmed following the CT scan as it can be used to assess both structures. For some patients, three small (1mm approx.) permanent reference marks will be made on your skin to help position you each day for treatment. One on the side of each hip and one on your abdomen at the top of the pubic hairline.

4 First day of treatment

Please follow your bowel and bladder preparation instructions today and every treatment day. Let a member of the ARO team know if you have any problems.

5 During treatment

Your radiation oncologist will advise you of possible side effects during and then after treatment is complete. *Please speak to a member of the ARO team about any concerns or changes so we can provide advice and support to meet your needs.*

Possible short-term side effects

Fatigue

Tiredness will likely occur. Some people continue to work and others find this too tiring.

Self-care:

- *Keep hydrated (drink 1.5-2L a day, preferably water). Minimise alcohol.*
- *Eat as well as you can.*
- *Exercise regularly e.g. relaxed walking three times per week can be beneficial. You can continue your usual level of activity or introduce mild exercise. Please listen to your body, do not over exert yourself, and rest when you feel the need.*
- *Try to get a good nights' sleep.*

Skin sensitivity

Self-care:

- *When washing the treatment area, use warm water, and gently pat dry. Use mild soap such as Dove extra sensitive or Simple soap, which you can buy from the supermarket.*

Bladder inflammation (cystitis)

Due to the closeness of structures in the pelvis, a portion of the bladder can become inflamed and you may experience:

- More urgent and frequent urination (including at night).
- A feeling you need to go but find you are not passing much urine.
- A change in urine flow strength/weaker stream.
- A sensation of burning discomfort during or at the end of the stream.

Self-care:

- *Stop drinking any fluids about 2 hours before you go to bed for the night. This may minimise the number of times you need to use the bathroom at night so you get a better sleep.*
- *For frequent urination and burning sensations please speak to a member of the ARO team.*

Bowel inflammation

Due to the closeness of structures in the pelvis, a portion of the bowel can become inflamed and you may experience:

- More urgent, looser and frequent bowel motions.
- Increased amount of flatulence (wind) and mucus.

Self-care:

- *If your bowel motions change during treatment or you experience any irritation please speak to a member of the ARO team.*

6 Last week of treatment

Please refer to My Treatment Booklet.

On your last day you will see a nurse or doctor.

7 After treatment

Please continue with the current management of any side-effects and self-care for at least 2-3 weeks after treatment.

Possible long-term side effects

- Bowel changes are often mild and no active treatment is required. You may experience:
 - A 'feeling' of wanting to pass a motion when you do not need to (do not strain).
 - Slight bleeding when passing a bowel motion.
 - Looser, more frequent, or more urgent bowel movements than before your treatment.
- Bladder changes (uncommon)
 - Approximately 10% of men develop serious urinary irritation resulting in frequent urination and urgency.
 - Blood can be passed when urinating. This may require investigation and active treatment.
 - Lack of voluntary control with urination (incontinence). Physiotherapy referral available.
 - The tube (urethra) from the bladder to the penis can narrow making it more difficult to pass urine.
See your GP or urologist if you are concerned about any changes.
- Approximately 30-50% of men find that their ability to achieve and maintain an erection declines slowly over the following months or years after treatment. You may wish to discuss the available remedies for impotence with your radiation oncologist/GP or urologist.
- Pelvic nerve damage is uncommon and there is a small risk of pelvic fractures (less than 1%).
- Extremely rare risk of developing different cancers, usually many years after radiation.

Self-care:

- Visit Support Services on **www.aro.co.nz** for additional services before, during and after treatment.