



RADIOTHERAPY FOR SKIN CANCER

What are the aims of this leaflet?

This leaflet has been written to help you understand more about radiotherapy treatment for skin cancer.

What is radiotherapy?

Radiotherapy is the use of X-rays and other forms of radiation to destroy cancerous cells, while causing as little harm as possible to normal cells. In the skin, it is mainly used to treat basal cell carcinomas and squamous cell carcinomas although other skin cancers or benign skin conditions may also benefit from radiotherapy.

When is radiotherapy used?

Radiotherapy is particularly useful in cases where surgery might be difficult or disfiguring, for example, on faces, near the nose, ear or lip or when the cancer is large or deep within the skin. It may be considered if a patient is not fit for surgery or does not want surgery. It may also be used after surgery to reduce the risk of the cancer coming back. In certain cases, radiotherapy is used to shrink the tumour, treat cancer that has spread to other sites or to relieve symptoms caused by the cancer rather than to cure it (palliation).

What types of radiotherapy are there?

There are different types of radiotherapy used in the treatment of skin cancer and your radiotherapy doctor will explain which type is the most suitable for you. These include:

Superficial or orthovoltage radiotherapy: uses X-rays that do not travel deep into the skin.

Electron radiotherapy: uses electron beams that can travel deeper.

Brachytherapy: involves placing some radioactive material onto or into the skin.

Photon radiotherapy: may be used, such as to treat lymph nodes or to help with symptom control.

Where will you receive the treatment?

Radiotherapy for skin cancer is given as an outpatient procedure in a radiotherapy department. Generally, you will not need to be admitted to hospital.

What is the duration of the treatment?

The radiation dose, frequency of treatment and the number of days over which it is given can vary between patients. Your doctor will advise you on how long your treatment will last. Skin radiotherapy is usually delivered daily from Monday to Friday. For very small cancers, the treatment can be delivered within one or few visits, for larger cancers it may be over a period of 2 to 4 weeks.

Planning your treatment

Your radiotherapy doctor will mark the cancer on the skin with a marker pen. The marked area is usually slightly bigger than visible cancer. A special shield, called lead cut-out, may be used to shape the radiotherapy beam and protect the surrounding skin. If the area to be treated is large or complex, it may be necessary to make a plastic mesh mask to help keep your treated body part from moving. The staff who are looking after you will explain about this in more detail as needed. Sometimes scans may be used to identify the exact area to be treated. The ink marks may be also used to line up the radiotherapy machine each time you are treated to ensure you will be in exactly the same position.

Having your treatment

At the beginning of your treatment you should be given a written information leaflet on how to care for yourself during radiotherapy. The actual treatment only takes a few minutes. The treatment will usually be given by a radiographer. They will position you on a couch and make sure that you are comfortable; it is important that you lie very still during the treatment. If your skin cancer is near your eye, nose, ear or teeth, a small lead shield may be applied during treatment to protect these areas from the radiation. You will be left alone in the treatment room while you have your treatment, but the therapeutic radiographer (expert who is specially trained in giving you your

treatment will be able to hear and see you. You will not be able to see or feel the radiation and it is not painful. The treatment machine will produce buzzing sounds during radiation, which is normal.

Are there any side effects?

Radiotherapy for skin cancer only affects the area treated with radiation. The radiation does not stay in your body after treatment and it is safe to mix with other people. Any side effects you experience will be monitored regularly by your medical team.

During or after your course of radiotherapy, you may notice increased redness, soreness, itching, peeling and repeated scabbing around the treatment area, which may take several weeks to heal (typically up to 2-3 months). If your treatment is short, for example one or few doses, skin side effects may happen after you have finished your treatment, sometimes within a week or two. Occasionally, there may be some bleeding in the treated site.

Late side effects, which develop months or years after treatment may occur where the treated area develops small spidery blood vessels or appears paler than the surrounding skin. It is common to permanently lose hair but it will happen only in the area treated with radiation. In rare occasions, an ulcer in the treated area may form that will require long-term dressing or a small operation to remove it.

Radiation can change how a pacemaker or implantable cardioverter-defibrillator (ICD) works so please let your medical team know if you have one.

Radiation can be harmful to the unborn child, therefore it is important to let your doctor know if you suspect that you might be pregnant.

How should you look after your skin?

Try to keep the treated area dry. Wash with a mild fragrance-free soap and lukewarm or cool water. Gently pat dry the skin with a towel. If the beard area is being treated, do not wet shave in the treated area. It is best to use an electric razor. You can use moisturizing cream, ointments, lotions, cosmetics and sunscreen as long as the treated area of skin is not weeping, once any reaction from the treatment has settled down. It is best not to put sticking plaster on the treated area. If the area is bleeding, weeping or unsightly, cover with a non-adhesive foam dressing suitable for wet wounds. Your medical team or pharmacist will be able to advise you further.

If you are having treatment on your scalp or near the hair line, wash hair with mild shampoo and allow your hair to dry naturally. Do not use a hair dryer near the area. It is better to keep the treated area out of strong winds and sunlight as these can irritate the skin and make the reaction worse. Try to avoid clothes rubbing the treated area.

If you have any worries about your skin reaction, particularly if you suspect you have an infection (pain or greenish yellowish discharge and pain which may be heavy at times) please consult your medical team or see your GP.

Where can I get more information about radiotherapy?

Web links to detailed leaflets:

<https://www.nhs.uk/conditions/radiotherapy/>

Cancer Research UK

<https://www.cancerresearchuk.org/about-cancer>

Macmillan Cancer Support

89 Albert Embankment

London SE1 7UQ

Helpline (for emotional support): 0808 808 2020

Helpline (for information): 0808 800 1234

<http://www.macmillan.org.uk>

A practical guide to understanding cancer: Understanding skin cancer

<https://be.macmillan.org.uk/Downloads/CancerInformation/CancerTypes/MAC11653Skin-cancerE10lowrespdf20170929ALM.pdf>

NHS

<https://www.nhs.uk/conditions/non-melanoma-skin-cancer/>

Link to patient support groups:

Independent Cancer Patients' Voice (ICPV)

<http://www.independentcancerpatientsvoice.org.uk/>

British Association of Skin Camouflage (NHS and private practice)

Tel: 01254 703 107

Email: info@skin-camouflage.net

Web: www.skin-camouflage.net

Changing Faces

The Squire Centre

33-37 University Street

London, WC1E 6JN

Tel: 0300 012 0275 (for support and advice)

Tel: 0300 012 0276 (for the Skin Camouflage Service)

Email: mailto:skincam@changingfaces.org.uk

Web: <http://www.changingfaces.org.uk>

For details of source materials used please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel

BRITISH ASSOCIATION OF DERMATOLOGISTS

PATIENT INFORMATION LEAFLET

PRODUCED JUNE 2010

UPDATED OCTOBER 2013, DECEMBER 2016, APRIL 202

REVIEW DATE APRIL 2024