

# Your guide to: Radiation Treatment and Cisplatin Chemotherapy

## For women who have gynecologic cancer

Read this resource to learn:

- Important safety information
- What you need to know about your treatment
- What you need to know before your treatment starts
- Where to go for your appointments
- How to prepare for radiation treatment
- How to prepare for chemotherapy
- What are the side effects from radiation treatment and chemotherapy
- What you can do to manage the side effects from radiation treatment and chemotherapy
- Your treatment schedule
- Who to contact if you have questions

For questions about your radiation treatment appointments,  
call: 416 946 4501 ext. 2172

For questions about your chemotherapy appointments,  
call: 416 946 2220 then press 1

Your first day of treatment is: \_\_\_\_\_



## Important safety information

For the next few weeks you will be getting concurrent treatment. This means you will get two therapies at the same time:

- Radiation treatment
- Chemotherapy

These two therapies work together to help you get the best from your treatment.

It is important that you get both your radiation treatments and your chemotherapy. Both treatments are needed for you to get the best outcome.

Your radiation treatment and chemotherapy are two different appointments.

Your radiation treatment will be organized with your radiation oncologist (radiation cancer doctor).

Your chemotherapy will be organized with your gynecology oncologist (chemotherapy cancer doctor).

Know who to contact about your appointments.

Know what you can do to be sure you do not miss a treatment.

Follow the treatment schedule at the end of this resource to help you stay safe and get the treatment you need.

**Important:** Talk to your health care team if you want more information about your treatment after reading this resource

## What you need to know about your treatment

### What is radiation treatment?

Radiation treatment is a cancer treatment that uses radiation to kill cancer cells. It works by sending radiation to the areas of the body where there is cancer.

Radiation treatment aims to reduce or control cancer from growing and spreading.

You will be getting radiation treatment at the same time as you get your chemotherapy.

### What is Cisplatin chemotherapy?

Chemotherapy is a cancer treatment that uses medicine to kill cancer cells. You will be getting a chemotherapy medicine called Cisplatin. In this resource, Cisplatin chemotherapy will be referred to as chemotherapy.

### How will I get my treatment?

#### Radiation treatment

There are 2 main ways of getting radiation treatment:

#### External radiation treatment:

External (outside) radiation treatment uses a machine called a linear accelerator. This machine sends radiation from outside your body to the cancer cells.

This is the first type of radiation you will have with your chemotherapy. See page 45 for a chemotherapy and external radiation treatment schedule.

After your external radiation treatment is finished, you may need a second type of radiation called internal (inside) radiation treatment. Internal radiation treatment is also called brachytherapy.

## Chemotherapy

You will receive your chemotherapy through an intravenous (IV) needle.

You will get a needle put into a vein on the back of your hand or lower arm.

The needle is hooked up to a plastic tube and a bag that contains chemotherapy medicine.



This is an image of an IV. You will get an IV put on the back of your hand or lower arm as seen here.

## How long will my treatment last?

- Your treatment will last for 5 weeks. You will get:
- External radiation treatment every day from Monday to Friday for 5 weeks. You will not get treatment on the weekends.
- Chemotherapy once a week for 5 weeks.

If you need internal radiation treatment (brachytherapy), you will get this treatment after your external radiation treatment is complete.

You will have your brachytherapy treatment for 2 weeks in a row. You will get treatment for 3 days in a row during the 1st week and 2nd week.

## How often will I see my doctor during treatment?

You will see your radiation oncologist (radiation cancer doctor) once a week.

You will see your gynecology oncologist (chemotherapy cancer doctor) once a week or at the start, middle and end of your treatment. Check your appointment schedule for times and dates.

## **Why do I need so many blood tests during treatment?**

Chemotherapy affects your whole body. Blood tests are used to:

- Decide if it is safe to give you chemotherapy
- See how well your body is responding to chemotherapy

The 3 most common blood tests are:

- Complete Blood Count (CBC): This test shows the number of red blood cells (cells that carry oxygen in your body), white blood cells (cells that fight off infection), and platelets (cells that help stop bleeding).
- Creatinine: This test shows how well your kidneys are working.
- Liver function: This test shows how well your liver is working.

Your chemotherapy may be delayed if your blood counts are too low. Your doctor will talk to you about this at your appointments. Read pages 18, 19, 20 and 21 for more information about low blood counts.

## What you need to know before your treatment starts

The week before treatment starts, your health care team will help you prepare for radiation treatment and chemotherapy.

Follow the steps below to prepare for treatment.



**Check your appointment schedules for exact times and locations:** Pick up your 2 appointment schedules with the times and dates for your radiation treatment and chemotherapy appointments.

Go to the Radiation Therapy Department on 2B (2 floors below main floor) to get your radiation appointment schedule. You will get a radiation appointment schedule from your radiation therapists every week.

Go to the Gynecologic Oncology Department. You will get your chemotherapy appointments from the Gynecologic Oncology Reception. You will get an updated schedule after every appointment you have with your gynecology oncologist (chemotherapy cancer doctor).



### **Pick up your medicine from the pharmacy:**

If you use the Princess Margaret Outpatient Pharmacy you must pick up the prescriptions below, at least 3 days before your 1<sup>st</sup> treatment appointment:

- Ondansetron hydrochloride (Zofran®)
- Dexamethasone (Decadron®)
- Prochlorperazine (Stemetil®)

If you choose to use your local pharmacy, go as early as possible to make sure they have the cancer-related medicines in stock.

### **Go to your doctor's appointments:**



This week you will have 2 appointments. You will have one appointment with your gynecology oncologist (chemotherapy cancer doctor) and one with your radiation oncologist (radiation cancer doctor). They will give you details on what to expect during chemotherapy and radiation treatment.

## **Blood tests**

If you have a PICC line in your arm or a Port-a-Cath in your chest, go to the Ambulance Waiting Area, main lobby.

If you do not have a PICC line or a Port-a-Cath, go to the Blood Collection Lab in the main lobby of Princess Margaret Cancer Centre.

## **Radiation treatment:**

### **For your radiation treatment**

You will get an appointment to plan and prepare for your radiation treatment this is called simulation at 1B (one floor below the main floor). See page 10 for more details.

For treatment you will go to the Radiation Therapy Department on 2B (2 floors below the main floor). Check-in at the front desk with your green appointment card. This card has a barcode on it.

**For your appointment with your radiation doctor:**

Go to the Radiation Therapy Department on 2B (2 floors below the main floor).

**For managing radiation treatment side effects:**

If you have questions about radiation treatment or need help managing treatment side effects, speak to the radiation therapist or go to the Radiation Nursing Clinic on 2B and speak with a radiation nurse.

Patients can use the Radiation Nursing Clinic during their radiation treatment and up to 2 weeks after their last radiation treatment is done.

You may go to the Radiation Nursing Clinic if you need:

- Help managing new side effects from your radiation treatment
- Help managing side effects that are getting worse or side effects that worry you
- Help with skin care (for example, for saline soaks or to have bandages changed)

**Chemotherapy:**

**For your chemotherapy treatment:**

Go to the Chemotherapy and Transfusion Centre located on the 4th floor of Princess Margaret.

**For your appointment with your chemotherapy doctor:**

Go to the Gynecologic Clinic on the 5th floor of Princess Margaret. Your appointment schedule will tell you which clinic you need to go to.

**For managing chemotherapy side effects:**

If you have questions about chemotherapy or need help managing treatment side effects, call the Gynecology Resource Nurse at 416 946 2220 ext. 2.



## What to bring to your treatment appointments

- Your health card**
- Your appointment schedules:** Radiation appointments are on a green card with a barcode. All other appointments are on a white sheet of paper.
- Private insurance information** (if you have any)
- Money for parking and food**
- Any medicine you need to take during the day.**
- Something to do.** Bring something like a music player with headphones, books, laptops or tablets to keep you busy. You may be in the unit for a long time. There is free WiFi in the hospital.
- Meals and snacks for the day.** Bring foods with mild smells. Strong smells can sometimes make other patients feel sick. The clinic provides free juice, cookies and popsicles.
- Someone to drive you home.** It is not safe to drive after the chemotherapy appointments. Some of the medicines will make you drowsy.
- If you want, one family member or friend for support/company can sit with you in the chemotherapy and radiation treatment area.** If you have more than one person, they can wait in the waiting room.

## How to prepare for radiation treatment

You will need to have an empty rectum (no poo) and a comfortably full bladder for your CT planning scan appointment. During the CT planning scan, you will have images of your treatment area taken. These images are used to plan your treatment.

You will also need to have an empty rectum (no poo) and a comfortably full bladder (not painful) for your radiation treatment appointments. Please follow these instructions.

### To make sure you have an **EMPTY** rectum (no poo):

- If you have regular bowel movements (poo) every day, you do not need to do anything different.
- Avoid eating or drinking anything that may give you gas, for example, cabbage, soda.
- Do not skip meals.

Talk to your radiation oncologist, oncology nurse or radiation therapist if:

- You do not have bowel movements (poo) every day.
- You always have a lot of gas.

### To make sure you have a **comfortably FULL** bladder:

Follow these steps 1 hour before your appointment:

1. Empty your bladder (pee).
2. Drink 2 cups (500 ml) of water, clear fluid or juice. Finish drinking 1 hour before your appointment.
3. Do not empty your bladder (pee) after drinking. Your bladder will become full for your appointment.
4. When your appointment is finished, you can empty your bladder.

**Remember: Do not use vaginal tampons during your CT planning scan or radiation treatment**



## How to prepare for chemotherapy

Take senna (Senokot®) for 2 days **before** you start chemotherapy.

2 days before you start chemotherapy, you will need to:

- Take senna (Senokot®) at night.

1 day before chemotherapy, you will need to:

- Take senna (Senokot®) at night.

**Note: if you have an ileostomy/colostomy do NOT take senna (Senokot®) unless your doctor has told you to.**



### Do not have any caffeine before your chemotherapy appointment

This includes

- Coffee
- Tea
- Chocolate
- Cola
- Energy drinks
- Decaffeinated drinks (there is still some caffeine in them)

Caffeine will tighten your blood vessels. This will make it harder for the nurse to set up your intravenous (IV). After you get your IV, you may have caffeine during your appointment.

## **Do not take extra antioxidants before or during radiation treatment**



Some vitamins, also called “antioxidants,” can reduce the effects of your radiation treatment. These antioxidants can be found in some foods you eat or vitamin supplements you take. Below is a list of some of the antioxidants that are found in some foods and vitamins supplements:

- Vitamin C
- Vitamin E
- Beta carotene
- Selenium

Know how to take them safely:

- Taking small amounts of antioxidants will not reduce the effects of your radiation treatment. Many foods have antioxidants and it is OK to eat these foods (like berries, beans).
- Read the pamphlet called “What you need to know about antioxidants and your radiation therapy” to learn more. You can get it at the Patient & Family Library (main floor of the Princess Margaret Cancer Centre).

## What are the side effects from radiation treatment and chemotherapy

Your radiation treatment and chemotherapy may cause the side effects listed below.

### **Radiation treatment:**

- Diarrhea (loose or watery poo)
- Pain when urinating (peeing)
- Cancer-related fatigue (feeling of tiredness that does not go away with rest or sleep)
- Vaginal stenosis (vagina becomes narrow)
- Vaginal dryness (vagina becomes dry )
- Pain during sexual intercourse

### **Chemotherapy:**

- Nausea (feeling of having to throw-up) and vomiting (throwing up)
- Constipation (trouble having a poo)
- Low white blood cells in your blood
- Low platelets in your blood
- Low red blood cell count
- Cancer-related fatigue (feeling of tiredness that does not go away with rest or sleep)
- Thinning hair (some hair loss)
- Peripheral neuropathy (a numb or tingling feeling in your hands and feet)
- Hearing loss and ringing in the ears

Not everyone gets these side effects. Read the information below to learn about each side effect and what you can do to manage them. Talk to your cancer doctors or nurses if you have any questions. Call these numbers:

For questions about radiation treatment side effects, call: 416 946 4501 ext. 2172. For questions about chemotherapy side effects, call: 416 946 2220 then press 2.

## What you can do to manage the side effects from radiation and chemotherapy

### Nausea and vomiting

Nausea is the feeling that you want to throw-up. Vomiting is throwing up. Nausea and vomiting can happen before, during or after your treatment.

### What you can do to manage nausea and vomiting

Take your anti-nausea medicines to help prevent and control nausea. Take your anti-nausea medicines before you feel nausea. Do not wait until you start to throw-up to take your medicine. It is easier to prevent nausea and vomiting than it is to stop it once it starts.

- Take ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®) as prescribed (told by your doctor). See your treatment schedule on page 31 or page 45 or the instructions on the medicine bottle for more details.
- If you still feel like throwing up, take prochlorperazine (Stemetil®) as well. Follow your doctor's instructions on how to take it.

If you have diabetes, it is important to tell your family doctor that you are taking dexamethasone (Decadron®). Dexamethasone may cause your blood sugar to go up.

Here are other tips to help you manage nausea and vomiting:

- Eat small amounts of food during the day. For example, try to eat every 2 hours.
- Eat slowly.
- Avoid spicy or strong smelling foods.
- Make notes about how you are feeling and tell your doctor, nurse or radiation therapist at your next visit.
- Keep track of when you feel sick or vomit. For example, what time of day do you start to feel sick? Do certain foods make you feel sick or vomit? If the same things happen over and over, try to change the pattern.

**Go to the Radiation Nursing Clinic at 2B (2 floors below the main floor) or call the Gynecology Resource Nurse at 416 946 2220 extension 2 if:**



- Your anti-nausea medicine is not working.
- You cannot keep fluid or food down for more than 12 hours.

Your doctor or nurse will need to help you manage this.

**If this happens at night, on a weekend or on a holiday:**

1. Call the Afterhours Carepath Cancer nurse at 1 877 681 3057.  
They are available:
  - Weekdays: 5:00 pm to 8:30 am
  - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and radiation treatment.

## **Constipation**

Constipation means it is hard to have a bowel movement (poo). You may have less bowel movements (poo) than is normal for you. Or you may have stool (poo) that is dry and hard to get out. This happens when your bowels (the part of your body that moves poo out) slows down or stop working.

Your chemotherapy, pain medications or your anti-nausea medicine called ondansetron hydrochloride (Zofran®) can cause constipation.

**Note:** You may only have constipation during the first week of chemotherapy and radiation treatment.

### **What you can do to manage constipation:**

- Drink 6 cups or 1.5 litres of fluid every day, unless restricted by your doctor. Fluid is any liquid that does not have caffeine or alcohol in it. It also includes fluids in the food you eat such as juices in fruit.
- Stay active. Walking is best.

**Note: if you have an ileostomy/colostomy do NOT take senna (Senokot®) unless your doctor has told you to.**

- **Do not** use suppositories or enemas before asking your doctor. These medicines go in the rectum (bum) to help with constipation.



**Call the Gynecology Resource Nurse at 416 946 2220 extension 2 if you notice any of these signs:**



- No bowel movement (poo) for 2 days
- Nausea (feeling like you will throw-up)
- Vomiting (throwing up)
- Lower back pain
- Bloated (swollen) stomach
- Not passing gas

This may be a sign of a blockage in your bowels. Your doctor or nurse will need to help you manage this.

**If this happens at night, on a weekend or on a holiday:**

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.  
They are available:
  - Weekdays: 5:00 pm to 8:30 am
  - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and radiation treatment.

## Low white blood cells in your blood

White blood cells help your body fight infection. When your white blood cell count is low, you are at risk of getting an infection.

Your white blood cell counts will start to drop 7 to 14 days after you get your chemotherapy.

## What you can do to lower your risk of getting an infection:

- Wash your hands with soap and water often. You can also use hand sanitizer.
- Try to avoid going to crowded places for example, malls, public transit and movie theatres.
- Do not go near people who are sick.

## What are the signs of an infection?

If you have a fever, it may be a sign that you have an infection. It is very important to get this treated right away.

Many women get hot flashes after gynecological cancer surgery. It may be hard to tell the difference between a fever and a hot flash. These steps help make sure you have a fever, not hot flashes.

To check if you have a fever:

1. Take your temperature with a thermometer.
2. Wait 1 hour.
3. Take your temperature again.

If your temperature is over 38 °C (100.4 °F) both times then you have a fever.

- Do not take any acetaminophen (Tylenol®) as it may hide your fever.
- Do not take acetylsalicylic acid (Aspirin®) or ibuprofen (Advil®) because it can affect your blood.

You may be able to take these medicines after you have been seen by a doctor.

**Note:** Some pain medications contain acetaminophen (Tylenol®) make sure you check your temperature first before taking it.

**Go to the Radiation Nursing Clinic at 2B (2 floors below the main floor) or call the Gynecology Resource Nurse at 416 946 2220 ext. 2 if you notice any of these signs:**



- Fever over 38 °C (100.4 °F)
- Chills and shaking
- Not able to keep fluids down for more than 12 hours

**If this happens at night, on a weekend or on a holiday:**

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.  
They are available:
  - Weekdays: 5:00 pm to 8:30 am
  - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and radiation treatment.

## Low platelets in your blood

Platelets form clots to help you stop bleeding. For example if you were to cut your finger, your blood would clot to protect the area. Low platelets put you at risk of bleeding.

## What you can do to lower your risk of bleeding:

- Use a soft toothbrush
- Use an electric razor when shaving
- Talk to your oncologists (cancer doctors), nurse or pharmacist before taking:
  - Acetylsalicylic acid (Aspirin®) or ibuprofen (Advil® or Motrin®). These medicines can thin your blood and cause bleeding.
  - Any new medicines (including herbal or traditional medicine).

Your health care provider needs to check to see if they are blood thinners.

**Go to the Radiation Nursing Clinic at 2B (2 levels below the main floor) or call the Gynecology Resource Nurse at 416 946 2220 ext. 2 if you notice any of these signs:**



- Blood in your vomit
- Bleeding gums
- Nose bleed
- Blood in your urine (pink pee )
- Blood in your stool (dark, sticky or jelly-like poo)

### **If this happens at night, on a weekend or on a holiday:**

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.  
They are available:
  - Weekdays: 5:00 pm to 8:30 am
  - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and radiation treatment.

## Low red blood cells in your blood

Red blood cells carry oxygen through your body. When your red blood cells are low, you may have anemia. Anemia may make you feel very tired.

## What you can do to feel less tired

- Save your energy. For example, pace yourself and take naps.
- Eat foods high in iron (a mineral that helps make red blood cells) like meat and red beets.

**Go to the Radiation Nursing Clinic at 2B (2 levels below the main floor) or call the Gynecology Resource Nurse at 416 946 2220 ext. 2 if you notice any of these symptoms (signs):**



- Dizzy or light-headed
- Shortness of breath
- Your heart is pounding very fast
- **If you have chest pain call 911**

Do not start taking iron pills unless your doctor tells you to.

### **If this happens at night, on a weekend or on a holiday:**

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.  
They are available:
  - Weekdays: 5:00 pm to 8:30 am
  - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and radiation treatment.

## Cancer-related fatigue

Cancer-related fatigue is not the same as normal tiredness. It is a kind of tiredness or lack of energy that does not go away with rest or sleep. You may still feel tired after sleep or rest. This is the most common side effect of radiation treatment and chemotherapy.

## What you can do to manage cancer-related fatigue:

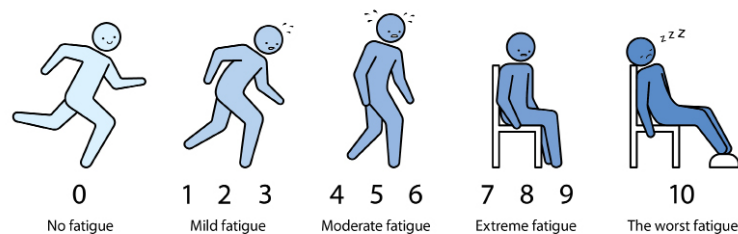
- Spread out the work you need to do over the day.
- Plan rest breaks.
- Do hard tasks when you have the most energy.
- Do light exercise to stay active (such as walking).
- Do not skip meals. Drink 6 cups or 1.5 litres of fluid every day, unless restricted by your doctor. Fluid includes any liquid you drink that does not have caffeine or alcohol in it. It also includes fluids in the food you eat such as juices in fruit.
- Do most of your sleeping at night. If you need to nap, take your nap before 3:00 pm.

**Go to the Radiation Nursing Clinic at 2B ( 2 levels below the main floor) or call your Gynecology Resource Nurse at 416 946 2220 ext. 2 if you have:**

- Extreme fatigue
- Look at the fatigue scale below to help you know your level of fatigue
- Extreme fatigue is any amount between 7 – 10 on the scale
- Trouble getting out of bed because of fatigue
- Trouble doing your normal tasks or work

Your oncologist (cancer doctor) or nurse will need to help you manage this.

**Fatigue Scale:** Choose the number that best describes how you feel today



© 11/11 Patient Education

## **Thinning hair**

You may not lose your hair from chemotherapy but your hair may get thinner.

## **What you can do to cope with thinning hair:**

- Use a mild shampoo and sun protection like a hat. This will protect your scalp.

## **Peripheral neuropathy**

Peripheral neuropathy is numbness and tingling in your fingers and toes. Some people may feel unsteady on their feet. They may also have trouble picking up items with their fingers.

Peripheral neuropathy can make it harder to notice hot surfaces (like stove tops), and you may be more likely to get burned.

## **What you can do to prevent burns:**

- Check the temperature of anything you touch with your elbow.
- Check the water temperature before you shower, bathe or wash your hands.

## **Hearing loss and ringing in the ears**

Cisplatin chemotherapy may cause decreased hearing and ringing in the ears. You may hear a high-pitched ringing sound in your ears during treatment. Only patients getting Cisplatin may get this side effect. Talk to your oncologist (cancer doctor) or nurse to help you manage this.

## **Diarrhea**

Diarrhea is watery or loose stool (poo) that is a common side effect of radiation treatment to the pelvis. It can happen after the first week of radiation treatment. Diarrhea can cause:

- You to become very tired or dehydrated (not enough water in your body).
- You to become bloated or have stomach cramps.
- The skin on your bottom to get red and irritated.

## **What you can do to manage diarrhea**

- Drink 6 cups or 1.5 litres of fluid every day, unless restricted by your doctor. Fluid includes any liquid you drink that does not have caffeine or alcohol in it.
- Eat foods that are low in fiber and fats. For examples of food that are low in fiber and fat, read "Eating Hints for People with Diarrhea". Get this pamphlet from the Patient and Family Library (main floor of Princess Margaret).
- Avoid caffeine, spices and milk products
- Eat 5 or 6 smaller meals instead of 3 larger meals each day
- Your radiation oncologist (cancer doctor) may suggest Imodium®, to help control diarrhea.
- Ask your radiation therapist or nurse for Proshield barrier cream For red or irritated skin, have a sitz bath. Read "Having a Sitz Bath". Get this pamphlet from the Patient and Family Library (main floor of Princess Margaret).

You can also ask your nurse to book an appointment for you and your family to see a dietitian. A dietitian can give you advice about your diet and nutrition.



**Go to the Radiation Nursing Clinic at 2B (2 levels below the main floor) or call your Gynecology Resource Nurse at 416 946 2220 extension # 2 if:**



- If you start to have diarrhea (watery or loose poo) every 2 hours even after taking Imodium®.

**If this happens at night, on a weekend or on a holiday:**

1. Call the Afterhours Carepath Cancer nurse at 1 877 681 3057. Ask for the nursing supervisor. They are available:
  - Weekdays: 5:00 pm to 8:30 am
  - Weekends and holidays: available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy.

**Pain when urinating (peeing)**

Radiation treatment may also cause you to feel pain when you urinate (pee). This may be a symptom (sign) that you have an infection.

If you start to have burning when you urinate (pee), visit the Radiation Nursing Clinic on 2B (2 levels below main floor). You will have your urine checked to see if you have an infection.

Your doctor or nurse will need to help you manage this.

**What you can do to manage pain when you urinate (pee)**

Drink 6 cups or 1.5 litres of fluid (such as cranberry juice) every day, unless restricted by your doctor).

Radiation treatment may also make you need to urinate (pee) a lot more. If you need to urinate (pee) a lot, visit the Radiation Nursing Clinic on 2B (2 floors below the main level). Even if you do not have pain, you will have your urine checked to make sure you do not have an infection.

## What you can do if you have to urinate (pee) often.

- Avoid drinks with caffeine (like coffee, tea or cola) since they will make you urinate more.

If this happens at night, on a weekend or on a holiday, call the Princess Margaret Cancer Centre main number at 416 946 2000. Ask to speak to the nursing supervisor.

## Vaginal stenosis

Vaginal stenosis happens when the vagina:

- becomes dry
- narrow
- shorter or smaller

Vaginal stenosis can make intercourse and pelvic exams painful

## What you can do to manage vaginal stenosis

Use vaginal dilators. Vaginal dilators are devices that help stretch the vagina, and keep it open.

Using a dilator often will:

- reduce pain during intercourse or pelvic exams
- break down scar tissue that forms after cancer treatments

Vaginal dilators come in many sizes



**These images show different vaginal dilators**

## **When should I start using a vaginal dilator?**

Ask your doctor, radiation therapist or nurse when you can start using a vaginal dilator. It is important that your treatment area is healed before using your dilator.

## **How often should I use a vaginal dilator?**

Use your dilator 3 times a week to help keep your vagina open. Use your dilator on days that you are not having intercourse.

## **How do I use my dilator?**

- Your nurse or radiation therapist will teach you how to use your dilator
- Read the pamphlet called “Manage vaginal stenosis” to learn how to use a dilator. Get this pamphlet from the Patient and Family Library (main floor of Princess Margaret).
- Other resources:
  - Attend the class on “Sex and Intimacy”. Call 416 581 8620 to book a spot.
  - Ask your doctor or nurse if you can be referred to a pelvic health physiotherapist in the Cancer Rehabilitation and Survivorship Clinic (2nd floor of the Princess Margaret Cancer Centre). Read page 28 for more information. A pelvic health physiotherapist can teach you how to make your pelvic floor muscles stronger. Strong pelvic floor muscles can help with sexual function.

## **Vaginal dryness**

Vaginal dryness is when the vagina loses moisture (wetness) and becomes dry.

This happens due to early menopause, which is caused by your cancer treatment. When this occurs, the ovaries make lower levels of hormones (for example, estrogen and progesterone).

## **What you can do to manage vaginal dryness**

- Use vaginal moisturizers to restore your vagina's natural moisture
- Use them 2 – 3 times per week, even if you are not having sexual activity
- Here are some examples of vaginal moisturizers:
  - Replens<sup>®</sup>, RepaGyn<sup>®</sup>
  - Natural/organic oils (vitamin E, coconut oil, almond oil)
- Read the pamphlet called “Know how to use vaginal lubricants and moisturizers”. Get this pamphlet from the Patient and Family Library (main floor of Princess Margaret).

## **Pain during sexual intercourse**

Talk to your doctor or nurse about having sexual intercourse during your treatment. Your treatment can affect your sexual health physically and emotionally.

## **What you can do to manage painful sexual intercourse**

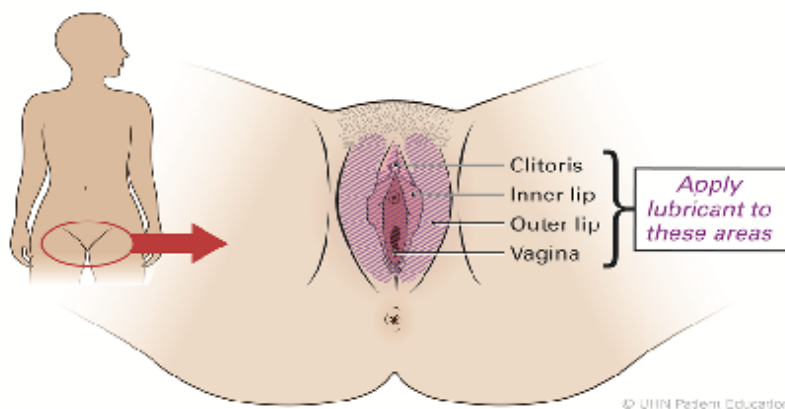
Use vaginal lubricants

- Use them just before intercourse or pleasuring, to add moisture to your vagina and make intercourse is more comfortable.
- Apply to both the vagina and to what is being inserted (put) into the vagina (for example, dilator, penis, fingers)
- They come in many types, including:
  - Water-based (KY liquid<sup>®</sup>, Astroglide<sup>®</sup>)

- Silicone-based (Pjur®, Pink®), Oil-based (Yes! ®)
- Attend the “Sexuality and Intimacy” class. Call 416 581 8620 to book a spot.
- Talk to nurses and social workers trained in sexuality and cancer.
- Speak to your doctor about getting referred to a pelvic health physiotherapist in the Cancer Rehabilitation and Survivorship Clinic (2nd floor of the Princess Margaret Cancer Centre, 416 946 4501 ext. 2363).
- Talk to other women through support groups in the community (for example, Gilda’s Club, Wellspring).

### To help reduce pain with intercourse or penetration:

- Use vaginal lubricants
- Use a dilator as often as you can
- Try different positions that allow you to control the depth of penetration (how far inside a penis, finger is able to reach).
- Increase amount of time spent doing foreplay.
- Learn techniques to relax the pelvic floor and surrounding muscles.



Use lubricants on these areas to help with painful intercourse.

Talk to your health care team if pain is preventing you from having intercourse.

## **Sexual health**

After having radiation and chemotherapy treatment, you may feel changes both physically and emotionally, that can affect your sexual desire, pleasure, and sexual functioning.

To learn how to manage these changes attend the “Sexuality and Intimacy” class.

Refer to the handout in your package or call 416 581 8620 to book a spot.

Talk to your health care team if pain is preventing you from having intercourse

## **Other helpful resources:**

Visit [www.vaginismus.com](http://www.vaginismus.com) to learn about vaginismus, tightening of the vagina, and how to manage it

For lubricants visit [www.well.ca](http://www.well.ca)

Visit specialty shops, like Come As You Are (493 Queen St. W.) or Good For Her (175 Harbord St.)

## Resource List

### Pamphlets:

- What to Expect When Getting High Dose Rate (HDR) Brachytherapy to Treat Gynecologic Cancers
- What you need to know about antioxidants and your radiation therapy
- Taking Care of Your Skin During Radiation Therapy
- Eating Tips for People with Diarrhea
- How to Manage Your Fatigue (from CCO)
- Know how to use vaginal moisturizers and lubricants
- Manage sex and intimacy during and after gynecologic cancer treatment

Get these pamphlets from the Patient and Family Library (main floor of Princess Margaret).

### Books:

Find recipes for people getting chemotherapy or radiation treatment in the "Goes Down Easy" cookbook available in the Patient & Family Library (main floor of Princess Margaret Cancer Centre). You can borrow or buy a copy.

### Websites:

Find recipes for people getting chemotherapy or radiation treatment on the ELLICSR kitchen website at [www.ellicsrkitchen.ca](http://www.ellicsrkitchen.ca)

### Classes:

Ask your oncologist (cancer doctor) about the class on "Reclaiming Your Energy" through the cancer survivorship program.

Attend the "Sexuality and Intimacy" class. Call 416 581 8620 to book a spot.

Attend the "Look Good Feel Better" class. Go to [www.lgfb.ca](http://www.lgfb.ca) and select "Register for a Workshop" to book a class.

## Your treatment schedule

### Week 1 of radiation treatment and chemotherapy



**Check your appointment schedules for exact times and locations:** Pick up your weekly list of appointment times and dates from the Radiation department and your Gynecology department.



**Go to your doctor's appointments:**

This week you will have one appointment with your radiation oncologist (radiation cancer doctor). You may also have an appointment with your gynecology oncologist (chemotherapy cancer doctor) as well.



**Take your anti-nausea medicine:**

If you still feel nauseous after taking Zofran® and Dexamethasone (Decadron®), take Stemetil® (prochlorperazine) every 6 hours, as needed.

**2 days before** you start chemotherapy, you will need to:

- Take senna (Senokot®) at night.

**1 day before** chemotherapy, you will need to:

- Take senna (Senokot®) at night.

**Note: if you have an ileostomy/colostomy do NOT take senna (Senokot®) unless your doctor has told you to.**



## Day 1 (1st day of treatment)

1. Take ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®) **one hour** before your **chemotherapy** appointment. Confirm your chemotherapy appointment time with the receptionist before you take them.
2. Go to your **chemotherapy** appointment. The appointment will last for 2 hours. You will receive a chemotherapy medicine called Cisplatin through a vein in your hand or arm.
3. Go to your **radiation** treatment appointment. The first radiation appointment may last for about 30 to 45 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.
4. Take senna (Senokot®) at night.

## Day 2

1. Take ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®) **with breakfast**.
2. Go to your **radiation** treatment appointment. Your appointment will be about 15 to 20 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.
3. Take dexamethasone (Decadron®) **with dinner before 6:00 pm**. If you take this medicine after 6 pm you may find it hard to fall asleep.
4. Take senna (Senokot®) at night.

### Day 3

1. Take dexamethasone (Decadron®) **with breakfast.**
2. Go to your **radiation** treatment appointment. Your appointment will be about 15 to 20 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.
3. Take dexamethasone (Decadron®) **with dinner before 6:00 pm.**  
If you take this medicine after 6 pm you may find it hard to fall asleep.
4. Take Senna (Senokot®) at night if you have constipation.

### Day 4

1. Go to your **radiation** treatment appointment. Your appointment will be about 15 to 20 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.
2. Take Senna (Senokot®) at night if you have constipation.

### Day 5

1. Go to your **radiation** treatment appointment. Your appointment will be about 15 to 20 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.

### Day 6 and 7

You have no treatment on these days.

## Week 2 of radiation treatment and chemotherapy



### Take your anti-nausea medicine:

If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take prochlorperazine (Stemetil®) every 6 hours as needed.



### Go to your doctor's appointments:

This week you may have 2 appointments with 2 doctors. One appointment with your gynecology oncologist (chemotherapy cancer doctor) and one appointment with your radiation oncologist (radiation cancer doctor).



### Get a blood test:

Do this at least 1.5 hours before the appointment with your gynecology oncologist (chemotherapy cancer doctor).

## Days 8 to 14

1. Take ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®) **one hour** before your chemotherapy appointment. Confirm your chemotherapy appointment time with the receptionist before you take them.
2. Go to your **chemotherapy** appointment. The appointment will last for 2 hours. You will receive a chemotherapy medicine called Cisplatin through a vein in your hand or arm.
3. Go to your **radiation** treatment appointment. Your appointment will be about 15 to 20 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.

## Week 3 of radiation treatment and chemotherapy



### Take your anti-nausea medicine:

If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take Stemetil® (prochlorperazine) every 6 hours as needed.



### Go to your doctor's appointments:

This week you may have 2 appointments with 2 doctors. One appointment with your gynecology oncologist (chemotherapy cancer doctor) and one appointment with your radiation oncologist (radiation cancer doctor).



### Get a blood test:

Do this at least 1.5 hours before the appointment with your gynecology oncologist (chemotherapy cancer doctor).

## Days 15 to 21

1. Take ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®) **one hour** before your chemotherapy appointment. Confirm your chemotherapy appointment time with the receptionist before you take them.
2. Go to your **chemotherapy** appointment. The appointment will last for 2 hours. You will receive a chemotherapy medicine called Cisplatin through a vein in your hand or arm.
3. Go to your **radiation** treatment appointment. Your appointment will be about 15 to 20 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.

## Week 4 of radiation treatment and chemotherapy



### Take your anti-nausea medicine:

If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take Stemetil® (prochlorperazine) every 6 hours as needed.



### Go to your doctor's appointments:

This week you may have 2 appointments with 2 doctors. One appointment with your gynecology oncologist (chemotherapy cancer doctor) and one with your radiation oncologist (radiation cancer doctor).



### Get a blood test:

Do this at least 1.5 hours before the appointment with your gynecology oncologist (chemotherapy cancer doctor).

## Day 22 to 28

1. Take Zofran® (ondansetron hydrochloride) and dexamethasone (Decadron®) **one hour** before your chemotherapy appointment. Confirm your chemotherapy appointment time with the receptionist before you take them.
2. Go to your **chemotherapy** appointment. The appointment will last for 2 hours. You will receive a chemotherapy medicine called Cisplatin through a vein in your hand or arm.
3. Go to your **radiation** treatment appointment. Your appointment will be about 15 to 20 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.

## Week 5 of chemotherapy and radiation treatment



### Take your anti-nausea medicine:

If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take Stemetil® (prochlorperazine) every 6 hours, as needed.



### Go to your doctor's appointments:

This week you may have 2 appointments with 2 doctors. One appointment with your gynecology oncologist (chemotherapy cancer doctor) and one with your radiation oncologist (radiation cancer doctor).



### Get a blood test:

Do this at least one hour before the appointment with your gynecology oncologist (chemotherapy cancer doctor).

## Days 29 to 35

1. Take ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®) **one hour** before your chemotherapy appointment. Confirm your chemotherapy appointment time with the receptionist before you take them.
2. Go to your **chemotherapy** appointment. The appointment will last for 2 hours. You will receive a chemotherapy medicine called Cisplatin through a vein in your arm.
3. Go to your **radiation** treatment appointment. Your appointment will be about 15 to 20 minutes. Check-in at the 2B (2 floors below the main floor) front desk with your green card that has a barcode.

## Who to contact if you have questions

### **Questions about appointment dates and times**

#### **Gynecology Oncology Reception**

Phone: 416 946 2220, Press 1.

### **Questions about treatment and side effects**

#### **Weekdays from 9:00 am to 4:00 pm**

Gynecology Oncology Nursing

Phone: 416 946 2220

Press 2, then leave a message

#### **After hours, weekends and holidays**

Afterhours Carepath Cancer Nurse

Phone: 1 877 681 3057

Weekdays: 5:00 pm to 8:30 am

Weekends and holidays: available 24 hours

### **Questions about medicine**

Pharmacy Triage Line

Phone: 416 946 4501 extension 3345

A pharmacist will return your call within 72 hours

### **How to pick up your medicine prescriptions**

(Monday to Friday 9:00 am to 5:30 pm)

Outpatient Pharmacy

Phone: 416 946 6593

Before treatment starts

Start date (2 days before chemo): \_\_\_\_\_

**Note: If you have an ileostomy/colostomy do NOT take senna (Senokot®) unless your doctor has told you to.**

	2 days before chemotherapy	1 day before chemotherapy
<b>In the evening</b>	Take senna (Senokot®) in the evening	Take senna (Senokot®) in the evening



**Check your appointment schedules for exact times and locations:** Pick up your

2 appointment schedules with the times and dates for your chemotherapy and your radiation treatment appointments.



**Pick up your medicine from the pharmacy:**

If you use the Princess Margaret Outpatient Pharmacy you must pick up your prescriptions at least 3 days before your 1st treatment appointment. If you choose to use your local pharmacy, go as early as possible to make sure they have cancer-related medicines in stock.



**Week 1: External radiation and chemotherapy schedule** Start date (Day 1): \_\_\_\_\_

**Note: if you have an ileostomy/colostomy do NOT take senna (Senokot®) unless your doctor has told you to.**

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
<b>During the day</b>		Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>with breakfast</b>	Take dexamethasone (Decadron) <b>with breakfast</b>				
	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>1 hour before chemotherapy</b>						
	Go to <b>chemotherapy</b> appointment (2 hours)						
	Go to your first radiation treatment appointment (30 to 45 minutes). Check-in using your green card with a barcode at the 2B front desk	Go to your <b>radiation</b> treatment. Your appointment will be 15-20 minutes	Go to your <b>radiation</b> treatment (15-20 minutes)	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment 15-20 minutes).		
<b>In the evening</b>		Take dexamethasone (Decadron) <b>with dinner before 6pm</b>	Take dexamethasone (Decadron) <b>with dinner before 6pm</b>				
	Take senna (Senokot) at night	Take senna (Senokot) at night	Take senna (Senokot) at night if you are constipated	Take senna (Senokot) at night if you are constipated			




Take your anti-nausea medicine: If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take prochlorperazine (Stemetil®) every 6 hours, as needed.

## Week 2: External radiation and chemotherapy schedule

Start date (Day 8): \_\_\_\_\_

	Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
<b>During the day</b>	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>1 hour before chemotherapy</b>	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>with breakfast.</b>	Take dexamethasone (Decadron) <b>with breakfast.</b>				
	Go to <b>chemotherapy</b> appointment (2 hours)						
	Go to your <b>radiation</b> treatment appointment. Your appointment will be 15-20 minutes.	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).		
<b>In the evening</b>		Take dexamethasone (Decadron) <b>with dinner before 6pm</b>	Take dexamethasone (Decadron) <b>with dinner before 6pm</b>				

 **Take your anti-nausea medicine:** If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take prochlorperazine (Stemetil®) every 6 hours, as needed.

 **Go to your doctor's appointment:** This week you may have appointments with 2 doctors. One appointment with your gynecology oncologist (chemotherapy cancer doctor) and one appointment with your radiation oncologist (radiation cancer doctor).

**Get a blood test:** Do this at least 1.5 hours before your gynecology oncologist (chemotherapy cancer doctor) appointment.

**Week 3: External radiation and chemotherapy schedule Start date (Day 15): \_\_\_\_\_**

	Day 15	Day 16	Day 17	Day 18	Day 19	Day 20	Day 21
<b>During the day</b>	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>1 hour before</b> chemotherapy	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>with breakfast.</b>	Take dexamethasone (Decadron) <b>with breakfast.</b>				
	Go to <b>chemotherapy</b> appointment (2 hours)						
	Go to your <b>radiation</b> treatment appointment. Your appointment will be 15-20 minutes.	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment 15-20 minutes).		
<b>In the evening</b>		Take dexamethasone (Decadron) <b>with dinner before 6pm</b>	Take dexamethasone (Decadron) <b>with dinner before 6pm</b>				



**Take your anti-nausea medicine:** If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take prochlorperazine (Stemetil®) every 6 hours, as needed.



**Go to your doctor's appointment:** This week you may have appointments with 2 doctors. One appointment with your gynecology oncologist (chemotherapy cancer doctor) and one appointment with your radiation oncologist (radiation cancer doctor).



**Get a blood test:** Do this at least 1.5 hours before your gynecology oncologist (chemotherapy cancer doctor) appointment.

## Week 4: External radiation and chemotherapy schedule Start date (Day 22): \_\_\_\_\_

	Day 22	Day 23	Day 24	Day 25	Day 26	Day 27	Day 28
<b>During the day</b>	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>1 hour before chemotherapy.</b>	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>with breakfast.</b>	Take dexamethasone (Decadron) <b>with breakfast.</b>				
	Go to <b>chemotherapy</b> appointment (2 hours).						
	Go to your <b>radiation</b> treatment appointment. Your appointment will be 15-20 minutes.	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).		
<b>In the evening</b>		Take dexamethasone (Decadron) <b>with dinner before 6pm</b>	Take dexamethasone (Decadron) <b>with dinner before 6pm</b>				



**Take your anti-nausea medicine:** If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take prochlorperazine (Stemetil®) every 6 hours, as needed.



**Go to your doctor's appointment:** This week you may have appointments with 2 doctors. One appointment with your gynecology oncologist (chemotherapy cancer doctor) and one appointment with your radiation oncologist (radiation cancer doctor).



**Get a blood test:** Do this at least 1.5 hours before your gynecology oncologist (chemotherapy cancer doctor) appointment.

## Week 5: External radiation and chemotherapy schedule Start date (Day 29): \_\_\_\_\_

	Day 29	Day 30	Day 31	Day 32	Day 33	Day 34	Day 35
<b>During the day</b>	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>1 hour before chemotherapy.</b>	Take ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) <b>with breakfast.</b>	Take dexamethasone (Decadron) <b>with breakfast.</b>				
	Go to <b>chemotherapy</b> appointment (2 hours)						
	Go to your <b>radiation</b> treatment appointment. Your appointment will be 15-20 minutes.	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).	Go to your <b>radiation</b> treatment (15-20 minutes).
<b>In the evening</b>		Take dexamethasone (Decadron) <b>with dinner before 6pm</b>	Take dexamethasone (Decadron) <b>with dinner before 6pm</b>				



**Take your anti-nausea medicine:** If you still feel nauseous after taking ondansetron hydrochloride (Zofran®) and dexamethasone (Decadron®), take prochlorperazine (Stemetil®) every 6 hours, as needed.



**Go to your doctor's appointment:** This week you may have appointments with 2 doctors. One appointment with your gynecology oncologist (chemotherapy cancer doctor) and one appointment with your radiation oncologist (radiation cancer doctor).

**Get a blood test:** Do this at least 1.5 hours before your gynecology oncologist (chemotherapy cancer doctor) appointment.

Visit [www.uhnpatienteducation.ca](http://www.uhnpatienteducation.ca) for more health information. Contact us to provide feedback or request this brochure in a different format, such as large print or electronic formats: [pfep@uhn.ca](mailto:pfep@uhn.ca). The development of patient education resources is supported by the Princess Margaret Cancer Foundation.

© 2019 University Health Network. All rights reserved. Use this material for your information only. It does not replace advice from your doctor or other health care professional. Do not use this information for diagnosis or treatment. Ask your health care provider for advice about a specific medical condition. You may print 1 copy of this brochure for non-commercial and personal use only.