Skin reaction
Some people develop a skin reaction in the area being treated, especially on the back. Please do not worry as this is quite normal. During this time you should continue to follow the advice you have been given during your treatment and take any prescribed medication for the side effects, until they settle down.

Possible long-term side effects
Long-term side effects can occur many months to years after radiotherapy has finished. These late side effects are hard to predict and unfortunately if they do occur, they may be permanent. We plan the treatment to avoid the surrounding areas around the tumor as much as possible to reduce these side effects.

Narrowing of the food pipe (Oesophagus)
The gullet can remain narrow, or become narrow after the radiotherapy. If you experience on-going swallowing difficulties more than two months after completing your treatment you may need further investigation and treatment. If this is due to narrowing of the gullet caused by scarring after radiotherapy, you may need an endoscopy or an internal stent to stretch the gullet.

Breathlessness
Inflammation (pneumonitis) and scarring (fibrosis) of the lung can happen, if the lung has been in the area of treatment. This may cause you to feel breathless. This usually occurs two to three months after finishing treatment. It may be possible to learn breathing exercises or use medication that will help reduce your breathlessness.

After treatment
You will usually be asked to return to the Outpatient Clinic to be reviewed by your oncology consultant or team, and for any further investigations if required.

How to contact us
If you have any queries during your radiotherapy treatment, contact your doctor on your specified follow up day.

MISSION STATEMENT
To act as a model institution to alleviate the suffering of patients with cancer through the application of modern methods of curative and palliative therapy irrespective of their ability to pay, the education of health care professionals and the public and perform research into the causes and treatment of cancer.
You have been given this leaflet as you have been recommended treatment with radiotherapy for cancer of your oesophagus (food pipe) or stomach. The general Radiotherapy leaflet will explain what the treatment involves, common side effects and some general information about the department. This leaflet—Radiotherapy for cancer of the oesophagus (food pipe) or stomach provides more specific detail about the type of treatment planned for you and how you can help yourself during and after treatment.

Radiotherapy with chemotherapy
Radiotherapy can be given with chemotherapy to control the growth of the tumour. This can decrease tumour size or, in some cases, even lead to a cure. This type of radiotherapy is called radical chemo-radiotherapy. This is usually given as 25–28 daily treatments over five–six weeks.

Chemo-radiotherapy can be given in one of the following ways:
1) Cisplatin infusion (given over one day in the first and fourth week during the radiotherapy course) and capecitabine tablets daily.

Or
2) Cisplatin infusion (given over one day in the first and fourth week during the radiotherapy course) and 5FU infusion through chemotherapy pump (given over day one to four during 1st and 4th week of treatment)

Or
3) Carboplatin and paclitaxel infusions given weekly during the radiotherapy course. The chemotherapy infusion is administered in the Chemotherapy Bay Unit. If you are having this treatment, your doctor will explain the details of the chemotherapy plan in clinic and will provide you with a chemotherapy information sheet.

Radiotherapy to help control symptoms
Radiotherapy can be given to treat symptoms related to cancer that are causing problems. These can happen because the growth of the tumor narrows the food pipe, causing swallowing difficulties, or it can cause pain or bleeding. Radiotherapy can relieve this pressure by shrinking the tumor. It may be possible to control the growth of the cancer for a while with radiotherapy, but it is not usually possible to get rid of it completely. This type of radiotherapy is called palliative radiotherapy. It may be given as 5 or 10 daily treatments or as a single treatment.

Nutrition
Your requirements for calories and protein increase during and after radiotherapy, so it is important to increase your intake to keep your weight stable. We will aim to keep your weight stable during treatment and will monitor this carefully. Please make sure you follow any nutritional advice as much as possible.

Feeding tube
If you have swallowing problems before starting treatment, you may be advised or already have a feeding tube called a gastrostomy tube. This is an arrow tube that is inserted through a small opening on your abdomen. This tube can be used for nutrition, water and medications.

If you are struggling to drink enough, extra fluid can be given through a syringe into your feeding tube, to prevent you becoming dehydrated. Your dietician can advise you how much fluid to have. Once you have completed treatment and are able to eat and drink enough, the feeding tube will be removed. This is usually a straightforward procedure.

Side effects of radiotherapy
Radiotherapy treatment is painless. However, there are some side effects which are associated with the treatment. You may notice one or more of them gradually developing over the course of the treatment, but it is rare to experience all of these side effects.

Tiredness
You may feel tired, especially toward the end of treatment. Allow yourself extra time to rest and sleep. The tiredness gradually wears off, but usually takes at least a month after the treatment ends.

Nausea (feeling sick)
This may occur during your treatment. We will give you anti-sickness tablets to take before each treatment. If you continue to feel sick or you are vomiting (being sick) despite taking the anti-sickness medication, please tell your doctor, so that your medication can be changed.

Soreness when eating or swallowing, or indigestion
Radiotherapy can cause your gullet or stomach to become inflamed and sore, making swallowing more uncomfortable or difficult. If you are having chemotherapy, your mouth might become sore as well. If you notice soreness or pain, please let your doctor know.

Difficulty swallowing
Swallowing can become more difficult during radiotherapy treatment. Try eating soft and moist foods with high protein content, such as porridge made with whole milk, eggs, custard, rice puddings and soups. It is also helpful to chew your food well before swallowing. If your mouth or throat becomes sore but you are still able to eat, it may be a good idea to avoid spicy or ‘acidic’ foods such as curry, chillies, vinegar, tomatoes and citrus fruits. Food and drinks at room temperature may be more comfortable.

Dry cough
You may develop a dry cough; it may be eased by sipping water or other drinks. Some people find a simple cough medicine helps. The irritation caused by the radiotherapy should settle within a few weeks of completing your treatment.