

Skin Care during and after Radiotherapy

Northern Centre for Cancer Care (NCCC)

Freeman Hospital

Introduction

This leaflet has been written to give you general information and answer some of the questions you may have about skin care during and after your radiotherapy.

We hope you will find this helpful. If you have any questions please do not hesitate to ask your radiographer, nurse or oncologist.

How does radiotherapy affect my skin?

Skin reactions are one of the most common side effects from radiotherapy. Radiotherapy works by damaging the cells in the area of treatment and this usually includes the skin. Radiotherapy machines are designed to spare the skin as much as possible i.e. the maximum dose of radiation will occur beneath the skin surface. In certain circumstances the oncologist will want to include the skin in the area of treatment or sometimes including the skin is unavoidable.

Factors that can influence a skin reaction

- Smoking can increase the skin reaction
- Those with very fair sensitive skin, also black and Asian skin may be more at risk
- Treatment to where there are skin folds. Areas such as the groin, buttock, breast folds or the armpit can be hot, moist and the skin can rub causing friction.
- Patients having treatment to the head and neck area are at increased risk of a skin reaction due to sensitivity within this area
- Having chemotherapy at the same time as radiotherapy
- The amount of radiotherapy dose to the skin
- Some people have a genetic defect that can increase the skin reaction –we cannot predict those people at risk

Please remember that radiotherapy is planned individually for each patient and you will be given advice on looking after your skin by the radiographers when you attend for treatment.

During your course of treatment your skin will be checked by the radiographers on a daily basis. You will be seen in clinic usually once a week by your oncologist, specialist radiographer or nurse who will check your skin as part of the review.

What can I expect?

For the majority of people a skin reaction develops about two weeks into treatment. At first you may notice a mild reddening and that the skin within the treatment area feels warm, sensitive and tight rather like a “sun reaction”. This is called erythema and is helped by using a simple moisturiser. Your oncologist, radiographer or nurse will let you know which cream is best to use.

Towards the end of your treatment the skin can become more dry and scaly, feeling irritated, sore and itchy. This is called dry desquamation. This often continues for up to two weeks after treatment has finished. Your oncologist, radiographer or nurse will let you know which cream is best to use.

For some people the skin reaction can become red and inflamed and the skin may appear moist or broken. This is called “moist desquamation” and can be very uncomfortable and distressing. This can happen where the skin folds, e.g. under the breast, in the groin or buttock area. We will assess the best way of looking after your skin which may involve dressings and a daily wound care plan.

Please tell your radiographers if you have any concerns about your skin.

If you are having a short course of radiotherapy (one to ten treatments) you may notice your skin reaction developing some time e.g. a week or two after your treatment has finished. The radiographers will give you advice on your last treatment on how to look after your skin.

As the skin changes cannot be prevented we would like you to follow this simple advice to minimise symptoms and promote and maintain comfort for as long as possible.

General advice

Please follow this advice to keep your skin in good condition.

- Do not soak the area in the bath or under a long hot shower. You may wash the treated area using a simple, unperfumed soap or gel, applying gently with your hands and rinsing the area well with warm water. Avoid using flannels or sponges. Pat the area dry with a soft towel or let the skin dry naturally. Be careful to pay extra attention to skin folds such as those under the arm, breast, groin or buttocks.

- You will be given or recommended a moisturising cream from the radiographers or nurses to soothe the skin.
- Keep the area cool if possible by wearing loose, preferably cotton, clothing that does not rub the skin. This will allow air to circulate.
- Do not expose the treated area to the sun for long periods. Whilst in the sun the treated area should be covered completely or a high protective factor sun cream (25 or above) should be applied.
- Do not use a sun bed, as this could worsen the reaction.
- Do not use talcum powder, bubble baths, bath salts or body lotions in the treated area as they tend to dry or irritate the skin.
- Do not use adhesive tape (such as Elastoplasts or micro pore) on the treatment area.
- You may continue to use your normal deodorant unless it is found to irritate your skin.
- You may use an electric shaver for removing hair in the treatment area during your radiotherapy unless it is found to irritate the skin.
- If you like to swim please ask your radiographers for personal advice if you wish to continue swimming during your treatment as sometimes the chlorine can dry or irritate the skin. Please avoid swimming if you have a bad skin reaction until it has healed.
- Avoid extremes of temperature on the treated area. Do not use hot water bottles or cold packs.
- Don't smoke, or at least cut down. Smoking may also reduce the effectiveness of treatment and can often make the side effects much worse. If you need help to stop smoking, please ask as we offer a stopping smoking service here.

If you are worried about your skin reaction during treatment please speak with your radiographers.

What happens when treatment has finished?

Symptoms often persist or worsen after treatment has finished. It is usually 7- 10 days **after** completion of treatment that reactions are at their peak.

- We recommend that you take extra care of your skin during and up to six weeks after your radiotherapy has finished.

- Continue with your skincare routine until your skin has returned to normal.
- Your skin will always be more sensitive to the sun particularly the first 12 months after radiotherapy, therefore you should avoid exposing the treated area to strong sunlight and use a high factor suncream (factor 25-50)

On your last treatment you will be given a discharge summary of your treatment including information on any side effects, creams or medications you are using. A copy will be provided for your GP.

Useful contacts and websites

Northern Centre for Cancer Care Macmillan Information and Support Centre
0191 2138611 (voicemail)

Opening hours

Monday to Friday from 9.00am to 4.30pm

Newcastle upon Tyne Hospitals NHS Foundation Trust

www.newcastle-hospitals.org.uk

Macmillan Cancer Support

Freephone 0808 800 00 00

www.macmillan.org.uk

The Patient Advice and Liaison Service (PALS) can offer on-the-spot advice and information about the NHS. You can contact them on freephone 0800 032 02 02 or e-mail northoftynepals@nhct.nhs.uk

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