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# Guidelines for Nursing staff (Radiotherapy)





## **Nursing Research Unit**





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- 1. Aim:
- Nursing Guidelines is to provide comprehensive, current, evidence-based nursing care for nursing staff who works with patients undergone or are receiving radiotherapy.

#### 2. Desired Outcome:

- **1.** Reduce variations in nursing care and promote best practice.
- 2. Develop an evidence-based nursing clinical practice guideline for nursing staff who works with patients undergone or are receiving radiotherapy.



#### **3.** Introduction:

Radiation therapy (also called radiotherapy, irradiation, or x-ray therapy) is a cancer treatment using different forms of ionizing radiation.

Radiotherapy is an important method for treating cancer and is usually used in conjunction with other therapies, such as chemotherapy or oncologic surgery. Radiotherapy can be used during different stages of cancer treatment and for different outcomes.

Radiation therapy can play a significant role in the cure or shrinkage of early-stage cancer, stop cancer from coming back (recurring), treat symptoms caused by advanced cancer or treat cancer that has returned (recurred). However, it has also side effects like other treatment modalities. The side effects of radiation therapy can interfere with patient quality of life and daily activities. Severe side effects can lead to delays in treatment, potentially affecting the outcome of treatment.

All patients receiving radiation therapy are at risk of fatigue and skin reactions in the area of the body being treated. Other side effects of radiation therapy are specific to the part of the body being treated. Radiation therapy to the head and neck area may cause oral mucositis, dryness, and nutritional deficiencies. Radiation therapy to the chest or lung area may lead to difficulty in swallowing and eating. Radiation therapy to the pelvis frequently causes diarrhea. There are many nursing interventions available to manage the side effects of treatment based on best available evidence and expert opinion. Nurses in all settings have the major role in helping patients manage the side effects of treatment and maintain their quality of life as high as possible. Side effects of radiation depend on treatment site, daily dose, concurrent chemotherapy, and individual patient characteristics (Table 1).



#### 4. Types of Radiotherapy:

#### **1.** External radiation (or external beam radiation)

External-beam radiation therapy delivered in the form of photon beams (either x-rays or gamma rays). A photon is the basic unit of light and other forms of electromagnetic radiation. It can be thought of as a bundle of energy. The amount of energy in a photon can vary.

Many types of external-beam radiation therapy are delivered using a machine called a linear accelerator (also known as a LINAC). A LINAC uses electricity to form a stream of fast-moving subatomic particles. This creates high-energy radiation that may be used to treat cancer.

Patients usually receive external-beam radiation therapy in daily treatment sessions over the course of several weeks. The number of treatment sessions depends on many factors, including the total radiation dose that will be given. One of the most common types of external-beam radiation therapy is called 3-dimensional conformal radiation therapy (3D-CRT). 3D-CRT is an advanced form of conformal radiation therapy delivered on a linear accelerator. Intensity-modulated radiation therapy (IMRT) and Volumetric-modulated arc therapy (VMAT) uses very sophisticated computer softwares and advanced treatment machines to deliver radiation to very precisely shaped target areas. They both target cancer while sparing healthy tissue.



#### 2. Internal or near radiation therapy:

Internal or near radiation therapy (brachytherapy) is radiation delivered from radiation sources (radioactive materials) placed inside or on the body. Several brachytherapy techniques used in cancer treatment. Interstitial brachytherapy uses a radiation source positioned within tumor tissue. Intracavitary brachytherapy uses a source placed within a surgical cavity or a body cavity, such as the chest cavity, near a tumor. Episcleral brachytherapy, which is used to treat melanoma inside the eye, uses a source that is attached to the eye In brachytherapy, radioactive isotopes a sealed in tiny pellets or "seeds." These seeds are placed in patients using delivery devices, such as needles, catheters, or some other type of carrier. As the isotopes decay naturally, they give off radiation that damages nearby cancer cells.

If left in place, after a few weeks or months, the isotopes decay completely and no longer give off radiation. The seeds will not cause harm if they are left in the body.

#### 3. Systemic radiation therapy:

In systemic radiation therapy, a patient swallows or receives an injection of a radioactive substance, such as radioactive iodine or a dangerous substance bound to a monoclonal antibody radioactive iodine: is a type of systemic radiation therapy commonly used to help treat some types of thyroid cancer. Thyroid cells naturally take up radioactive iodine.



## **5.** Side effects of radiation therapy by Treatment Site (**Table 1**):

Items	Brain	Head and	Breast	Chest	Abdomen or pelvis
Hair loss(in area of body being	N	N		N	<mark>√</mark>
treated)					
<b>S</b> kin changes (in part of body	N	N	N	N	<mark>√</mark>
being treated)					
Fatigue	N	N	N	N	<mark>√</mark>
Diarrhea					√
Nausea and vomiting					<mark>√</mark>
Mouth changes, mucositis,	N	N			
xerostomia					
esophagitis				N	
Urinary and bladder changes					N
Headache , blurry vision	V				
Tast changes		N			
Tenderness or swelling			<mark>√</mark>		
<b>C</b> oughing , Shortness of breath				V	



## 6. Nursing interventions for common side effects of radiation therapy (Table 2):

#### Note:

- ✓ Any medical side effects should be reported to the doctor.
- ✓ Any medication should be given as doctor recommendations.

Side effect	Definition	Nursing intervention			
General side effects					
1. Fatigue	Fatigue is a significant symptom and	- Limit daily activities, if possible, balancing			
	acute effects associated with	activities and rest especially before and after			
	radiotherapy.	radiotherapy session.			
	- Common during and in the first few	-Assess any signs and symptoms and report to the			
	weeks post treatment.	doctor.			
		Promote a restful environment.			
		-Keeping to a sleep schedule and creating a			
		comfortable sleep environment can lead to			
		improved sleep and less fatigue.			
		-Increase rest by getting more sleep at night, taking			
		naps during the day.			
		-Eat and drink well, with foods high in protein and			
		calories.			
		-Keep lights and noise to a minimum overnight to			
		encourage patients to sleep and reduce feelings of			
		fatigue.			
2. Nausea and	-Nausea is the feeling of sickness or	Teach patient to sit upright after vomiting.			
Vomiting	discomfort that a person associates	Eat small snacks and meals.			
-	with the urge to vomit.	Eat and drink slowly.			
	-Vomiting, or throwing up, occurs due	Avoid having liquids with meals.			
	to the action of the diaphragm and	Avoid spicy, acidic, or rich foods.			



	abdominal muscles. These muscles	Eat in a place that does not have strong smells.
	contract and push stomach contents	Allow the child to choose like and dislike food.
	up the esophagus and out the mouth	Keep a record of symptoms.
		=Write down when nausea occurs, what makes it
		worse, what makes it better, and any other
		symptoms such as pain, loss of appetite, diarrhea.
		or constipation.
		Do not offer favorite foods when child is
		nauseous.
		Avoid lying down flat after meals.
		Make sure to rinse the mouth after vomiting.
		stomach acid can cause mouth irritation and tooth
		decay.
		Sip liquids slowly throughout the day.
		Relay and take slow, deep breaths
		Avoid unpleasant sights, odors & taste
		Administer antiemetic to prevent or minimize
		nausea as doctor order.
		Monitor fluid and electrolyte status as doctor
		order.
	Specific side effe	ects
1. Radiation	- Is a common side effect of radical	- Nursing Intervention for Grade 1
dermatitis	ionizing radiation treatment.	-Patient assessment to include location, size of
	Grada 1	area and color and report to the doctor.
Radiation Dermatitis	Clinical Presentation	-Assess any signs and symptoms and report to the
Candos	Erythema	
Grades	Pink to dusky coloration     May be accompanied by mild adama	doctor.
Normal- No changes in	Burning, itching and mild discomfort	- Give patients medication as doctor order to
skin	<ul> <li>Dry desquamation</li> <li>Partial loss of the epidermal basal cells</li> </ul>	reduce inflammation.
Grade 1 – Faint	• Dryness, itching, scaling, flaking and peeling	Avoid adhesive tape. Extend dressing out of
erythema or	Brisk Erythema	treatment area and adhere to intact skin with
desquamation.		paper tape. Secure dressing with cling gauze, net



Grade 2 – Moderate to brisk erythema or patchy, moist desquamation confined to skin folds and creases. Moderate edema. Grade 3 – Moist desquamation in areas other than skin folds

and creases; bleeding

induced by minor

trauma or abrasion

Grade 4 – Lifethreatening consequences; skin necrosis or ulceration of full ,thickness dermis; spontaneous, bleeding from involved site; skin. graft indicated.





tubing or under clothin as doctor order.

- Keeping the skin clean and moisturized and protecting skin from irritation, injury, and infection. -Avoid scratching the skin in the treated area. It could increase the chance of infection.

-Check to make sure that clothes, shoes, and medical devices do not rub or chafe the skin.

-Teach patient to Bathe using warm water and palm of hand to gently wash affected skin. Rinse well and pat dry with a soft towel.

-Wash hair using warm water and mild, nonmedicated shampoo such as baby shampoo as doctor order.

-Do not rub skin and avoid irritant products -Protect skin from direct sunlight and wind exposure by wearing a wide brimmed hat and protective clothing

-Avoid extremes of heat and cold, including hot tubs, heating pads and ice packs

- Wash skin gently.

-Avoid rubbing, scrubbing, or scratching irritated skin.

-Don't use moisturizers within one hour before or after a radiation treatment.

-Wear cotton soft, loose fitting clothes avoid tight

clothes in the area being treated and keep

fingernails trimmed to avoid injury.



	Grade 2 – Grade 3	Nursing Intervention for Grade 2 – Grade 3
	<ul> <li>Moist Desquamation</li> <li>Sloughing of the epidermis and exposure of</li> </ul>	-Patient assessment to include location of moist
	the dermal layer	and dry areas, size of area, wound base: Granular
	<ul> <li>Bilster or vesicle formation</li> <li>Serous drainage</li> <li>Pain</li> <li>Moist Desquamation</li> </ul>	tissue, eschar or necrotic tissue, exudate: Type,
		amount, odor and report to the doctor.
		-Assess any signs and symptoms of discomfort as
		burning, itching, pulling, tenderness and report to
		the doctor.
		- assess level of pain and swelling extending
		outside the treatment area and report to the
		doctor.
		-Manage Pain by Prevent trauma to the treatment
		area, cover open areas to protect nerve endings
		<ul> <li>To decrease burning and tenderness use non-</li> </ul>
		adherent or low adherent dressings as order.
		• Administer analgesics as ordered by the physician
		• Assess any Signs of clinical infection as fever, foul
		odor, purulent drainage
		<ul> <li>Apply antibacterial/antifungal products as</li> </ul>
		ordered by the physician.
	Grade4	Nursing Intervention for Grade4
Rarely • Skin dermis • May	Rarely occurs • Skin necrosis or ulceration of full thickness	-Patient Assessment see above in grade 2 and 3
	dermis • May have spontaneous bleeding from the	-Assess any signs or symptom of bleeding and
	<ul> <li>May have spontaneous bleeding from the site</li> <li>Pain</li> <li>Skin necrosis</li> </ul>	report to the doctor.
• Pair Skin r		- Promote hygiene to prevent spread of infection.
		-Prevent/treat infection as physicians order.
		-Prevent trauma



		- Assess level of pain and manage pain as physicians order.
2. Alopecia	-Hair loss (alopecia) is a common side	-Explain hair loss is temporary, and hair will grow
	effect of some cancer treatments	when drug is stopped.
	including chemotherapy and radiation	-Avoid excessive brushing and combing of the air.
	therapy.	- use a hairbrush with soft bristles or a wide-tooth
		comb.
		-Do not use hair dryers, irons, or products such as
		gels or clips that may hurt your scalp.
		-Wash the hair very gentle and dry it with a soft
		towel.
		-Select wig, cap, scarf or turban before hair loss
		occurs.
		-Use sunscreen or wear a hat when you are outside
		and keep head covered in summer to prevent
		sunburn and in winter to prevent heat loss.
		-Be Gentle When the hair starts to grow back and
		avoid too much brushing, curling, and blow-drying
		-Do not use vitamins, supplements, or topical hair
		growth products without talking to a doctor
3. Diarrhea	It is a condition where stools become	Monitor number, frequency and consistency of
	loose or watery and occur more often	diarrhea stools.
		Assess patient's weight, dietary preferences, the
		pattern of bowel elimination.



			Give antidiarrheal medication as doctor order.
			Avoid eating high roughage, greasy and spicy
			food.
			Encourage High-calorie, high-protein, low-residue
			diet in small, frequent meals (cottage cheese,
			yogurt, broth, fish, custard, cooked cereals, cooked
			vegetables, peeled apples, and macaroni), and
			liquid diet if diarrhea is severe as doctor order.
			Assess perianal skin for integrity and signs and
			symptoms of irritation.
			Assess any signs and symptoms as Cramping or
			lose control of bowel movements and report to the
			doctor.
			-Monitor intake/output, daily weight and report to
			the doctor.
			- Monitor hydration status and report to the
			doctor.
4.	Mouth changes	- Mucositis is a swelling of the	-Assess any signs and symptoms of oral mucositis
	as mucositis	mucous membrane, the moist, inner	as pain, redness, inflammation or bleeding and
	,xerostomia,tas	lining of some body organs.	report to the doctor.
	t changes	- Xerostomia : it is a sensation of oral	- Frequent oral rinsing, sipping on ice water or ice
		dryness along with an objective	chips as doctor order.
		decrease in the production of saliva.	-Assess any signs and symptoms of fungal infection
		<i>Fungal infection</i> (Oral candidiasis)	(Oral candidiasis) as white patches on the inner
		is a condition in which the fungus	cheeks, tongue, roof of the mouth, and throat,
		Candida albicans accumulates on the	redness or soreness, cotton-like feeling in the
		lining of the mouth.	mouth, loss of taste, pain while eating or



		swallowing and report to the doctor.
	· · ··································	-Monitor pain level and give patients medication to
	Contraction of the second	relieve pain according to doctor order.
		-Give antifungal medicines if to reduce and treat infection according to doctor order. -Encourage a diet high in protein and vitamins and
		soft foods.
		-Encourage the patients to take small frequent
		meals or snacks spaced throughout the day.
		-Teach the patients to:
	Constant of the second s	-brush teeth after each meal to prevents organisms
		being trapped on gums, or teeth.
		- Use a soft toothbrush to avoid scraping the
		lesions.
		-Rinse the mouth after eating or taking medicine.
		- To Follow oral mucositis guidelines for
		assessment & management from hospital policy.
		Please click on the link below:
		http://10.250.1.6/pp/10-
		HOSPITAL%20PROGRAMS/PROG-014-
		Oral%20Health%20Prevention%20and%20Managin
		<u>g.pdf</u>
5. Esophagitis	It is inflammation that may damage	-Assess any signs and symptoms as difficult
	tissues of the esophagus, the	swallowing, painful swallowing or chest pain and
	muscular tube that delivers food from	report to the doctor.
	the mouth to the stomach.	- Assess Level of pain and report to the doctor.
		-Give patients medication according to doctor



			order.
			-Assess and manage pain level and give patients
			medication as order.
			-Teach the patients to sit or stand for minimum of
			30 minutes after eating.
6.	Urinary and	-Burning or pain when urinating	-Monitor intake and output and report to the
	Bladder	(oliguria, unuria, dysuria)	doctor.
	Changes	-Blood in your urine(hematuria)	-Encourage child to go to bath room and ask
			mother to observe any changes in urine color and
			document to the doctor.
			-Encourage patient to urinate before going to bed
			for the night to empty the bladder.
			-Assess any signs and symptoms as blood in the
			urine, pink or red urine, Frequent urination or urge
			to urinate, trouble urinating, incomplete emptying
			of bladder or pain during urination and report to
			the doctor.
			-Urinalysis is also a recommendation to evaluate
			for the presence of hematuria, proteinuria, or
			bacterial infections as order.
			-Encourage patients to drink plenty of liquids as
			order.
7.	Coughing	<i>It</i> is a sudden expulsion of air through	-Monitor patient's vital signs (temperature, pulse,
		the large breathing passages that can	heart rate and respiration and report to the doctor
		help clear them of fluids, irritants,	for any abnormality.
		foreign particles and microbes.	-Assess the amount of sputum, or mucus and color
			and report to the doctor.



			-Assess any signs and symptoms as dry and tickly
			or cough up blood report to the doctor.
			-Teach patients to cough and breathing exercise.
8.	Shortness of	also known as dyspnea is a feeling of	-Give patients oxygen as doctor order.
	breath (SOB)	not being able to breathe well	- Remove or loosen tight clothing.
		enough.	-Sit up the patient in a resting position to feels
			comfortable.
			-Remind the patients to breathe in slowly and
			deeply, then exhale slowly breathing exercises.
			- Give patient medication as doctor order to help
			for reduce breathlessness.
9.	Headache and	It is a pain in any region of the head.	-Assess onset, location, frequency, duration,
	blurry vision		severity, and character.
			-Assess any changes or loss in vision or increase
			tearing and report to the doctor.
			-Assess eye symptoms as Conjunctivitis or Keratitis and report to the doctor. -give the patient medication as doctor order.
			-Monitor vital signs and report any changes in heart
			rate / breathing, blood pressure to the doctor.
			-Observe for nonverbal signs of pain, are like: facial
			expression, posture, restlessness, crying and report to
			the doctor.
			- Note the influence of pain such as: loss of interest in
			life, decreased activity, weight loss.
			- Suggest to rest in a quiet room.
			- Observe for nausea / vomiting and report to the
			doctor.
10	. Tenderness or		-Assess sites for redness, edema or any signs of



swelling	inflammation and report to the doctor.
	-Assess if swelling increase or any signs of
	inflammation and report to the doctor.



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