

Information for patients receiving treatment for a brain tumour

Your Primary Team at the Juravinski Cancer Centre (JCC)

Radiation Oncology Doctor _____

Radiation Oncology Nurse _____

Secretary _____ , 905-387-9495, Ext. _____

Medical Oncology Doctor _____

Medical Oncology Nurse _____

Secretary _____ , 905-387-9495, Ext. _____

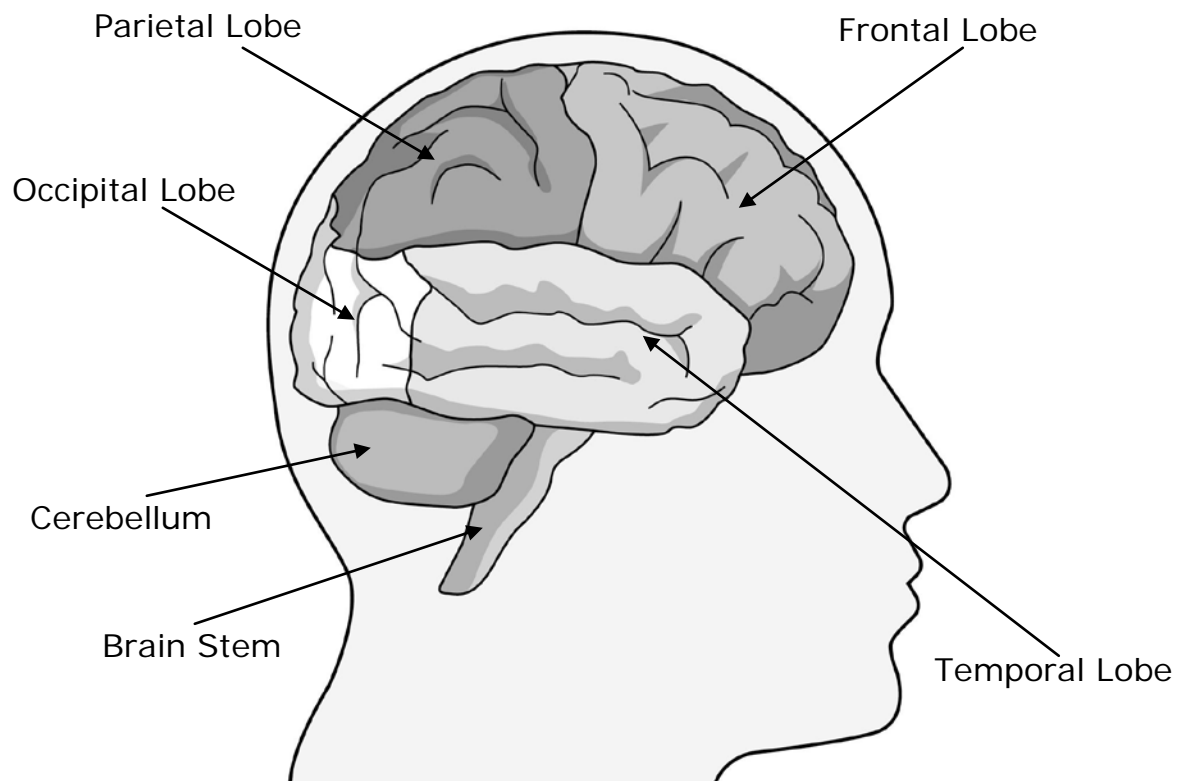
Clinical Trials Nurse _____

Contacting your Primary Team

You can call your primary team anytime between 9:00 am and 4:00 pm, Monday to Friday. When you call in, you will be connected to your oncologist's secretary. She will take a message and have the doctor or nurse return your call.

For urgent problems after 4:00 pm or on the weekends, please do not call the JCC. Call your family doctor or go directly to the nearest Emergency Department or Urgent Care Centre.

The brain



Different parts of the brain help control how we think, talk, see, hear, feel and remember. How your brain tumour affects you depends on its location.

Treatment for a brain tumour can also affect how your brain works. Treatment may include: surgery, radiation and/or chemotherapy.

Your primary team will discuss with you your treatment options.

Surgery

There are different types of surgery:

- All of the tumour is removed.
- Some or part of the tumour is removed.
- A biopsy is done. A biopsy is when a sample of the tumour is removed to see what type of tumour it is.

Sometimes, surgery is not possible because the tumour is in an area where it is too dangerous to remove.

Your neurosurgeon will discuss which option is best for you.

Radiation therapy

Radiation therapy is a cancer treatment that uses high energy x-rays to destroy cancer cells.

The 3 steps of radiation planning

Before radiation can start, you will need to come to the JCC for radiation planning.

Step 1: Making a face mask

A face mask is made for you in the Mould Room. The purpose of this is to make sure that you are in the correct position during your treatments. It also helps keep you still during your radiation treatments.

Step 2: CT Simulation

CT simulation is a CT scan done for radiation planning. You wear your face mask for the CT scan. The radiation therapist takes several measurements and x-rays while you are lying on a special table.

If you have not had a recent MRI, you will be sent for one.

Your radiation oncologist uses the MRI and the x-rays taken during CT simulation to plan your radiation.

Step 3: Receiving your radiation

Your radiation treatments are daily from Monday to Friday. Treatments are given in a specially designed treatment room. You wear your face mask for every treatment.

During the treatment you are alone in the treatment room, but the radiation therapists are able to see you and communicate with you through a TV monitor.

Radiation is similar to having an x-ray taken. It is painless, you cannot see or feel it. The actual treatment is only a few minutes, but getting into position and applying the face mask may take up to 30 minutes.

Side effects of radiation therapy

Radiation therapy is used to destroy cancer cells. However, some of your normal cells are also damaged during radiation. Some side effects are temporary and will lessen and go away in about 4 weeks after your radiation is done. Some side effects are permanent, and do not go away.

Early side effects

Early side effects that may occur during radiation treatment and can last for several weeks after treatment include:

- fatigue or tiredness
- nausea or feeling sick to your stomach
- headaches – radiation can cause the brain to swell. This swelling increases the pressure in the in brain which causes headaches. Tell your oncologist if you have severe headaches or if you wake up with a headache. You may need medicine such as a steroid pill to prevent headaches.
- hair loss which may be permanent
- seizures – you may need medication to prevent seizures
- dizziness
- skin changes to the scalp

Late effects

Late side effects that may occur after radiation treatment and can last for several weeks after treatment include:

- memory loss
- permanent hair loss
- seizures
- damage to the pituitary gland, if it is near the treatment area. This damage may cause problems with your sugar levels, thyroid, water balance and fertility. You may need to go on medication for these problems.

Radiation Oncology Team

You are seen by your Radiation Oncology Team once a week during treatments. They will ask you how you are doing with your treatments and discuss any concerns and side effects that you may have.

The radiation therapists help you prepare for treatments and are available every day to discuss any concerns that you may have.

There are also radiation oncology nurses who are available every day in the Patient Assessment Office. You do not need an appointment to see the nurse.

Chemotherapy

Chemotherapy uses drugs to kill cancer cells. Chemotherapy may be by mouth (pills) or through a vein (intravenous, IV). It may be given in combination with your radiation treatments or given on its own.

Your medical oncology doctor will discuss which chemotherapy is best for you.

A chemotherapy pill that is often used is called Temodol or Temozolomide. You need to take a number of pills an hour before your radiation treatment time each day and at bedtime on weekends and holidays.

You will be given information on the chemotherapy drugs you need.

Chemotherapy and blood counts

Chemotherapy can cause your blood counts to drop to low levels. These blood counts are your:

- white blood cells, which fight infection
- red blood cells, which carry oxygen throughout your body
- platelets, which help blood clot

Blood tests to measure your blood counts are done every week while you are receiving daily radiation and chemotherapy.

You may have blood tests done more often if your levels drop too low. Sometimes chemotherapy has to be stopped until the blood levels return to normal.

Take care of yourself during treatment

- Get plenty of rest.
- Eat a well balanced diet.
- Wash hair with baby shampoo and lukewarm water and gentle washing. Avoid friction to scalp.
- Only use lotions and moisturizers on your scalp that have been recommended by the health care staff.
- Protect your scalp when outdoors with a hat or scarf.
- Take medications as prescribed.
- Check your temperature if you feel unwell or experience chills or a lot of sweating. If your temperature is 38°C or 101°F, you must call right away (day or night).
- Discuss side effects and concerns with your doctors, nurses and radiation therapists.

When to call us

Call us if you have:

- unexplained vomiting
 - headaches that have changed
 - temperature of 38°C or 101°F
 - a seizure
 - a decreased level of consciousness such as drowsiness or confusion
 - changes in mood or behaviour
 - new speech problems
 - changes in vision such as seeing double or things are blurry
 - changes in sensation or feeling
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After treatment

Taking care of your skin. Continue with skin/scalp care until the skin reaction has settled down. Avoid use of hair dye and permanent waves for about one year after radiation. Check with your oncologist before using any chemicals on your hair.

After radiation. After your radiation treatment is completed, you will have an MRI scan one month later to check your response to the treatment. You will see your radiation oncologist about one week after the MRI to review the results. Then you will have an MRI scan about every 3 months for about a year. After this time, your radiation oncologist will advise you on how often you will need an MRI scan.

If you received chemotherapy during your radiation, you will also have an MRI one month after completing your treatment. You will see your medical oncologist as well as your radiation oncologist to review your results.

You may then go on to receive chemotherapy alone and will see your medical oncologist before every cycle of chemotherapy, usually every 4 weeks. You will have an MRI scan about every 3 months.



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