

Radiotherapy department

Stereotactic ablative body radiotherapy (SABR) to lymph nodes

This leaflet aims to help patients and their carers understand more about stereotactic ablative body radiotherapy (SABR) for cancer treatment to their lymph nodes. Please read this leaflet alongside The Christie booklet 'Radiotherapy – a guide for patients and their carers'. Your clinical oncologist (specialist doctor) will also discuss the treatment with you.

This leaflet will provide the following information:

- what SABR is and what the benefits of this treatment are
- planning of your treatment
- what happens on the day of your treatment
- side effects of treatment
- details of who to contact if you need advice

What is SABR and what are the benefits of this treatment?

Stereotactic radiotherapy delivers a high dose of radiation precisely to the tumour while minimising the dose to surrounding healthy tissue. It can also be referred to as SBRT, or stereotactic body radiotherapy. Compared to standard radiotherapy, SABR uses a higher dose per session, meaning treatment can be completed in fewer hospital visits. Treatment is delivered on alternate days, to allow healthy cells to recover on the rest day when there is no treatment.

Planning your treatment

You will have a scanning appointment in the radiotherapy department before starting the treatment.

At this scanning appointment we will ask you to lie on a treatment couch in the position you will be treated in. This may be with your arms above your head, resting on a board, or with your arms positioned comfortably across your chest. You will need a cannula (small tube in vein) inserting, and you will be given a contrast injection to enable the doctor to clearly see the area of treatment.

For lymph nodes located in the chest or abdomen, you will need to have 2 CT scans in the same position. The first CT scan will be taken while holding your breath. You will be given breathing instructions by the radiographers. The second CT scan will be taken while breathing normally. For lymph nodes located in the neck or pelvis, you will need to have 1 CT scan. To reproduce your position for each treatment we would like to give you some permanent reference marks (pin-sized tattoos) on your skin.



The appointment may take up to 2 hours. Please bring your regular medication with you. It may help to take painkillers 30 minutes before each session if you have pain.

It is important to highlight that these scans are not diagnostic, and they are not used to assess the status of your cancer or any other abnormalities. These scans are solely used to plan your treatment.

Before starting your radiotherapy, you may need a special kidney test called a renogram. This test helps us see how well one of your kidneys is working compared to the other. You will be informed if you need to have this test as not all patients require it.

Ensuring accuracy of treatment

To give accurate treatment we need to ensure that you are in the same position each day when you come for your planning CT scan and treatment.

If your tumour is located in your neck

The radiographers will make a mask of your head and neck for you to wear during the planning scan and treatment. The mask is custom-made to fit your face and will help keep your head and neck in the same position during each session. This helps improve the accuracy of the radiation therapy, ensuring it targets the right area while minimising damage to surrounding healthy tissues. If you experience claustrophobia, please let a member of the team know. We can refer you to our integrative therapies, health and wellbeing team who can provide support to help you feel more comfortable during appointments.

If your tumour is located in your chest

During your treatment, you will be asked to lie on the treatment couch with your arms placed above your head. It's important to stay in the same position for each session to ensure the treatment is as accurate as possible. Our radiographers will be with you every step of the way to help you get into the correct position and make sure you're comfortable throughout the process.

If your tumour is located in your abdomen

To give accurate treatment, we need to ensure that your lymph node is in the same position each day when you come for your planning scan and to have your treatment. The position of your lymph node is affected by many things; the 2 things that have the most impact is breathing motion and the movement of the digestive tract. We have a device (abdominal compression belt), which wraps around your waist and is then adjusted to create some pressure on your abdomen. This is to try to minimise the amount of movement of your lymph node caused by breathing motion. Using this device should not be painful and you will still be able to breathe freely. If this is too uncomfortable, please let the radiographers know. Please note that not all patients need to wear a compression belt. You will be told if you need to wear one.

You may be asked not to eat or drink anything for 2 hours before your appointment. You will be informed prior to your appointment should you need to fast.

If your tumour is located in your pelvis

We may ask you to empty your bladder before your planning scan and prior to each treatment session. You will be asked to lie on the couch with your arms positioned comfortably across your chest. It is important that you stay in the same position for each treatment, and our team will assist you in ensuring accuracy.

When will I start my treatment?

Treatment will usually start approximately 2 weeks after your planning session. You will be given a list of treatment appointments when you attend for your CT planning scan.

What happens on the day of treatment?

SABR to the lymph nodes usually involves 3-5 treatment sessions. In some cases, particularly for lymph nodes located in the chest, up to 8 treatment sessions may be needed. Occasionally, the number of treatment sessions may need to be adjusted once your treatment plan is finalised. You will be informed should this occur. The sessions are usually on alternate working days, and we do not typically treat on weekends.

A scan of the area you are having treated will be taken before, after, and sometimes during each treatment. These scans are purely to check that you are in the correct position and NOT to check how the tumour is responding to the treatment.

You will be alone in the radiotherapy treatment room for the treatment. You must stay very still for the whole time that you are in the room. The radiographers have CCTV in the control room which gives them a clear view of you, and they will be watching you all the time. You will not feel anything when the treatment is delivered. The treatment is normally given from several different directions (beams) depending on your individual treatment plan.

Treatment can take between 30-60 minutes. A team of radiographers work together in the CT scanner and treatment rooms, and you may hear them sharing information and giving instructions relating to your treatment.

Side effects of treatment

As you go through your treatment, you might notice some side effects or reactions. It's important to remember that not everyone will experience all of these, and what you experience may be different from someone else, depending on the area being treated. These reactions are usually temporary and part of the normal healing process. Your SABR consultant will discuss the potential side effects associated with your treatment, as well as the likelihood of their occurrence.

Potential short term side effects include

- **Tiredness (fatigue)** – you may feel more tired than usual, especially for several weeks after finishing radiotherapy. To help with fatigue, it's a good idea to drink plenty of fluids—around 1-2 litres a day. Gentle exercise, like a light walk, can also help boost your energy levels.
- **Skin changes** – the skin in the area being treated might change. Common reactions include redness, dryness, and itchiness. Using a moisturiser (avoid ones with zinc oxide) like Aveeno can help keep your skin comfortable and manage these reactions.
- **Pain** – some people may experience temporary pain in the treated area, or even in areas nearby. Usually, this can be managed with simple pain relief, but if stronger medication is needed, let your healthcare team know so they can help.
- **Hair loss** – in some cases, you might lose small patches of hair in the treatment area. This can happen within the first 4 weeks after treatment, and it usually grows back over time.
- **Nausea and vomiting** – you may feel nauseous or even vomit a few hours after treatment or at some point during your treatment. If this happens, we can give you anti-sickness medication to help manage these symptoms.

Side effects depending on the area of your body being treated

If your tumour is located in your chest

- **Shortness of breath** – if you are receiving treatment to your chest, you might occasionally develop a cough or feel short of breath. If this happens, please let your treating team know or contact The Christie Hotline.
- **Difficulty swallowing** – in very rare cases you may experience discomfort while swallowing, which could make it more difficult to eat or drink. If this occurs, we can provide pain relief to help make swallowing easier so you can continue eating and drinking as normal.

If your tumour is located in your abdomen/pelvis

- **Change in bowel habit** – you may experience a change in your bowel habit such as diarrhoea. It is important to stay hydrated by drinking plenty of fluids to replace any lost during this time.
- **Indigestion** – some people may experience indigestion or heartburn after radiotherapy. If this happens, let your medical team know so they can help. To help prevent this, you might need to take a proton pump inhibitor for a few months after your treatment. Your team will discuss this with you at your first consultation.
- **Bladder symptoms** – if the bladder is near the treatment area, it may experience some short-term side effects. These can include irritation, leading to increased frequency of urination or a feeling of urgency. Some patients may also experience mild discomfort or a burning sensation while urinating. These effects are usually temporary and tend to improve after the treatment is completed. However, it's important to report any persistent or severe symptoms to your healthcare team for further advice.

Potential long-term effects

While late side effects of treatment are rare, it's important to be aware of them. These side effects depend on the area being treated, and your doctor will discuss any potential risks with you, as well as how they will be monitored and managed.

- **Liver and kidney health** – in rare cases, radiation may affect the liver or kidneys. Any changes can typically be detected through routine blood tests, which will be closely monitored.
- **Bowel health** – although very rare, radiation can sometimes cause changes in the bowel, such as a blockage or a small hole (perforation). If this occurs, medical intervention may be necessary.
- **Bladder health** – while rare, some people may experience long-term effects on the bladder after SABR treatment. This can include needing to urinate more often or feeling an urgent need to go. In some cases, scarring in the bladder may cause discomfort or problems with holding urine. If you notice any ongoing symptoms, it's important to talk to your healthcare team for advice and support.
- **Indigestion and heartburn** – some people may experience indigestion or heartburn as a late effect of radiation therapy. There are medications that can help manage this.
- **Bone health** – in very rare cases, radiotherapy can sometimes cause changes to the bone in the area being treated, which may increase the risk of developing a fracture.

Consent

We will ask you to sign a consent form agreeing to accept the treatment that you are being offered. The basis of the agreement is that you have had The Christie's written description of the proposed treatment and that you have been given an opportunity to discuss any concerns. You are entitled to request a second opinion from another doctor who specialises in treating the cancer. You can ask your own consultant or your GP to refer you. Your consent may be withdrawn at any time before or during this treatment. Should you decide to withdraw your consent then a member of your treating team will discuss the possible consequences with you.

Follow-up

You will usually have an appointment with your SABR consultant between 4-8 weeks after your SABR treatment has finished, which may be conducted via telephone. After this, you may not routinely see your SABR consultant but will continue with follow-up appointments with your referring doctor, for ongoing follow-up and management.

Contact details (consultant's secretary)

Consultant

Phone number

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

The Christie is committed to producing high quality, evidence based information for patients. Our patient information adheres to the principles and quality statements of the Information Standard. If you would like to have details about the sources used please contact **the-christie.patient.information@nhs.net**

For information and advice visit the cancer information centres at Withington, Oldham, Salford or Macclesfield. Opening times can vary, please check before making a special journey.



Contact The Christie Hotline for
urgent support and specialist advice
The Christie Hotline: 0161 446 3658
Open 24 hours a day, 7 days a week