

## Patient information factsheet

# Stereotactic radiosurgery or radiotherapy

We have given you this factsheet because your doctor has recommended you have stereotactic radiosurgery (SRS) or stereotactic radiotherapy (SRT). It explains what SRS and SRT are and what to expect at your appointments. We hope it will help to answer some of the questions you may have. If you would like more information or have any concerns, please speak to a member of your healthcare team.

### What is SRS or SRT?

SRS and SRT are non-invasive procedures used to treat tumours affecting the brain.

Both treatments involve the use of a specialist radiotherapy machine which directs high-energy x-rays at a small, focused area of the brain. Like other radiotherapy, the treatment works by damaging the cancer cells' DNA (division and growth mechanism). The aim is to prevent the cells from multiplying and dividing, so that the tumour will stop growing, shrink or die.

Treatment is given as either a single high dose of radiotherapy (SRS), or it may be divided into smaller doses given over a period of up to five days (SRT). Both treatment options are often referred to as SRST. Your doctor will decide which option is appropriate for you.

### What are the benefits of SRS and SRT?

Both procedures aim to achieve similar results as surgery.

As the procedures do not involve any surgical incisions (cuts), there is no long healing process. This means that you should be able to continue with your normal activities soon after your treatment.

### Before your SRS or SRT

Before starting treatment, you will have a pre-procedure appointment to meet the team who will be looking after you.

At this appointment, we will:

- explain what the SRS or SRT procedures involve in more detail
- discuss the benefits and possible side effects or risks
- answer any questions you may have

If you are happy to go ahead with the treatment, we will then ask you to sign a consent form.

Your doctor may prescribe you a course of oral steroids to take before you start treatment to minimise the risk of some side effects. If you are already taking steroids, your dose may be increased.

## SRST planning

To enable us to deliver the treatment accurately, your head must remain completely still during the procedure. We will invite you to a planning appointment a few weeks before your SRST treatment, where we will make you a plastic mask which will be used to hold your head and neck in position during the treatment. The mask is designed so that you can breathe normally.

If you have a beard or moustache, we may ask you to shave it off before we make the mask to ensure the mask fits correctly. You should not cut your hair after your mask has been made as this could alter its fit.

Once your mask has been made, you will have a CT scan while wearing it. You will also have an MRI scan (you will not need to wear the mask for this). The images from these scans will help us to plan your treatment. Your specialist radiographer will explain the whole process to you and will make sure you know where you need to be and when.

## What to expect when you come in for treatment

The amount of time between the planning scans and treatment will vary for each person.

You will need between one and five treatment sessions, depending on your doctor's recommendation.

Treatment sessions can vary in length depending on a person's individual circumstances. However, you are likely to be in the department for a few hours overall, so you may wish to have someone with you. We will discuss this with you in more detail at your pre-procedure appointment.

SRST is completely painless though you are likely to hear a buzzing noise from the machine. You will be on your own in the treatment room, but the radiographers will be watching you on television monitors at all times. They will be able to talk to you throughout the procedure and can come into the room quickly if needed.

After your treatment:

- we may ask you to stay in the department for a short while, so we can make sure you feel well before you go home.
- you must **not** drive. Please make suitable travel arrangements for getting home.
- you can eat and drink as normal.

We will discuss this with you in more detail at your pre-procedure appointment.

## Side effects

It is possible that you may experience some side effects after treatment.

Side effects may include:

- **Skin reaction:** The skin in the area may become slightly red for some days afterwards. You may experience some patchy hair loss, although for most people this will grow back.
- **Tiredness:** The treatment can make you feel quite tired, which often continues for several days.
- **Headache or feeling faint or dizzy:** You may feel slightly faint or dizzy following treatment, or have a headache. If you have a headache, you can take over-the-counter pain relief medication such as paracetamol to help with this (remember to always read the instructions on the box).

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We will discuss specific side effects relating to your individual treatment with you before your procedure. If you are at all concerned or worried about side effects, please contact us using the details at the end of this factsheet.

## Notes

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## Who to contact if you have concerns

If you have urgent symptoms relating to your current radiotherapy treatment, please call the **acute oncology service** at Southampton General Hospital on telephone **023 8120 1345**.

This number is answered 24 hours a day, seven days a week, but is only for treatment-related symptoms. It is **not** for general queries, such as rearranging appointments or hospital transport.

If your symptoms are not urgent, you can speak to one of the radiographers when you attend for your radiotherapy treatment.

In an emergency call **999**.

You can also use the following telephone numbers to contact a member of staff directly:

### Radiotherapy reception

Telephone: **023 8120 8568** (Monday to Friday, 8am to 6pm)

### SRS advanced practitioner

Mobile: **07766 726773** (Monday to Friday, 9am to 4pm)

If you reach the answerphone, please leave a message so that we can return your call.

If you are a patient at one of our hospitals and need this document translated, or in another format such as easy read, large print, Braille or audio, please telephone **0800 484 0135** or email **PFSH@uhs.nhs.uk**

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **[www.uhs.nhs.uk/additionalsupport](http://www.uhs.nhs.uk/additionalsupport)**