Radiation therapy can help treat cancers of the uterus or vagina. Instead of using a radiation beam, doctors implant a hollow tube (called the implant tube). A small radiation source goes in the implant tube to emit a high amount of radiation just in one area.

Your doctor recommends this treatment for you. Usually, a full treatment course requires more than one implant, with one to two days in between each. The first implant takes the longest, about two or three hours. The rest take less than one hour each.

This sheet will help you learn what to expect and how to prepare for your treatment.

**Before the Implant**

Your health care provider will review the procedure and go over possible side effects, how to manage these side effects, and the small risks of these treatments. You will be asked to read and sign a consent form.

**Treatment Preparation and Planning**

Your radiation doctor does the implant in the Radiation Oncology clinic. Doctors will insert a hollow tube into the vagina near the treatment area. This is the implant tube. After it is in place, doctors will check that it is properly placed and plan your amount of radiation. This takes about one hour. You will wait in the clinic until the planning is finished. You may have family or friends at your bedside during this time.

You must lie in bed until the implant tube is removed. The head of the bed may be raised only slightly. You should avoid abrupt twisting and turning to prevent the implant from moving or being dislodged. You may feel some pressure from the implant tube or a low backache or dull cramping in the lower abdomen. Ask the nurse for pain medicine if this happens.

**No radioactive material will be put into the implant tube until it is time for your treatment.**

**The Radiation Procedure**

Once the doctors plan your amount of radiation, you will be taken in your hospital bed to the treatment room in the Radiation Oncology clinic. The radiation comes from a machine that is operated under the guidance of a radiation doctor. A staff member attaches a small tube from the machine to the end of the implant tube. The staff will leave the room, but you will be in contact by intercom and TV.

The machine places a small radioactive source inside the implant tube. The radiation source is about the size of a grain of rice and only stays in for a few minutes. The treatment time is short because the radiation source gives off a large amount of radiation. The treatment itself lasts for about 10-20 minutes.

Other than pressure and possible cramping, the treatment is painless. After the treatment is complete, the radiation source goes back into the machine, the machine is disconnected from the implant tube, and finally the implant tube is removed. You may then go home.

After the first treatment, no further planning is necessary. You will change into a gown and go directly into the treatment room. You will have your radiation treatment, the implant tube will be removed, and you can go home.

**Follow-up Appointments**

Schedule an appointment with your radiation doctor for four weeks after the last treatment. Then rotate follow-up visits every three months between your gynecologist and radiation doctor.

**After the Implant**

Side effects may persist for a time after your implants. The following suggestions can help ease side effects:

**Discomfort.** You may have soreness at the site of the implant tube. You may take acetaminophen (Tylenol®) or an anti-inflammatory medication such as ibuprofen (Motrin®, Advil®) or naproxen sodium (Aleve®). Your doctor may prescribe a stronger pain medicine if needed.

**Bladder Problems.** You may notice burning when urinating. Drink at least eight cups of fluid each day to keep your urine diluted. This will reduce soreness and help flush the bladder to prevent infection. If burning continues, your health care provider may prescribe another medication or check for an infection.
**Bowel Problems.** Implants may cause bowel problems. They may last for a few weeks. For diarrhea, you may take loperamide (Imodium AD®), a non-prescription drug. Eating a low-fiber diet may also help. The anal area may become sore or hemorrhoids may become worse. For wiping after bowel movements, use alcohol-free baby wipes rather than toilet paper. You may try over-the-counter products such as Aquaphor®, Anusol®, or Preparation H® to soothe this area.

**Vaginal Discharge.** It is normal to have a light vaginal discharge for four to six weeks after the implant. At first, discharge may be light pink, then light brown or tan, then white. You may douche gently once or twice a day with a quart of lukewarm water. Report heavy flow, bright red blood, or foul-smelling discharge to your health-care provider right away.

**Vaginal Changes.** Radiation can cause dryness and shrinking of the vagina. This may hinder the doctor's ability to perform follow-up exams. It is important to gently stretch the vagina on a regular basis by having regular sexual intercourse or using a plastic dilator. Intercourse may be resumed when comfortable. This is most often within two to three weeks after you are done with implants. A lubricant such as K-Y Jelly® or Replens® may be helpful. If sexual relations are not frequent, use a dilator. See the Vaginal Dilation After Radiation factsheet for more instructions.

**Emergencies**

Problems requiring emergency attention are very unlikely. Contact the radiation oncology doctor on call if you have problems after an implant.

**During normal business hours:**
Radiation Oncology Department  
801-581-2396

**After hours:**
University of Utah Hospital operator  
801-581-2121  
Toll free: 1-800-824-2073

*Ask for the radiation oncology doctor on call. Tell the operator it is urgent.*