Your doctor recommends radiation to your pelvic area as part of your cancer treatment. This sheet discusses possible side effects and ways to manage them.

**Possible Side Effects**

**Bladder irritation.** Radiation to the pelvis causes irritation to the bladder. After a few weeks of treatment you may notice burning when you urinate. You may need to urinate more often than usual. Drinking clear liquids can help. Your doctor can prescribe a medicine to relieve the burning. It can turn your urine a bright orange, which is normal. Your doctor may take a urine sample to check for an infection.

Radiation may cause some swelling around the urethra (the tube that carries urine out of the bladder). This may cause you to urinate slower or have a smaller stream of urine. If you notice it is hard to urinate, please contact your doctor or nurse. If you feel the urge to urinate and cannot, please contact your health care team right away or go to the nearest emergency room.

**Diarrhea.** A portion of the bowel may be included in the radiation field. This could cause more frequent bowel movements or diarrhea. If you have diarrhea, report it to your health care team. A low-fiber diet may help control the diarrhea. Ask your health care team for printed dietary guidelines. To control the diarrhea, you may need to take medicines such as loperamide (Imodium AD®). This over-the-counter medication is available at any pharmacy. Take one to two tablets after each loose bowel movement. Do not take more than 10 loperamide tablets per day. If it is not helpful, your health care provider may prescribe another medicine.

**Soreness.** The anal area may become sore or hemorrhoids may develop. Use alcohol-free baby wipes rather than toilet paper to wipe the area. You may try over-the-counter products such as Anusol® or Preparation H® to soothe this area. Sitting in the bathtub with warm water just above the hips or rinsing the area with a squirt bottle filled with water may help.

**Nausea.** This is not a common side effect of treatment to the pelvis, but it may happen. If it does, tell your health care team. It may help to take a medicine to reduce nausea before your treatments.

**Fatigue.** Feeling tired is common. It is important to take good care of yourself while you are having treatment. Mild exercise such as walking can improve energy level. However, the level of activity should depend on what you feel like doing. If you feel fatigued, extra rest may be needed.

**Sexuality and Fertility**

**Male patients**—Radiation can affect your sex drive or ability to have an erection. This may be short-term or long-term. Medication may be given to help maintain erections. If treatment is given to an area that includes the testes, the number of sperm or their ability to be fertile may be reduced. Pregnancy can still occur, so you will need to use birth control. Waiting one year after the end of treatments is recommended before any planned pregnancy. Please discuss this with your health care team before treatments begin.

**Female patients**—If you are still menstruating during radiation to the pelvis, your periods may stop. You may have other symptoms of menopause as well. Your ability to have children may change. Discuss this with your doctor before starting treatments.

You may have sex unless it causes pain, bleeding, or your health care provider says not to. If you are not sexually active, you should use a vaginal dilator after the completion of radiation several times a week to keep the vagina from shrinking and closing. It is important to keep the vagina open so pelvic exams can be done to check for any problems. If needed, you will be given a dilator at the end of treatment or on your first follow-up visit. See the Vaginal Dilation After Radiation factsheet for more instructions.

For more information about sexual health and fertility, contact the Linda B. and Robert B. Wiggins Wellness-Survivorship Center at 801-587-4585.
Hair loss. After about two weeks, you will lose hair in the treated area. Hair usually begins to grow back within three to six months after radiation treatment ends. Hair loss may be permanent and depends on the dose of radiation you receive.

Skin changes. The effects of radiation on the skin depend on a number of factors:
- Number of treatments
- Total dose of radiation
- Body part being radiated
- Prior sun exposure of the radiated skin
- Other factors such as nutritional status and health

After 10 treatments some people do not notice any change in their skin from the radiation. However, after 30 treatments, all people experience some degree of radiation skin reaction (dryness, redness, peeling, tenderness, itching, or blistering). Radiation skin reactions occur gradually and may progress for a while after radiation treatments are complete. Most effects are temporary and resolve after two to four weeks.

Side effects to the skin occur only in areas where the radiation enters and exits your body. If you are unsure where your treated areas are, ask your health care provider. After a week or two of treatments, your skin will start to become dry. It may darken, turn pink to red, itch, or feel tender. You should take care of your skin from the first day of radiation, before you notice these changes.

Here are some guidelines to help protect your skin:
- Wash skin gently with warm water. Do not scrub. Use your hand rather than a washcloth and pat dry with a soft towel.
- Use a mild soap that is free of perfumes or deodorants.
- Wear loose-fitting cotton clothes. Do not wear tight-fitting clothes that can cause friction.
- Do not use adhesive products such as bandages or tape in the treated area.
- Avoid extreme heat or cold on the skin. Do not use heating pads, ice packs, or hot water bottles on the treated skin.
- Use only an electric razor if you shave within the treated area.

These suggestions can help you treat skin reactions:
- Apply a moisturizing cream, lotion, gel, or oil to radiated skin. Choose products for sensitive skin, and avoid products with perfume or deodorant.
- If a product stings, stop using it.
- If your skin becomes tender or itchy, try using an over-the-counter one-percent hydrocortisone cream. If necessary, your health care provider may prescribe a steroid cream.

Symptoms may go on after your last treatment. If you have any problems, contact your health care provider.