

Lung stereotactic ablative radiotherapy (SABR)

Radiotherapy Department Patient information

What is radiotherapy?

Your doctor has recommended you have radiotherapy. Radiotherapy is used to treat cancer and other diseases. It can be used alone or with chemotherapy, surgery, or hormone therapy. Radiotherapy is the use of high energy rays, usually x-rays. It works by destroying cancer cells in the treated area. It can also cause some damage to normal cells in the treatment area. This is why radiotherapy can have side effects. Giving the treatment as a course of short treatments gives the normal cells a chance to recover.

The number of treatments that you will have depends on your needs. It will be decided by the consultant or registrar at your clinic appointment. This leaflet is a guide. If you have any questions about your specific treatment, please ask any of the team looking after you.

What is stereotactic radiotherapy?

SABR is an effective way of giving high doses of radiotherapy. This increases the chance of controlling the tumour while reducing the side effects. It does this by:

- less treatment sessions, usually three, five or eight
- small radiation fields
- higher doses of radiation

SABR is usually given in three to eight treatments. Each session will be at least a day apart. For example, Monday, Wednesday, Friday with a rest at the weekend. You will be informed of the exact number of treatments by your doctor.

Planning your radiotherapy

Planning is a very important part of radiotherapy. It ensures the radiotherapy is targeted accurately. This is so it causes the least damage to the surrounding healthy tissues.

You will have an appointment for a radiotherapy planning CT scan. This will form part of the measurement process. The planning session can take up to an hour. For this scan you will be positioned exactly as you will be every day for your treatment. You will be made as comfortable as possible. During this appointment, pen marks are drawn onto the skin. These will be used to plan your treatment accurately.

You will need to stay in this position for treatment. Each treatment can take up to 30 minutes. Please let us know if you have any discomfort.

A small monitoring device will be placed on your chest. This is linked to the scanner. It will monitor your breathing during your scan. We can then see any changes in the tumour position as you breathe. **It is important you are comfortable, and that you are breathing normally.**

We may need to make a shell/ mask for your head, neck, and shoulders. Whether you need this or not depends on the site of your treatment. This will be discussed with you by the doctor or planning team.

After this appointment you will be given a date to start your radiotherapy. This will be a couple of weeks later as the planning process is complex. You will also be given a phone appointment for the new patient clinic. This will be booked for the working day before your radiotherapy starts. This is a chance for you to ask any questions. You are welcome to have a family member or friend with you for this phone call.

Treatment

You will be positioned on the couch in the same position you were in when your treatment was planned. This is done by using a red light which shines onto your body. Your chest area will need to be free of clothing. This is so you can be positioned accurately. You will need to lie very still but breathe normally. You will not feel anything during the radiotherapy. It is like having an x-ray taken.

The radiographers will need to leave the room while the radiation is on. They will be able to see you through a camera and hear you through the intercom. The treatment can be paused if needed. Music can be played to help you relax if you would like it.

The treatment sessions include scans to check you are in the correct position as well as the treatment. The whole appointment will take about 30 minutes. Routine checks will be carried out on some days. This may extend the time slightly.

It is important you are not, or do not become, pregnant during treatment. Remember to use contraception if needed. If you have any concerns about this, please discuss them with your treatment team.

Skin care advice

During your radiotherapy and for a while afterwards, your skin may change in the area being treated. It may not be possible to stop a skin reaction. If you follow this advice, you should feel more comfortable. Please talk to your treatment team if you are having problems.

Reduce friction by:

1. washing the skin gently in the treatment area with soap and water. Pat the skin dry and avoid rubbing the area.
2. wearing loose fitting, natural fibre clothing to reduce discomfort.
3. avoiding shaving and waxing in the area.

Reduce irritation by:

- using a moisturiser in the treatment area. One which does not contain sodium lauryl sulphate is better, such as E45. There is no need to wipe the moisturiser off before treatment.

- avoiding antibiotic creams unless there is a known infection.
- avoiding sun exposure in the treatment area during radiotherapy. Use a high factor sun cream after finishing radiotherapy.
- avoiding extremes of temperature such as heating and cooling pads.

Other advice:

- You may swim if your skin isn't broken. Shower after swimming to wash off the chlorine and apply your moisturiser. Please stop swimming if it irritates your skin.
- Smoking is likely to make your skin reaction worse. If you need help to stop, please ask for advice.

Short term side effects

There are some side effects to radiotherapy. These tend to build up slowly towards the end of treatment. How bad the side effects are will vary from one person to another. It depends on many factors. They will last for about two weeks after treatment is finished. They will then start to improve over the following months.

Please discuss any side effects you have with your treatment team. They are there to help you.

It is advisable to stop smoking as it can increase the risk of side effects. If you need help with this, please ask.

Expected side effects - 50-100% (half to all) of people having radiotherapy

- **Tiredness:** this varies between patients. Do as much as you feel able to and rest when you need to. Often light exercise such as a short walk can help.

Common side effects - 10-50% (10-50 in 100) of people having radiotherapy

- **Nausea:** ginger or peppermint can help. There is also medication you can be prescribed.
- **Breathlessness or a cough:** steroids can be given to help. You may also make more spit. This normally happens 6-12 weeks after finishing radiotherapy. If you get these symptoms contact the oncology patient helpline. The phone number is at the end of this leaflet.
- **Chest or rib pain:** you can take your usual pain relief for this.

Less common side effects - less than 10% (10 in 100) of people having radiotherapy

- **Skin soreness:** your skin may become pinker or darker. It may feel dry, tight, or sore. Sometimes you can have a rash and it can feel itchy. Following the skin care advice above will help to keep you more comfortable.

Rare side effects - less than 1% (1 in 100) of people having radiotherapy

- **Coughing up blood:** usually small amounts.

Longer term side effects

These can occur months to years after radiotherapy. The doctor you see at your first appointment should have discussed them with you. Only a small number of patients will develop any of these long-term side effects. For most people these side effects are mild and do not affect everyday life.

Your radiotherapy is planned very carefully to avoid as much surrounding tissue as possible. This will minimise the risk of these side effects.

Expected side effects - 50-100% (half to all) of people having radiotherapy

- **Lung fibrosis:** scarring of the lung which normally does not cause a significant increase in breathlessness.

Less common side effects - less than 10% (10 in 100) of people having radiotherapy

- **Damage to the heart:** depending on tumour position.
- **Tingling or numbness of the arms.**
- **Chest or rib pain.**
- **Rib fractures.**

Rare side effects - less than 1% (1 in 100) of people having radiotherapy

- **Second malignancy:** there is a very small risk of getting a second cancer many years later.
The benefits from the radiotherapy outweigh this very small risk.
- **Narrowing of airways.**
- **Lung scarring or collapse:** this can be life threatening, but the risk of this happening is very small. The hospital has experience to help with this. The planning of your treatment lowers the risk of lung scarring or collapse. Your doctor can discuss this and any worries you may have about this.

After your treatment you will be given a follow up appointment to see your consultant or registrar. This will be in 6 - 8 weeks. You will then be followed up regularly for some time.

Emotional support

It is normal to have feelings of anxiety, fear, or sadness during your treatment. The radiotherapy staff are there to support you. They will always make time for your needs. If you're feeling down, it may help to talk with a friend or relative. Sometimes, it can help to talk with someone who has been through a similar experience.

The Cancer Care Map is a website that you can search for support groups. You can put in your post code to show support groups in your area. www.cancercaremap.org

Complementary therapies

The department has a range of free complementary therapies on offer to all patients. They can help you cope with your treatment. If you would like further details, please speak to one of your radiographers. You can also call the complementary therapists directly on **0300 019 8268**.

Chapel

There is a chapel within Poole Hospital. This is open to people of all faiths. It is on level 1 of the hospital. It is open 24 hours a day. If you would like to speak to a member of the chaplaincy team you can call them on **0300 019 8153** or **0300 019 2167**.

Contact details

During treatment:

- If you need to contact the department during your course of radiotherapy you will find telephone numbers for your treatment unit at the bottom of your appointment list.

Radiotherapy helpline:

- For radiotherapy related enquiries before or after treatment call the Dorset radiotherapy helpline (DORAH). This is an answerphone service which is checked by radiotherapy radiographers between 8am and 5.30pm Monday to Friday, but a message can be left at any time. Please call **0300 019 2481**. Please note this helpline is not for emergencies.

Oncology patient hotline:

- For urgent enquiries, day or night, contact the oncology patient hotline on **0300 019 4302**. If your call is not answered you will need to leave a message. Please give your name, hospital number, and contact telephone number. You should be phoned back within half an hour. In the unlikely event that you are not, please call again.

Lung nurse specialists

Poole Hospital Tel: **0300 019 8338**

Royal Bournemouth Hospital Tel: **0300 019 4876**

Dorchester Hospital Tel: **01305 255289**

For further general health-related information please visit or contact:

Macmillan Cancer Support

89 Albert Embankment, London SE1 7UQ

Telephone: **0808 808 0000**

www.macmillan.org.uk

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Poole Hospital, Longfleet Road, Poole, Dorset, BH15 2JB
Robert White Radiotherapy Centre, Dorset County Hospital
Williams Avenue, Dorchester, Dorset, DT1 2JY

Author: **Rebecca Morgan** and **Helen Payne** Date: **March 2026** Version: **Two** Review date: **March 2029** Ref: **114/24**

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