



Patient information on radiotherapy for lung cancer

Side effects of lung radiotherapy

This leaflet will help you understand:

- the radiotherapy side effects you might get
- how best to care for yourself during and after treatment

Our radiotherapy teams have put this information together to give you a clear picture of what to expect. Remember, your treatment is planned only for you, and your team will let you know if anything is different for your care.

What are the side effects and how do I manage them?

Radiotherapy is a localised treatment; this means most of the side effects happen only in the part of your body that is being treated. The side effects can affect people differently. Side effects of radiotherapy are described as:

- Early and short-term. These usually start during your course of radiotherapy. They usually get better by two to six months after finishing radiotherapy.
- Late and long-term. These are side effects that may happen many months or years after radiotherapy. Some of these side effects may not go away. Sometimes we may give you medicine to help.

Words are used to explain how likely you are to get side effects

Word used	How many people will get these side effects?
Expected	50 to 100 people out of 100 people
Common	10 to 50 people out of 100 people
Less Common	less than 10 people out of 100 people
Rare	less than 1 person out of 100 people

Your radiotherapy team will talk about these with you. They will give you information if anything is different for you. You may not get all the side effects discussed in this leaflet. Please ask your team if you have any questions.

What are the early and short-term side effects?

Expected (50 to 100 out of 100 people)

- **Mild tiredness**
- **Mild soreness when swallowing** if the treatment is over the middle of your chest or neck. The radiographers treating you will be able to tell you if this will affect you.

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- **Skin soreness, itching, and colour changes in treatment area**

Your skin may change colour in the treated area. If you have white or light skin, it may turn pink, red, or darker. If you have brown skin, it may turn maroon or darker. If you have black skin, it may get darker, and you may also notice yellow, purple, or grey areas.

How do I care for my skin during and after radiotherapy?

- Wash skin gently with soap and warm water.
- Avoid rubbing, and gently pat dry.
- Apply Sodium Lauryl Sulphate-free creams (e.g. Aquamax, Epimax, E45, Aveeno, Aloe Vera Gel, CeraVe) in the morning and evening.
- Avoid thick creams, or those which contain a high content of paraffin or petroleum jelly.
- If skin becomes sore, please speak to a member of your radiotherapy team. You should not use any zinc oxide creams, such as Sudocrem
- Avoid wet shaving.
- Avoid using wax or hair removal creams.
- Wear clothing that protects the treatment area from the sun. Wear loose fitting clothes made of natural material such as cotton.
- Radiotherapy causes changes to the skin that always makes it more sensitive to the sun. Your skin will damage more easily and take longer to heal. Avoid exposing the treatment area to strong sunlight, both during and after your course of radiotherapy treatment. After you have finished your radiotherapy, and once your skin reaction has gone, you should still cover the area with clothes. If this is not possible, use a good quality, high factor sun protection cream. **At least factor 50 (minimum UVA 5-star rating)** in the treated area. This is important during the summer months, and if you are travelling to a hot climate. Your GP can prescribe sun cream if you have had radiotherapy.
- Do not use sun lamps or sun beds.
- Do not apply cold or heat packs such as a hot water bottle.
- You can swim in a chlorinated pool, but stop if the skin becomes irritated. Take a shower in chlorine-free water after your swim and apply moisturiser such as: Aquamax, Epimax, E45, Aveeno, Aloe Vera Gel or CeraVe.
- Avoid hydrotherapy pools, jacuzzis, saunas and steam rooms.

Follow the skin care advice given by the Therapeutic Radiographers, nurses or Clinical Nurse Specialists. You can find skin care advice from the Society of Radiographers [here](#) or by going to:

<https://www.sor.org/news/radiotherapy/scor-updates-radiation-dermatitis-guidelines>

- **Hair loss in treatment area** – this usually grows back

If you are having less than 5 treatments, you might also experience:

- **Feeling sick.** If you feel sick, tell your radiotherapy team. You can also try:
 - Ginger products, such as ginger biscuits, or ginger tea
 - Eating something plain (toast, or plain biscuits) and,
 - Trying to eat something, as not eating can make you feel more sick
- **Small aches and pains in the treatment area**

Common (10 to 50 out of 100 people)

- **Feeling very tired** – this can feel different for everyone. Try to keep to your normal lifestyle but also listen to what your body is telling you. If you feel tired, please rest. It may be helpful to do some gentle exercise, such as walking.
- **Mild breathlessness**, a cough, or changes on your X-ray
- **Feeling soreness when swallowing.** Swallowing can be uncomfortable and you might feel like you have heartburn, or it may feel like there is a 'lump' in your throat. If you get any of these feelings, tell the Radiographers treating you. We may give you medicine to help. We may ask you to make small changes to your diet, such as avoiding spicy, crunchy, hard, and rough textured foods.
- **Feeling sick.** If you feel sick, tell your radiotherapy team. You can also try:
 - Ginger products, such as ginger biscuits, or ginger tea
 - Eating something plain (toast, or plain biscuits) and,
 - Trying to eat something, as not eating can make you feel more sick

Less common (less than 10 people out of 100 people)

- **Having a cough and shortness of breath**, this can affect day-to-day life and is caused by swelling of the lungs. This should get better. If you experience any of these side effects, tell the Radiographers treating you. We may give you medicine to help.
- **Feeling sick.** If you feel sick, tell your radiotherapy team. You can also try:
 - Ginger products, such as ginger biscuits, or ginger tea
 - Eating something plain (toast, or plain biscuits) and,
 - Trying to eat something, as not eating can make you feel more sick
- **Risk of infection**
- **A pain in your neck which feels like a sudden electric shock** when you are bending your neck. This may occur three to six months after treatment. The medical word for this is Lhermitte's sign.

Rare (less than 1 person out of 100 people)

- **Coughing-up blood** – usually small amounts
- **Skin feels very sore and the colour changes**

Your skin may change colour in the treated area. If you have white or light skin, it may turn pink, red, or darker. If you have brown skin, it may turn maroon or darker. If you have black skin, it may get darker, and you may also notice yellow, purple, or grey areas.

- **Needing to go into hospital to help your side effects get better**
- **Trouble swallowing** – you might need a temporary feeding tube put in at the start of treatment, or during treatment.

There may be other rare risks that your care team will discuss with you if anything is different for you.

What are the late and long-term side effects?

These are side effects that may happen many months or years after radiotherapy. Some of these side effects may not go away. Sometimes we may give you medicine to help.

Expected (50 to 100 out of 100 people)

- **Your lung may develop slight scarring, which we can see on an X-ray or scan.** This does not usually cause a big change in breathlessness. The medical name for this is lung fibrosis.

Common (10 to 50 out of 100 people)

- **Shortness of breath and a cough**
- **Long-term irritation of the food pipe** this might feel like food sticking, or mild pain.

Less common (less than 10 people in 100 people)

- **Your lung may develop serious scarring of the lung, which we can see on an X-ray or scan.** This can lead to long-term shortness of breath or a cough, meaning you may need home oxygen.
- **Strong feeling of food sticking, or pain** caused by irritation and narrowing of the food pipe.
- **Risk of damage to your heart** – the risk of this will depend on the treatment area. Your medical team will speak to you about it if there is a risk.
- **More likely to have bone fractures in the treatment area**

Rare (less than 1 person out of 100 people)

- **Lung infections**
- **Risk of organ damage**
- **Damage to your nerves in the arms or hands** which can cause pain, numbness, or tingling sensations
- **A different cancer in the treatment area**
- **Your thyroid gland stops working properly** – you might need to take medicine.
- **Your spleen stops working properly.** This might mean your body cannot fight off germs as well as before. You might need extra vaccinations and antibiotics.

There may be other rare risks, and your care team will discuss these with you if anything is different for you.

We know some of these side effects sound worrying. The advantage of giving you radiotherapy outweighs any of the risks. Your medical team have looked at all the risks for you and will talk to you about them.

Where can I get more advice and support?

For further advice or help, please refer to:

- **Your Radiotherapy Team:** They can give more information about your treatment. If you are having any problems related to your radiotherapy after treatment, contact your radiotherapy team.
- **How to contact your radiotherapy team:** The contact numbers are given to you at the beginning of your radiotherapy. If you can't find the numbers, please ask for them and then keep them handy in case you need urgent advice. We will give you contact numbers in the information handed to you when you finish your radiotherapy treatment.
- **National Support Services:**

Cancer support charities, such as Macmillan and Maggie's, offer information, counselling, and support groups.

- Macmillan website: www.macmillan.org.uk
- Macmillan Support Line: [0808 808 0000](tel:08088080000)
- Maggie's: www.maggies.org
- Roy Castle Lung Cancer Foundation: www.roycastle.org

What should I remember?

- Our radiotherapy teams have put this information together to give you a clear picture of what to expect.
- This is general information, always follow instructions from your radiotherapy team.
- Your treatment is planned only for you, and your team will let you know if anything is different for your care.
- The key points above should help you prepare and know when to ask for help.
- If you are unsure of anything in this information, please ask your radiotherapy team.

We have worked with patients to write this information. We welcome your feedback on this information leaflet. If you would like to give us anonymous feedback to improve this information, please fill out a form by scanning the QR code or clicking on the link:

<https://forms.office.com/e/6spj6B4HQk>



For more information about radiotherapy, please see our website: eastofenglandradiotherapynetwork.nhs.uk and click on 'Information for patients'.