



PATIENT & CAREGIVER EDUCATION

About Ocular Brachytherapy

This information explains brachytherapy for ocular (eye) tumors, including how to prepare and what to expect during and after your treatment.

About Ocular Brachytherapy

Brachytherapy is a type of radiation therapy. With brachytherapy, radioactive seeds are placed inside or close to the tumor(s). This means that the tumor gets a large amount of radiation, while nearby healthy tissue gets less radiation and is less likely to be damaged.

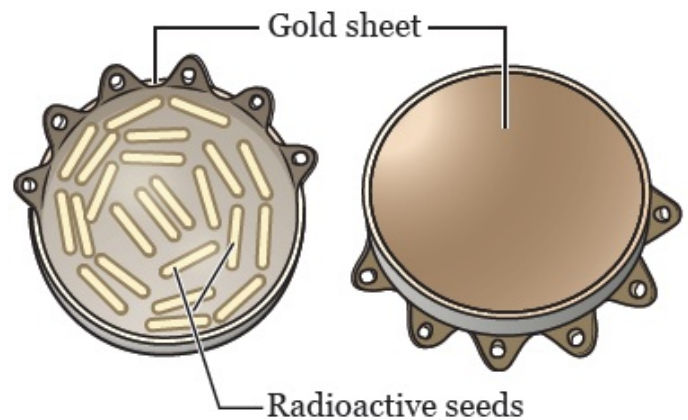


Figure 1. Ocular brachytherapy plaque

With ocular (eye) brachytherapy, a gold plaque (thin gold sheet) with radioactive seeds is placed on the surface of your eye during a surgery (see Figure 1). The gold protects other areas of your body from radiation from the seeds.

The brachytherapy is treating the whole time the plaque is on your eye. This is usually for 2 to 4 days. You will stay in the hospital and be on radioactive isolation during your brachytherapy.

To end the brachytherapy, the plaque will be removed during another surgery.

Before Your Plaque Placement Procedure

Presurgical testing (PST)

Within 30 days of your procedure, you will have an appointment for presurgical testing (PST). The date, time, and location of your PST appointment will be printed on the appointment reminder from your surgeon's office. You can eat and take your usual medications the day of your PST appointment.

During your appointment, you will meet with a nurse practitioner (NP) who works closely with anesthesiology staff (doctors and specialized nurses who will give you medication to put you to sleep during your surgery). Your NP will review your medical and surgical history with you. You will have tests, including an electrocardiogram (EKG) to check your heart rhythm, a chest x-ray, blood tests, and any other tests necessary to plan your care. Your NP may also recommend that you see other healthcare providers, such as a cardiologist (heart doctor).

Your NP will talk with you about which medications you should take the morning of your surgery.

It's very helpful to bring the following with you to your PST appointment:

- A list of all the prescription and over-the-counter medications you're taking, including patches and creams.
- Results of any tests done outside of Memorial Sloan Kettering (MSK), such as a cardiac stress test, echocardiogram, or carotid Doppler study.
- The name(s) and telephone number(s) of your doctor(s).

For pediatric patients: Pediatric pre-admission testing

Within 30 days of your procedure, you and your child will meet with their MSK pediatrician for pediatric pre-admission testing (PPAT). Your child can eat and take their usual medications the day of their PPAT appointment.

During this appointment, your child's pediatrician will review their medical and surgical history with you. Be sure to tell them about any medical problems your child has, as well as if they have received anesthesia in the past.

Depending on their medical and surgical history, your child may have additional tests, such as blood tests or an electrocardiogram (EKG). Their pediatrician may also recommend that they see other healthcare providers, such as a cardiologist (heart doctor).

Radiation therapy appointment

About 1 week before your procedure, you will meet with members of your radiation oncology team. They will review the details of the procedure with you. Based on the measurements taken during the first appointment you had with your ophthalmologist (eye doctor), your radiation oncologist will determine the size of your plaque and the length of time you will need to wear it.

Complete a Health Care Proxy form

If you haven't already completed a Health Care Proxy form, we recommend you complete one now. A health care proxy is a legal document that identifies the person who will speak for you if you're unable to communicate for yourself. The person you identify is called your health care agent.

If you're interested in completing a health care proxy form, talk with your nurse. If you have completed one already, or if you have any other advance directive, bring it with you to your next appointment.

Ask about your medications

You may need to stop taking or change the dose of some of your medications before your procedure. Be sure to tell your doctor about all the medications you take, including prescribed and over-the-counter medications, patches, and creams.

Aspirin and nonsteroidal anti-inflammatory drugs (NSAIDs)

Some medications can cause bleeding. Read the resource [Common Medicines Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs \(NSAIDs\)](#) for important information about stopping medications before your procedure.

Herbal remedies and supplements

If you take herbal remedies or supplements, stop taking them 7 days before your procedure. For more information, read the resource [Herbal Remedies and Cancer Treatment](#).

Blood thinners

If you take a blood thinner, ask the doctor who prescribes it for you when to stop taking it. Some examples of blood thinners are below.

| | | |
|-----------------------|-----------------------|------------------------|
| aspirin | dabigatran (Pradaxa®) | rivaroxaban (Xarelto®) |
| apixaban (Eliquis®) | enoxaparin (Lovenox®) | warfarin (Coumadin®) |
| clopidogrel (Plavix®) | heparin | |

There are others, so be sure your doctor knows all of the medications you're taking.

Medications for diabetes

If you take insulin or other medications for diabetes, ask the doctor who prescribes it what you should do the day before and the morning of your procedure.

1 Day Before Your Plaque Placement Procedure

Note the time of your procedure

A clerk from the Admitting Office will call you after 2:00 PM the day before your procedure. The clerk will tell you what time you should arrive at the hospital for your procedure. If your procedure is scheduled on a Monday, you will be called on the Friday before.

If you don't receive a call by 7:00 PM the evening before your procedure,

call 212-639-5014.

Instructions for eating and drinking before your procedure

- Do not eat anything after midnight the night before your procedure. This includes hard candy and gum.
- Between midnight and up until 2 hours before your scheduled arrival time, you may drink a total of 12 ounces of water (see figure).
- Starting 2 hours before your scheduled arrival time, do not eat or drink anything. This includes water.



For pediatric patients: Instructions for eating and drinking before your procedure



Your child cannot eat or drink anything after a certain time on the night before their procedure. Their doctor or NP will tell you when this is. The exact time is based on their age and other medical problems that they may have.

Your NP will talk with you about what your child can and cannot eat before their procedure. Use the space below to write down your child's eating and drinking instructions.

Shower using soap and water the night before or the morning of your procedure.

The Day of Your Plaque Placement Procedure

Take your medications

If your doctor or NP instructed you to take certain medications the morning of your surgery, take only those medications with a sip of water. Depending on what medications you take, this may be all, some, or none of your usual morning medications.

Things to remember

- If you wear contact lenses, wear your glasses instead.
- Don't put on any lotion, cream, deodorant, makeup, powder, or perfume.
- Don't wear any metal objects. Remove all jewelry, including body piercings.
- Leave valuables, such as credit cards, jewelry, or your checkbook, at home.

Where to go

Your procedure will be at MSK's main hospital, located at 1275 York Avenue between East 67th and East 68th Streets. Take the M elevators to the 2nd floor and check in with the Presurgical Center (PSC) concierge.

For pediatric patients: Where to go

Your procedure will be at MSK's main hospital, located at 1275 York Avenue between East 67th and East 68th Streets. It will be at one of the following locations:

- Presurgical Center on the 2nd floor
M elevators to the 2nd floor
- Pediatric Ambulatory Care Center (PACC)
B elevators to the 9th floor

Your doctor or nurse will tell you where to go for your procedure.

After you check in, you will meet with your nurse. Tell them the dose of any medications (including patches and creams) you took after midnight

and the time you took them.

During your procedure

When it's time for your surgery, you will either walk into the operating room or be taken in on a stretcher. A member of your operating room team will help you onto the operating bed. Compression boots will be placed on your lower legs. These gently inflate and deflate to help circulation in your legs.

Once you're comfortable, you will get anesthesia (medication to make you sleep) during your procedure. After you're asleep, a breathing tube will be placed through your mouth and into your windpipe to help you breathe.

Your ophthalmologist and radiation oncologist will work together to stitch the plaque in place on your eye. Once the procedure is complete, the breathing tube will be removed and a bandage will be placed over your eye.

After your procedure

When you wake up after your surgery, you will be in the Post Anesthesia Care Unit (PACU).

You will receive oxygen through a thin tube that rests below your nose called a nasal cannula. A nurse will be monitoring your body temperature, pulse, blood pressure, and oxygen levels.

You will stay in the PACU until you're fully awake. After you're fully awake, you will be taken to your hospital room. You will stay in your hospital room for your ocular brachytherapy.

During Your Ocular Brachytherapy

While the plaque is in place, your eye may feel scratchy, or you may feel like there's something in your eye. Most people don't feel that the plaque

is painful. If you do have pain, your doctor will give you medication to make you comfortable.

The plaque is designed so the radioactive seeds are on the inside, facing your eye, and the gold sheet is on the outside. This limits the amount of radiation that reaches the space around you. However, you will also be on radiation precautions while the plaque is in place. This means that you will be in a single room with limited visitors. No one who is under 18 years of age or pregnant may visit you while you're in the hospital.

Your medical team will visit you each day. They will remove the bandage and place a cream in your eye. The cream will help prevent infection and reduce inflammation. You may have double vision or limited vision when the bandage is removed for this exam.

Once your brachytherapy is finished, you will have another surgery to remove the plaque. The surgery will be the same as the one to place the plaque, except it will be removed instead. You may also have laser treatment during this surgery. Not everyone will have laser treatment. If you're having laser treatment, your doctor or nurse will give you more information.

After Your Ocular Brachytherapy

You will be able to go home the same day the plaque is removed. You will no longer need to follow radiation precautions.

You will go home with a bandage over your eye. You will also get prescriptions for pain medication, eye drops, and eye cream(s) before you leave the hospital.

Call your doctor's office to schedule a follow-up appointment after your treatment. Your first follow-up appointment should be 4 weeks after you finish treatment.

At home

- Keep the bandage on your eye for 2 days after your surgery.
- After you remove the bandage, start using the creams and eye drops that your doctor prescribed. Be sure to follow your doctor's instructions.
- After you remove the bandage, you may use warm water and mild soap (such as Dove[®], Basis[®], or Cetaphil[®]) to wash your face. Rinse the skin well, and pat dry with a soft towel.
- Avoid scratching or rubbing your eye.
- Take your pain medication as directed and as needed.

Side effects of ocular brachytherapy

You may have side effects after your brachytherapy.

Some side effects happen soon after your treatment and usually last from a few days to a few weeks. Examples include:

- Double vision or blurry vision. You can use an eye patch to make these easier to manage.
- Swelling, redness, or dryness of your eye. Your doctor will give you eye drops or cream to help manage these symptoms.

Other side effects usually happen 18 months or longer after treatment, but they may happen sooner. Examples include:

- Dryness of your eye that doesn't go away. You can keep using lubricating eye drops or cream to help manage this.
- Cataracts (cloudiness in the lens of your eye). This happens more often if the tumor was near the front of your eye and your cornea.
- Damage to your retina (radiation retinopathy). Your retina is the layer at the back of your eyeball that senses light and helps create

images. Radiation retinopathy happens more often if the tumor was near the back of your eye and your optic nerve. It usually develops slowly, months or sometimes years after radiation.

- **Vision loss.** Most people eventually lose vision in the area of their eye where the plaque was placed. The amount of vision loss depends on where the plaque was placed. You may notice vision loss 12 to 18 months after your treatment. You can talk with your doctor about the possibility of vision loss in your eye.

Follow-up after your treatment

After your treatment is done, it's important to have regular follow-up appointments with your oncologists and ophthalmologists. You may need blood tests, x-rays, and scans to see how you responded to your brachytherapy.

Before your visits, write down any questions and concerns you have. Bring this and a list of all your medicines with you to your appointments.

If you're running low on any of your medications, tell your doctor before you run out. You can also call your doctor or nurse at any time between follow-up visits if you have any questions.

Emotional Concerns

After surgery for a serious illness, you may have new and upsetting feelings. Many people say they felt weepy, sad, worried, nervous, irritable, and angry at one time or another. You may find that you can't control some of these feelings. If this happens, it's a good idea to seek emotional support.

The first step in coping is to talk about how you feel. Family and friends can help. Your nurse, doctor, and social worker can reassure, support, and guide you. It's always a good idea to let these professionals know how you, your family, and your friends are feeling emotionally. Many resources are available to patients and their families. Whether you're in

the hospital or at home, the nurses, doctors, and social workers are here to help you and your family and friends handle the emotional aspects of your illness.

Resources

Ocular Melanoma Foundation

Has information and support for people and caregivers managing ocular melanoma.

www.ocularmelanoma.org

Retinoblastoma Information

Information about retinoblastoma from MSK's website.

www.mskcc.org/pediatrics/cancer-care/types/retinoblastoma

National Eye Institute

Has information about eye health and eye diseases.

www.nei.nih.gov

Eye Cancer Network

Has information about eye cancer and related diseases.

www.eyecancer.com

Call Your Doctor or Nurse if You Have:

- Pain that doesn't get better with medication
- Intense headaches
- Nausea (feeling like you're going to throw up)
- Vomiting (throwing up)
- Bleeding through the dressing
- Yellow or green drainage

If you have a fever of 100.4° F (38° C) or higher, call your doctor right away.

Contact Information

If you have any questions or concerns, talk with a member of your healthcare team. You can reach them Monday through Friday from 9:00 AM to 5:00 PM at the numbers listed below.

Ophthalmic oncologist: _____

Phone number: _____

Radiation oncologist: _____

Phone number: _____

After 5:00 PM, during the weekend, and on holidays, call 212-639-2000 and ask for person on call for your doctor.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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