Memorial Sloan Kettering Cancer Center

PATIENT & CAREGIVER EDUCATION

About Radiation Therapy to Your Brain

This information will help you get ready for your radiation therapy to your brain at MSK. It explains what to expect. It also explains how to care for yourself before, during, and after your radiation therapy.

This resource has a lot of information. Different sections may be helpful at different times. We suggest reading through this resource once before you start radiation therapy, so you know what to expect. Then, refer back to it during your radiation therapy.

This information is general. Your radiation therapy team will design a treatment and care plan just for you. Because of that, some parts of your treatment may be different than what's described here. Your radiation therapy team will talk with you about what to expect.

About radiation therapy

Radiation therapy uses high-energy radiation to treat cancer. It works by damaging the cancer cells, making it hard for them to multiply. Your body can then naturally get rid of the damaged cancer cells. Radiation therapy also affects normal cells, but they can fix themselves in a way cancer cells can't.

Radiation therapy takes time to work. It takes days or weeks of treatment before cancer cells start to die. They keep dying for weeks or months after radiation therapy ends.

About radiation therapy to your brain

Radiation can be given to treat primary tumors in your brain (tumors that started in your brain). It can also be used to treat tumors that have metastasized (spread to your brain from another part of your body). Your doctor will decide whether you'll receive partial or whole brain radiation.

During external beam radiation, a machine will aim beams of radiation directly at the tumor. The beams will pass through your body and destroy cancer cells in their path. You will not see or feel the radiation.

Some people get a special type of external beam radiation

therapy called stereotactic body radiation therapy (SBRT). SBRT can be used in some tumors and is even more precise. It targets a small area in your brain with high doses (amounts) of radiation and delivers lower doses of radiation to the normal tissue around it. You're able to get higher doses to the tumor at each treatment session, which shortens the overall course of treatment.

Your role on your radiation therapy team

Your radiation therapy care team will work together to care for you. You're a part of that team, and your role includes:

- Getting to your appointments on time.
- Asking questions and talking about your concerns.
- Telling us when you have side effects.
- Telling us if you're in pain.
- Caring for yourself at home by:
  - Quitting smoking if you smoke. MSK has specialists who can help. To learn more about our Tobacco Treatment Program, call 212-610-0507. You can also ask your nurse about the program.
  - Caring for your skin based on our instructions.
  - Drinking liquids based on our instructions.
  - Eating or avoiding the foods and drinks we suggest.

- Staying around the same weight.

What happens before radiation therapy to your brain

Simulation appointment

You'll have a treatment planning procedure called a simulation before you start your radiation treatments. This is done to make sure that:

- Your treatment site is mapped.
- You get the right dose of radiation.
- The amount of radiation that gets to your nearby tissues is as small as possible.

You'll have imaging scans during your simulation.

Your simulation will take 2 hours, but can be longer depending on the treatment your doctor has planned for you.

Depending on your treatment plan, you may need more detailed imaging, including magnetic resonance imaging (MRI) which will be used to help plan your treatment.

Medicines to take

You'll be lying still in one position for a long time during your simulation. If you think you'll be uncomfortable, talk with your healthcare provider ahead of time. You can also take an over-the-counter pain medicine or your usual pain medicine 1 hour before your simulation.

Talk with your healthcare provider ahead of time if you think you may get anxious during your simulation. They may suggest medicines to help.

What to eat and drink

You can eat and drink like usual on the day of your simulation.

What to wear

Wear comfortable clothes that are easy to take off. You may need to change into a hospital gown for your simulation.

Don't wear jewelry, powder, lotion, or cream in the treatment area unless a member of your care team says it's OK.

Take devices off your skin

You may wear certain devices on your skin. Before your simulation or treatment, some device makers recommend you take off your:

- Continuous glucose monitor (CGM)
- Insulin pump

If you use one of these, ask your radiation oncologist if you need to take it off. If you do, make sure to bring an extra device to put on after your simulation or treatment.

You may not be sure how to manage your glucose (blood sugar) while your device is off. If so, before your appointment, talk with the healthcare provider who manages your diabetes care.

What to bring

Leave any valuable items you don't need at home. Examples include extra credit cards, extra cash, and jewelry.

What to expect when you arrive

A member of your radiation therapy team will check you in when you arrive. They'll give you an identification (ID) wristband with your name and date of birth. During your appointment, many staff members will check your ID wristband and ask you to say and spell your name and date of birth. This is for your safety. People with the same or a similar name may be getting care on the same day.

Your radiation therapists will review what to expect during the simulation. If you haven't already signed a consent

form, they will go over the form with you. They will answer any questions you have and ask for your signature.

You may need to change into a hospital gown when it's time for your simulation. Keep your shoes on.

If you wear a head covering (such as a wig, turban, or cap), you may need to take it off. If you use a hearing aid, ask your radiation therapist if you need to take it out.

A nurse may place an intravenous (IV) line in a vein in your arm or hand before your simulation. You'll get contrast through this IV during your simulation. Contrast is a special dye that helps your care team get clear images of the area to be treated. Your care team will tell you if you're getting IV contrast during your simulation. If you're allergic to contrast, please tell your doctor or nurse.

What to expect during your simulation

Your radiation therapists will help you onto the simulation table. The table will have a sheet on it, but it's hard and does not have a cushion. If you have not taken pain medicine and think you might need it, tell your radiation therapists before your simulation starts.

Your therapists will help you get into position for your simulation. You'll be lying on your back during your simulation and each treatment. You will see red or green

laser lights on the walls. Your radiation therapists use these as a guide when they position you on the table.

Do not move once your simulation starts. It's important that you stay in the same position. Tell your radiation therapists if you feel uncomfortable or need help. Your radiation therapists can play music for you to help pass the time.

Making your mask or mold

You'll wear a special mask during your simulation and all your treatments to help you stay in the right position. Your therapists will make this for you.

To make the mask, your therapist will place a warm, sheet of plastic mesh over your face while you're lying on the simulation table. They'll then shape it to fit around your head. You will not have any trouble breathing, hearing, or seeing while the mask is on.

If you're having SBRT, a special mold will be made of your head and shoulders. Once it dries your therapist will make the mask by placing a warm sheet of mesh over your face that will have an opening (see Figure 1).

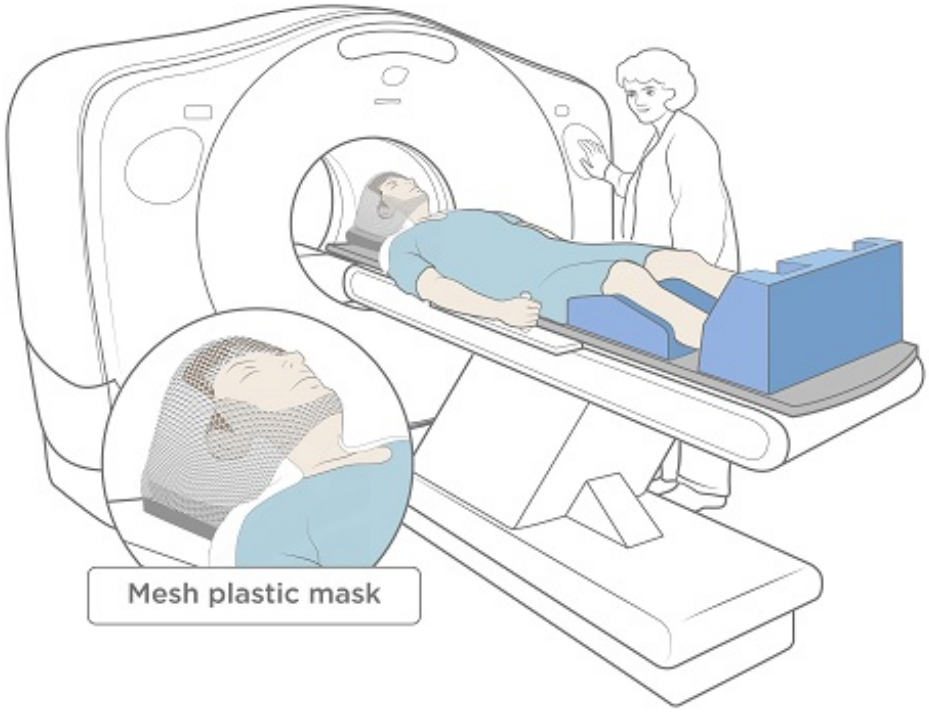


Figure 1. Imaging scans with SBRT mold and mask during simulation

Imaging scans and positioning

Your radiation therapists will use imaging scans to check and adjust your position throughout your simulation. **These scans are only to plan your treatments. They are not for diagnosis or to find tumors.** For that reason, you will not see any scan results in MSK MyChart (your patient portal).

If you're getting IV contrast, your radiation therapist will put it into your IV line about 5 minutes before they start taking imaging scans.

It will take about 5 to 10 minutes to get your scan.

You'll feel the simulation table move into and out of the scanner and hear the scanner turn on and off. Even if it

seems loud, your radiation therapists will be able to hear you if you need to speak with them. They will walk in and out of the room during the scans, but the room has a microphone, speaker, and camera. Someone will always be able to see and hear you.

Markings and photos

Your radiation therapists will make markings on the mask once it dries. They'll take several photos of you in your position after they make the markings. They will use the photos and markings to make sure you're in the right position for your radiation treatments. This part of your simulation takes about 15 minutes.

What to expect after your simulation

We will schedule your set-up procedure and first treatment at the end of your simulation appointment.

Scheduling your treatment

Radiation treatments may be given Monday through Friday. For some people, the treatment is given in just one day. For others, the treatment is given over a number of weeks. Your schedule is based on what your doctor recommends.

Your treatment may be given in several different schedules. It can be:

- □ A single treatment, usually given on the same day as your set-up
- □ 3 to 5 treatments:

  _____
- □ Daily treatment, given Monday through Friday, for about _____ weeks.

Call your radiation oncologist's office to tell your care team if you can't come in for treatment for any reason. Talk with your radiation therapist or scheduler if you need to change your schedule for any reason.

If you're getting SBRT, your radiation oncology team will tell you about how long your appointments will be. This will vary depending on how many sites are being treated.

Checking your treatment schedule

You can see your treatment schedule in your patient portal, MSK MyChart. If you do not have a MSK MyChart account, you can sign up at mskmychart.mskcc.org. You can also ask a member of your care team to send you an invitation.

It's very helpful to use MSK MyChart to keep track of your appointment times. We will call you if we need to reschedule any of your treatment appointments.

Treatment planning

Between your simulation and first treatment, your radiation oncologist will work with a team to plan your treatments. They will use your simulation scans to plan the angles and shapes of your radiation beams. They will also determine the dose of radiation you'll get. They carefully plan and check all the details of your treatments. This takes 1 to 10 business days.

What happens during radiation therapy to your brain

You'll be in the same position for your radiation treatments as you were for your simulation. You may want to take pain or anxiety medicine before your radiation treatments if it was helpful for your simulation. Take it about 1 hour before your appointment.

Your treatment appointments

Each day you have treatment, check in at the reception desk and have a seat in the waiting room. When they're ready for you, your radiation therapists will bring you into the treatment room and help you lie on the treatment table. They will position you exactly how you were lying during your simulation.

Set-up procedure and first treatment

When you come for your first treatment appointment, you'll have imaging scans before your treatment starts. These scans are called the set-up procedure. They usually take about between 30 minutes and 1 hour.

Radiation treatments

You will have special imaging scans (x-rays or CT scans) during each of your treatment appointments. These are to make sure your position and the treatment area are correct. **They are not to check how your tumor is responding to the radiation therapy.**

Your radiation therapists will do their best to make sure you're comfortable in your treatment position. Once everything is ready, they will leave the room and start your treatment (see Figure 2). Breathe normally during the treatment, but don't move.

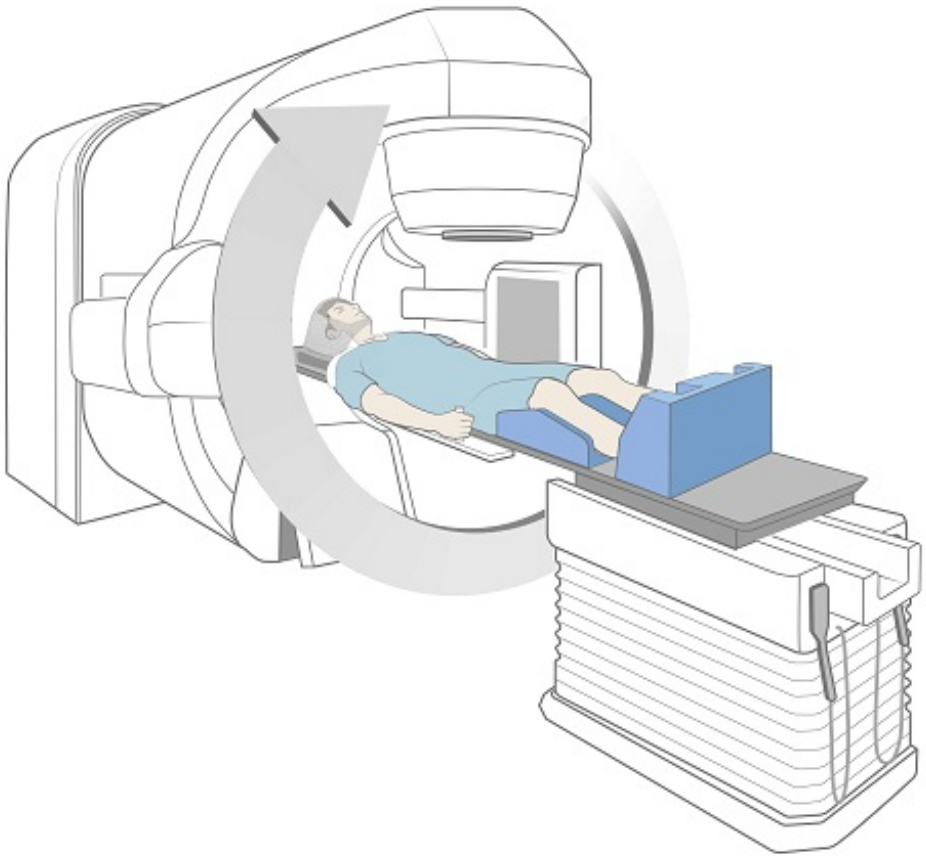


Figure 2. During your treatment

You will not see or feel the radiation. You may hear the machine as it moves around you and is turned on and off.

You will be alone in the room during your treatment, but your radiation therapists will see you on a monitor and hear you through an intercom the whole time. Tell them if you're uncomfortable or need help.

You'll be in the treatment room for about 15 to 60 minutes, depending on your treatment plan. You'll spend most of this time getting into your treatment position. The actual treatment only takes a few minutes.

You will not be radioactive during or after your radiation treatments. It is safe for you to be around other people and pets.

Status check visits

Your radiation oncologist or a radiation nurse check in with you at least once each week during your radiation therapy. They'll talk with you about any concerns, ask about any side effects you're having, and answer your questions. This status check visit may be a video visit or an in-person visit before or after your treatment.

You can also ask a member of your radiation care team to contact your radiation oncologist or nurse when you come in for treatment. Or, you can call your radiation oncologist's office if you need to speak with them outside your status check visit.

Vitamins and dietary supplements during radiation therapy

Vitamins, minerals, and herbal or botanical (plant-based) supplements are examples of dietary supplements.

It's OK to take a multivitamin during your radiation therapy. Do not take any other dietary supplements without talking with a member of your care team.

Side effects of radiation therapy to your brain

Some people may have side effects from radiation therapy. The ones you have and how strong they are depends on many things, such as:

- The dose of radiation you're getting.
- The number of radiation treatments you're getting.
- Your overall health.

Side effects may be worse if you're also getting chemotherapy.

Here are the most common side effects of radiation therapy to the brain. You may have all, some, or none of these. You and your radiation therapy care team will work together to prevent and manage side effects.

Swelling in your brain

Radiation therapy to your brain may make your brain swell. If you had neurological symptoms before you started radiation therapy, they could come back or get worse. Or, you could have new symptoms.

Neurological symptoms can include:

- A headache that doesn't go away after taking acetaminophen (Tylenol®).

- Seizures.
- Nausea and vomiting.
- Changes in vision, such as double vision.
- Unsteadiness when walking.
- Change in mental status.
- Speech changes, such as mixing up words or having trouble finding words.

Call your doctor or nurse right away if you have any new symptoms or if your symptoms are getting worse. They'll want to evaluate you.

Your healthcare provider may prescribe medicine to help manage these side effects. These medicines may include:

- Steroids, such as dexamethasone (Decadron®). Steroids help lessen brain swelling from the tumor or from side effects of radiation therapy.

Follow your doctor's instructions for taking steroid medicines. They may change your dose as needed during your treatment. When your doctor decides it's safe, they'll give you a schedule to gradually lower your dose of the medicine. This is called tapering off the medicine. **Do not stop taking dexamethasone unless your doctor tells you to.**

- Steroids can cause stomach pain, so always take them

with food. Your care team may give you another medicine to lower your risk of stomach irritation.
    - Steroids can raise your risk of certain lung infections. Your care team may give you an antibiotic called sulfamethoxazole and trimethoprim (Bactrim®) to lower this risk.
    - Steroids may mask signs of infection, such as fever.
    - Steroids can raise your blood sugar. If you have diabetes, please tell your radiation therapy team and the doctor who prescribes your diabetes medicines.
- Medicine to control seizures, such as levetiracetam (Keppra®), phenytoin (Dilantin®), carbamazepine (Tegretol®), phenobarbital (Luminal®), or valproic acid (Depakene®).

If you're taking any of these antiseizure medicines, you may need to have blood tests to make sure you're getting the right dose.

Talk with your doctor about if it's safe for you to drive while taking these medicines.

Hair loss

You'll probably lose some of the hair on your scalp 2 to 3 weeks after your radiation therapy starts. Ask your

radiation oncologist or nurse what to expect. Your hair will usually grow back 3 to 6 months after you finish radiation therapy.

Your hair color and texture may be different after your radiation therapy. You can cover your scalp with a scarf, turban, wig, or toupee if it makes you feel more comfortable.

If you want to wear a wig or hairpiece, try to get one before your hair falls out. It will be easier to match your hair color and style.

Your health insurance may cover the cost of your wig or hairpiece. For your wig or hairpiece to be covered by insurance, your doctor must write a prescription with a diagnosis code indicating that your hair loss is from treatment for cancer. Check with your insurance company to see if they cover the costs of wigs or hairpieces and how much they'll pay.

Hair care

- Gently wash your hair with a mild shampoo when needed.
- Use a soft-bristle brush on your hair.
- Don't dye your hair or use hair products.

Skin reactions

Your skin in the treatment area may change during your radiation therapy. This may include your forehead, ears, and the back of your neck. This is normal. Ask your nurse to point out the areas of your skin and scalp that will be affected.

- Your skin may become pink or tanned after 2 to 3 weeks. It may become bright red or very dark later on, based on your skin tone.
- Your skin may feel dry and itchy and look flaky. Sensitive areas may blister, open, and peel. Tell a member of your care team if this happens.
- You may get a rash, especially in areas where your skin has been in the sun. **Tell a member of your care team if you get a rash.** They can be a sign of an infection.

Skin reactions sometimes get worse during the week after your last treatment. Call your radiation oncologist or nurse if this happens. Your skin will heal over time once you finish radiation therapy, but it often takes 3 to 4 weeks.

These guidelines can help you care for your skin during your radiation therapy. Follow them until your skin gets better. **These guidelines are only for your skin in the radiation treatment area.** You can care for the rest of your skin as usual.

Keep your skin clean

- Bathe or shower daily using warm water and a mild unscented soap, such as Dove®, Basis®, or Cetaphil®. Rinse your skin well and pat it dry with a soft towel.
- When washing your hair, be gentle with your skin and scalp. Don't use a washcloth, a scrubbing cloth, or brush.
- Don't use alcohol or alcohol pads on your skin.

Keep your skin moisturized

- Your nurse may suggest you start using a moisturizer on the first day of your treatment. If you aren't likely to develop a skin reaction, you don't need to use a moisturizer unless your skin becomes dry or itchy.
- Use a moisturizer without fragrances or lanolin. Lanolin is an oil made by animals that have wool, such as sheep. It can make your skin more sensitive.
    - There are many over-the-counter (not prescription) moisturizers that are good to use. Your radiation nurse may suggest one. Ask them if you're not sure which one to use.
- Only use 1 moisturizer at a time unless your radiation nurse tells you to use more.
- If you're using a moisturizer, apply it 2 times a day.

Avoid irritating your skin

- Do not wear tight caps or turbans that will rub against your skin.
- Only use the moisturizers, creams, or lotions your radiation oncologist or nurse suggests.
- Do not use makeup, perfume, cologne, powder, or aftershave.
- Do not put anything sticky (such as Band-Aids ® or medical tape) on your skin.
- If your skin or scalp is itchy, don’t scratch it. Put on moisturizer. Ask your radiation nurse about ways to ease the itching.
- Avoid shaving your skin. If you must shave, use an electric razor. Stop if your skin becomes irritated.
- Do not expose your skin to very hot or cold temperatures. For example, do not use hot tubs, hot or cold water bottles, heating pads, or ice packs.
- Only swim in a pool if you do not have any skin reactions. Rinse off right after you get out.
- Avoid tanning or burning your skin. Use a sunblock with an SPF of 30 or higher if you’re going to be in the sun. Wear loose-fitting clothing over as much of your skin as you can.

Fatigue

Fatigue is feeling very tired or weak. When you feel fatigued, you may not want to do things. You may have trouble focusing, feel slowed down, or have less energy than usual. Fatigue can range from mild (not bad) to severe (very bad). It may be worse at certain times of day.

You may start to feel fatigued after 2 to 3 weeks of treatments. You may still feel fatigued for a few weeks to several months after finishing radiation therapy. Fatigue usually gets better over time.

There are lots of reasons you may feel fatigued during your radiation therapy. They include:

- The radiation's effects on your body.
- Traveling to and from your treatment appointments.
- Not getting enough restful sleep at night.
- Not getting enough protein and calories.
- Having pain or other symptoms.
- Feeling anxious (nervous) or depressed (unhappy).
- Side effects of some medicines.

Ways to manage fatigue

- If you're working and are feeling well, it's OK to keep working. But working less may help you have more energy.
- Plan your daily activities. Pick the things you need or really want to do. Do them when you have the most energy. For example, you may choose to go to work but not do housework. You may choose to watch your child's after-school event but not go out to dinner.
- Plan time to rest or take short (10- to 15-minute) naps during the day, especially when you feel more tired.
- Try to sleep at least 8 hours every night. This may be more sleep than you needed before you started radiation therapy. You may find it helpful to:
  - Go to sleep earlier and get up later.
  - Be active during the day. For example, if you're able to exercise, you could go for a walk or do yoga.
  - Relax before going to bed. For example, read a book, work on a puzzle, listen to music, or do another calming hobby.
- Ask family and friends to help with chores and errands. Check with your health insurance company to see if they cover home care services.

- You might have more energy when you exercise. Ask your radiation oncologist if you can do light exercise, such as walking, biking, stretching, or yoga. Read *Managing Cancer-Related Fatigue with Exercise* (www.mskcc.org/pe/fatigue-exercise) to learn more.
- Eat foods that are high in protein and calories. Read *Eating Well During Your Cancer Treatment* (www.mskcc.org/pe/eating-cancer-treatment) to learn more.

Some things can make your fatigue worse. Examples are:

- Pain
- Nausea (feeling like you're going to throw up)
- Diarrhea (loose or watery poop)
- Trouble sleeping
- Feeling depressed or anxious

Ask your radiation oncologist or nurse for help if you have these or any other symptoms or side effects.

Sexual and reproductive health

You may have concerns about how cancer and your treatment can affect your sex life. You are not radioactive. You can't pass radiation to anyone else. It's safe to be in close contact with others.

You can be sexually active during your radiation therapy, unless your radiation oncologist gives you other instructions. If you or your partner are able to have children, you must use birth control (contraception) to prevent pregnancy during your radiation therapy.

Talking with your radiation oncologist or nurse about your sexual health can be hard, but it's an important conversation to have. They may not bring it up unless you share your questions and concerns. You may feel uncomfortable, but most people in cancer treatment have similar questions. We work hard to make sure everyone in our care feels welcome.

Sexual health programs

MSK offers sexual health programs. These programs can help you manage the ways your cancer or cancer treatment affects your sexual health or fertility. Our specialists can help you address sexual health or fertility issues before, during, or after your radiation therapy.

- To learn about our Female Sexual Medicine & Women's Health Program or to make an appointment, call 646-888-5076.
- To learn about our Male Sexual & Reproductive Medicine Program or to make an appointment, call 646-888-6024.

- To learn about our Cancer and Fertility Program, talk with your healthcare provider.

Other sexual health resources

Read *Sex and Your Cancer Treatment* (www.mskcc.org/pe/sex-cancer-treatment) to learn more about sexual health during cancer treatment.

The American Cancer Society also has information about sexual health issues during cancer treatment. You can find it online at www.cancer.org/cancer/side-effects/sexual-side-effects or call 800-227-2345 to ask for printed information.

Emotional health

Cancer diagnosis and treatment can be very stressful and overwhelming. You may feel:

• Anxious or nervous • Afraid • Alone • Angry	• Depressed • Helpless • Frustrated	• Numb • Uncertain • Worried

You might also worry about telling your employer you have cancer or about paying your medical bills. You may worry about how your family relationships may change, or that the cancer will come back. You may worry about how cancer treatment will affect your body, or if you will still be

sexually attractive.

It's normal and OK to worry about all these things. All these kinds of feelings are normal when you or someone you love has a serious illness. We're here to support you.

Ways to cope with your feelings

Talk with others. When people try to protect each other by hiding their feelings, they can feel very alone. Talking can help the people around you know what you're thinking. It might help to talk about your feelings with someone you trust. For example, you can talk with your spouse or partner, close friend, or family member. You can also talk with a chaplain (spiritual advisor), nurse, social worker, or psychologist.

Join a support group. Meeting other people with cancer will give you a chance to talk about your feelings and learn from others. You can learn how other people cope with their cancer and treatment and be reminded you're not alone.

We know that all cancer diagnoses and people with cancer are not the same. We offer support groups for people who share similar diagnoses or identities. For example, you can join a support group for people with breast cancer or for LGBTQ+ people with cancer. Visit www.msk.org/vp to learn about MSK's support groups. You can also talk with

your radiation oncologist, nurse, or social worker.

Try relaxation and meditation. These kinds of activities can help you feel relaxed and calm. You might try thinking of yourself in a favorite place. While you do, breathe slowly. Pay attention to each breath or listen to soothing music or sounds. For some people, praying is another way of meditation. Visit www.msk.org/meditations to find guided meditations lead by our Integrative Medicine and Wellness providers.

Exercise. Many people find that light movement, such as walking, biking, yoga, or water aerobics, helps them feel better. Talk with your healthcare provider about types of exercise you can do.

We all have our own way of dealing with tough situations. Often, we do what worked for us in the past. But sometimes that's not enough. We encourage you to talk with your doctor, nurse, or social worker about your concerns.

What happens after radiation therapy to your brain

It's important to come to all your follow-up appointments with your radiation oncologist. During these

appointments, they will check how you're recovering after your radiation therapy.

Write down your questions and concerns before your follow-up appointments. Bring this and a list of all your medicines with you. You can also call your radiation oncologist or nurse any time after you finish radiation therapy or between follow-up appointments.

Vitamins and dietary supplements after radiation therapy

- You might be getting other cancer treatments along with your radiation therapy. If you are, ask the doctor managing that treatment when it's safe to start taking dietary supplements again. Some dietary supplements are not safe to take before surgery or during chemotherapy.
- If you are not getting other cancer treatments, you can start taking dietary supplements again 1 month after your last radiation treatment.

Tell your radiation nurse if you want to talk with a clinical dietitian nutritionist about your diet or supplements.

Contact information

If you have questions or concerns, contact a member of your radiation therapy team. You can reach them Monday through Friday from 9 a.m. to 5 p.m. at these numbers.

Radiation oncologist: _____
Phone number: _____

Radiation nurse: _____
Phone number: _____

Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

Support services

MSK support services

Counseling Center
www.msk.org/counseling
646-888-0200
Many people find that counseling helps them. Our counseling center offers counseling for individuals, couples, families, and groups. We can also prescribe medicines to help if you feel anxious or depressed. Ask

your healthcare provider for a referral or call the number above to make an appointment.

Integrative Medicine and Wellness Service

www.msk.org/integrativemedicine

Our Integrative Medicine and Wellness Service offers many services to complement (go along with) traditional medical care, including music therapy, mind/body therapies, dance and movement therapy, yoga, and touch therapy. Call 646-449-1010 to schedule an appointment for these services.

You can also schedule a consultation with a healthcare provider in the Integrative Medicine and Wellness Service. They will work with you to come up with a plan for creating a healthy lifestyle and managing side effects. Call 646-608-8550 to make an appointment.

Nutrition Services

www.msk.org/nutrition

212-639-7312

Our Nutrition Service offers nutritional counseling with one of our clinical dietitian nutritionists. Your clinical dietitian nutritionist will talk with you about your eating habits. They can also give advice on what to eat during and after treatment. Ask a member of your care team for a referral or call the number above to make an appointment.

Rehabilitation Services

www.msk.org/rehabilitation

Cancers and cancer treatments can make your body feel weak, stiff, or tight. Some can cause lymphedema (swelling). Our physiatrists (rehabilitation medicine doctors), occupational therapists (OTs), and physical therapists (PTs) can help you get back to your usual activities.

- **Rehabilitation medicine doctors** diagnose and treat problems that affect how you move and do activities. They can design and help coordinate your rehabilitation therapy program, either at MSK or somewhere closer to home. call Rehabilitation Medicine (Physiatry) at 646-888-1929 to learn more.
- An **OT** can help if you're having trouble doing usual daily activities. For example, they can recommend tools to help make daily tasks easier. A **PT** can teach you exercises to help build strength and flexibility. Call Rehabilitation Therapy at 646-888-1900 to learn more.

Resources for Life After Cancer (RLAC) Program

646-888-8106

At MSK, care does not end after your treatment. The RLAC Program is for patients and their families who have finished treatment.

This program has many services. We offer seminars, workshops, support groups, and counseling on life after treatment. We can also help with insurance and employment issues.

Sexual Health Programs

Cancer and cancer treatments can affect your sexual health, fertility, or both. MSK's sexual health programs can help you before, during, or after your treatment.

- Our Female Sexual Medicine & Women's Health Program can help with sexual health problems such as premature menopause or fertility issues. Ask a member of your MSK care team for a referral or call 646-888-5076 to learn more.
- Our Male Sexual & Reproductive Medicine Program can help with sexual health problems such as erectile dysfunction (ED). Ask a member of your care team for a referral or call 646-888-6024 to learn more.

Tobacco Treatment Program

www.msk.org/tobacco
212-610-0507
MSK has specialists who can help you quit smoking. Visit our website or call the number above to learn more. You can also ask your nurse about the program.

Virtual Programs

www.msk.org/vp

Our Virtual Programs offer online education and support for patients and caregivers. These are live sessions where you can talk or just listen. You can learn about your diagnosis, what to expect during treatment, and how to prepare for your cancer care.

Sessions are private, free, and led by experts. Visit our website for more information about Virtual Programs or to register.

Radiation therapy support services

American Society for Therapeutic Radiology and Oncology

www.rtanswers.org

800-962-7876

This website has detailed information about treating cancer with radiation. It also has contact information for radiation oncologists in your area.

External support services

There are many other support services to help you before, during, and after your cancer treatment. Some offer support groups and information, while others can help with transportation, lodging (a place to stay), and treatment costs.

For a list of these support services, read *External Support*

Services (www.mskcc.org/pe/external-support-services). You can also talk with an MSK social worker by calling 212-639-7020.

Questions to ask your radiation oncologist

Before your appointment, it's helpful to write down questions you want to ask. Examples are listed below. Write down the answers during your appointment so you can review them later.

What kind of radiation therapy will I get?

How many radiation treatments will I get?

What side effects should I expect during my radiation therapy?

Will these side effects go away after I finish my radiation therapy?

What kind of late side effects should I expect after my radiation therapy?

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

About Radiation Therapy to Your Brain - Last updated on June 5, 2026

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