About Your Stereotactic Hypofractionated Accelerated Radiation Therapy to the Prostate (SHARP)

This information will help you prepare for your stereotactic hypofractionated accelerated radiation therapy to the prostate (SHARP), including what to expect before, during, and after your treatment. You will also learn about side effects and how to care for yourself during your treatment.

We suggest you read through this resource at least once before you start SHARP, and then use it as a reference in the days leading up to your treatments to help you prepare. Bring it with you to your simulation appointment and all future appointments with your radiation oncologist so that you and your healthcare team can refer to it.

About SHARP

Radiation therapy uses high-energy rays to treat cancer. It works by damaging the cancer cells and making it hard for them to reproduce. Your body is then naturally able to get rid of these damaged cancer cells. Radiation therapy also affects normal cells. However, your normal cells are able to repair themselves in a way
that cancer cells cannot.

SHARP therapy is different from traditional radiation therapy. SHARP uses a precise, high-dose form of radiation therapy called stereotactic radiosurgery to deliver high doses of radiation to tumors accurately.

Because the normal movements of your body can cause your prostate to move slightly during or between treatments, your healthcare team in the urology service will insert markers into your prostate. These allow your doctors to know the exact location of your prostate so they can deliver high-dose radiation therapy to the prostate. You can read more about the markers in the “Marker Placement” section.

You will receive high doses at each treatment session, so your treatment course will be shorter than with standard radiation therapy. Your treatment will be 5 sessions every other day.

Radiation therapy takes time to work. It takes days or weeks before cancer cells start to die, and they keep dying for weeks or months after radiation therapy ends.

SHARP may be used alone to treat your cancer or in combination with other forms of therapy, such as brachytherapy or hormonal therapy.

**Your Role on Your Radiation Therapy Team**

You will have a team of healthcare providers working together to provide the right care for you. You are a part of that team, and
your role includes:

- Arriving on time for all your radiation therapy sessions.
- Asking questions and talking about your concerns. We have included a list of questions you may want to ask at the end of this resource.
- Letting someone on your radiation therapy team know when you have side effects.
- Telling your doctor or nurse if you are in pain.
- Caring for yourself at home.
- Quitting smoking, if you smoke. If you want to quit, call our Tobacco Treatment Program at 212-610-0507.
- Following your healthcare team’s instructions to care for your skin.
- Drinking liquids as instructed.
- Eating the foods suggested by your radiation therapy team.
- Maintaining your weight.

**About Fiducial Markers and Rectal Spacers**

Before you begin SHARP, you will have a procedure to have fiducial markers and rectal spacers placed.

Fiducial markers are tiny metal objects (about the size of a grain of rice). They allow your doctors to align the beams of radiation to make sure that your radiation therapy is delivered exactly the same way each time. This helps them to target your tumor and
avoid your healthy tissue. The fiducial markers will stay in your prostate after your treatment.

SpaceOAR® hydrogel rectal spacers are placed between your prostate and rectum, in order to move your rectum away from your prostate. This protects your rectum from radiation and reduces some side effects of radiation therapy. The rectal spacers will stay in place for 3 months. Then, they will be absorbed by your body and come out in your urine.

Your appointment to have fiducial markers and rectal spacers placed is on:

Date:________________ with
Dr.____________________

Read our resource *About the Placement of Fiducial Markers and Rectal Spacers for Radiation Therapy to Your Prostate.* You can search for it on www.mskcc.org/pe or you can ask your nurse for a copy. This resource has important information you will need to know before your procedure.

**Simulation**

Before you begin your treatment, you will have a treatment planning procedure called a simulation. This is done to make sure that:

- Your treatment site is mapped out.
- You get the right dose of radiation.
- The amount of radiation that gets to your nearby tissues is as
During your simulation, you will have imaging performed (see below) and your skin will be marked with little tattoo dots. These marks identify the area that will be treated.

Your simulation will take about 4 hours, but can be shorter or longer depending on the treatment your doctor has planned for you.

**Preparing for your simulation**

**7 days before your simulation**

- Mix 1 rounded teaspoon of psyllium (Metamucil®) powder in 8 ounces of water and drink. Drink it 2 hours before or 2 hours after you take your other medications. You must do this every day before your simulation and throughout your treatment.

**The day of your simulation**

- Mix 1 rounded teaspoon of psyllium powder in 8 ounces of water and drink. Drink it 2 hours before or 2 hours after you take your other medications.
- Do a Fleet® enema 3 hours before your simulation.
- During your simulation, you will be lying in one position for a long time. If you think you will be uncomfortable lying still, you can take acetaminophen (Tylenol®) or your usual pain medication before your simulation. If you think you may get anxious during your procedure, speak with your doctor about whether medication may be helpful.
• Wear comfortable clothes that are easy to take off because you may need to change into a hospital gown. Do not wear jewelry, powders, or lotions.

**What to expect**

A member of your radiation therapy team will check you in. You will be asked to state and spell your full name and date of birth many times. This is for your safety as part of our standard identification process. People with the same or similar name may be having care on the same day as you.

When you arrive for your appointment, your radiation therapist will greet you and take a photograph of your face. This picture will be used to identify you throughout your treatment.

Your radiation therapist will review and explain the simulation to you. If you have not already signed a consent form, your radiation oncologist will review everything with you, and ask for your signature.

**During your simulation**

For your simulation, you may need to get undressed and change into a gown. You should keep your shoes on. You may be asked to drink water before the simulation begins. This is to fill your bladder. You may also need to have a catheter placed into your bladder during the procedure. The catheter will be removed when your simulation is done.

Your therapists will help you lie down on a table and make every effort to ensure your comfort and privacy.
Although the table will have a sheet on it, it is hard and has no cushion. If you have not taken pain medication and think you may need it, tell your therapists before your simulation begins. Also, the room is usually cool. If you feel uncomfortable at any time, let your therapists know.

Throughout your simulation, you will feel the table move into different positions. The lights in the room will be turned on and off and you will see red laser lights on each wall. Your therapists use these laser lights as a guide when they position you on the table. **Do not stare into the red beam because it may damage your eyes.**

Although your therapists will walk in and out of the room during your simulation, there will always be someone who can see and hear you. You will hear your therapists speaking to each other as they work, and they will explain to you what they are doing. Do not move once your simulation begins, because it may change your position. However, if you are uncomfortable or need assistance, tell your therapists.

To help pass the time, your therapists can play music for you. You may bring a CD of your own from home, if you wish.

**Positioning**

While you are lying on your back on the table, a mold will be made of your lower body. Your radiation therapists will place a warm, wet sheet of plastic over your lower hip and thigh areas. They will press on it to shape it to fit around your body. As the mold cools, it hardens. This procedure takes about 15 minutes.
During your simulation, and every day of your treatment, this mold will be placed over you. It will be attached to the table on which you are lying. It helps ensure that you are in the correct position each time you receive your treatment.

Figure 1. Computed Tomography (CT) scan machine

Imaging
While you are lying in your position, you will get a CT scan of the area to be treated (see Figure 1). These scans are used only to map your treatment. **They are not used for diagnosis or to find tumors.** You may also have magnetic resonance imaging (MRI) of your prostate done during the simulation process. If you need other imaging, your nurse will explain this to you.

Before the scan is taken, a small rubber catheter will be inserted into your rectum. The catheter placement is not painful. This catheter is used to help see your rectum on the scans.
It will take about 45 minutes to get your CT scan. During the scan, you will hear the machine turn on and off. Even if the noise seems loud, your therapists will be able to hear you if you speak with them.

**Skin markings (tattoos)**
Your therapists will draw on your skin in the area being treated with a felt marker and make about 4 to 6 permanent skin markings called tattoos. Your therapists will use a sterile needle and a drop of ink to make the tattoo. The sensation of getting one feels like a pinprick. The tattoo marks are no bigger than the head of a pin. The felt markings can be washed off after your simulation. The **tattoos are permanent and will not wash off**. If you are concerned about receiving tattoos as part of your radiation treatment, talk with your doctor.

After the tattoos are made, your therapists will take several photographs of you in your simulation position. The photographs and tattoo marks will be used to position you correctly on the table each day of your treatment.

**After Your Simulation**
At the end of your simulation, we will give you an appointment for your set-up procedure and your first treatment.

**Scheduling your treatment**
Radiation treatments are given Monday through Friday, every other day. Your treatment may start any day of the week, and it will be every other day for a total of 5 treatments.
You must come in every day that you are scheduled for your treatment. Treatment may not be as effective if you skip or miss appointments. If additional time is needed due to unforeseen circumstances, your radiation oncologist will tell you. If for some reason you can’t come in for treatment, you must call your radiation oncologist’s office to let your team know. If you need to change your schedule for any reason, speak with your radiation therapist.

**Treatment planning**

During the time between your simulation and start of treatment, your radiation oncologist will work with a team to plan your treatment. They will use your simulation scans to plan the angles and shapes of your radiation beams. The details are carefully planned and checked. This process may take up to 2 weeks.

**Vitamins and dietary supplements**

Many people ask about taking vitamins during treatment. You may take a daily multivitamin, if you wish. Do not take more than the recommended daily allowance of any vitamin. Do not take any other vitamins or any supplements without talking to your doctor. This includes both nutritional and herbal supplements.

**Set-up Procedure and First Treatment**

**The day of your set-up procedure and first treatment**

- Mix 1 rounded teaspoon of psyllium powder in 8 ounces of water and drink. Drink it 2 hours before or 2 hours after you take your other medications.
• Do a Fleet® enema 3 hours before your set-up procedure.

What to expect
Your set-up procedure and first treatment will take about 90 minutes. If pain medication was helpful during simulation, you may want to take it before this procedure.

When you come for your set-up procedure, you will be shown to the dressing room and asked to change into a gown. Your therapists will bring you to the room where you will receive your treatment each day. They will position you on the treatment table. You will lie exactly as you did on the day of your simulation.

Special images (x-rays or CT scans) called beam films will be taken to make sure that your position and the area being treated are correct. The beam films will be repeated throughout your treatment. They are not used to see how your tumor is responding to the treatment. The beam films help your therapist to make sure the radiation beams are correctly lined up with your prostate.

You will have your first treatment after your set-up procedure.

During Your Treatment

While on treatment

• Mix 1 rounded teaspoon of psyllium (Metamucil) powder in 8 ounces of water and drink every morning. Drink it 2 hours before or 2 hours after you take your other medications.

Before each treatment
• Do a Fleet® enema 3 hours before each treatment.

**What to expect**

After you check in at the reception desk, have a seat in the waiting room. When they are ready for you, your radiation therapists will tell you to change into a gown. You should keep your shoes on during the treatment.

Some people will need to have a full bladder for their treatment. If your doctor tells you this is needed, your therapist will tell you how much water to drink and when to begin drinking it.

Your radiation therapists will bring you into the treatment room and help you lie on the table (see Figure 2). You will be positioned exactly how you were lying during your set-up procedure. Once you are positioned correctly, your therapists will leave the room, close the door, and begin your treatment.
The beams of radiation are shaped by many small leaves of tungsten (a type of metal) sitting at the opening of the treatment machine. The computer will move the leaves into different positions to block the radiation. The radiation that passes through the opening between the leaves creates the beam that is directed toward your body. The leaves move while the beam is passing through. This varies the intensity of the beam and ensures that you receive the exact doses prescribed by your radiation oncologist.

You will not see or feel the radiation, but you may hear the machine as it moves around you and is turned on and off. You will be in the treatment room for 15 to 45 minutes, depending on your treatment plan. Most of this time will be spent putting you in the correct position. The actual treatment only takes a few minutes.

Although you will be alone during the treatment, your therapists will see you on a monitor and hear you through an intercom at all times. Your radiation therapist will make sure that you are comfortable during the treatment. Breathe normally during your treatment, but do not move. However, if you are uncomfortable or need help, speak to your therapists. They can turn off the machine and come in to see you at any time, if necessary.

**Neither you, nor your clothes will become radioactive during or after treatment. It is safe for you to be**
around other people.

**Status check visit**

Your radiation oncologist and radiation nurse will see you once during your treatment to talk with you about any concerns, ask about any side effects you may be having, and answer your questions. This visit will be before or after your treatment. You should plan on being at your appointment about 1 extra hour on this day.

If you need to speak with your radiation oncologist or radiation nurse any time besides this visit, call your radiation oncologist’s office or ask the support staff or your therapists to contact them when you come in for treatment.

**Side Effects**

Some people develop side effects from radiation therapy. Which side effects and how severe they are depend on many factors, such as the area being treated, the dose of radiation, the number of treatments, and your overall health. The side effects may be worse if you are also getting hormonal therapy. Below are the most common side effects of SHARP. You may have all, some, or none of these.

**Urinary changes**

Your prostate gland may swell and the lining of your bladder may become irritated during treatment. Even after a few treatments you may have:

- Difficulty starting to urinate.
• Increased frequency of urination.
• Frequent need to urinate at night.
• Sudden urge to urinate.
• Burning with urination.

Below are guidelines to help you manage these symptoms.

• Drink 6 to 8 glasses of water throughout the day.
• Decrease your intake of liquids after 8:00 PM.
• Avoid foods and beverages that may irritate the bladder. Examples are:
  ○ Caffeine (such as coffee, tea, and soda)
  ○ Alcohol
  ○ Spicy foods (especially if you have burning with urination)
• Tell your doctor or nurse know if you have any urinary changes. They can recommend a change in your diet or prescribe medication that can help.

Bowel Changes
The wall of your rectum may become irritated. After a few treatments you may have:

• More frequent and softer bowel movements.
• Worsening of hemorrhoidal symptoms.
• Rectal discomfort.
• Mucous discharge.
• A small amount of rectal bleeding.
• Increased gas.
• An increased urge to have a bowel movement.

These symptoms are usually mild. When you begin treatment, there are no restrictions on your diet. If you develop any of these symptoms, talk with your nurse about how you can change your diet to reduce them. If you are still uncomfortable, let your doctor or nurse know. They can prescribe medication to help.

In general, these symptoms improve about 1 to 2 months after your treatment ends. Most people continue to take medications to treat bowel changes for a period of time after the treatment. It is important to tell us both if you develop symptoms and also to keep us informed on how you’re doing.

**Sexual health**

You may have concerns about the effects of cancer and your treatment on your sexuality. You are not radioactive. You cannot pass radiation to anyone else, so it is safe to be in close contact with other people.

You may be sexually active during radiation treatment unless your radiation oncologist gives you other instructions. However, if you are sexually active with a woman who is able to have children, you must use birth control (contraception) to prevent pregnancy during your treatment, because your sperm may have been damaged by radiation. See the resource *Sexual Activity During Cancer Treatment: Information for Men* for additional
information. Another excellent resource is the booklet *Sexuality for the Man With Cancer* from the American Cancer Society. You can get a copy by calling 800-227-2345 or go to www.cancer.org/acs/groups/cid/documents/webcontent/002910-pdf.pdf

Some men have a burning sensation during ejaculation. In most men, it goes away 1 to 2 months after treatment is done.

Some men develop sexual changes after treatment is done. You may have:

- Erectile dysfunction (difficultly or inability to have or maintain an erection).
- A change in the sensation of orgasm.
- A change in the amount or consistency of your ejaculation.

These sexual changes may occur many months or even years after treatment. There are treatments for erectile dysfunction. We can give you a referral to a doctor who treats these problems.

Memorial Sloan Kettering (MSK) has a Male Sexual and Reproductive Medicine Program to help people address the impact of their disease and treatment on sexual health. You can meet with a specialist before, during, or after your treatment. We can give you a referral, or you can call 646-888-6024 for an appointment.

**Reproductive health**

Exposure of your testes to radiation may affect sperm production
and your ability to have children in the future. If you want to preserve your ability to have biological children, we recommend banking your sperm before treatment begins. This involves collecting, freezing, and storing your sperm. Sperm can be stored for as long as you want, even for many years. See the resources Sperm Banking and Cancer and Fertility: Information for Men for more information.

If you are sexually active with a woman of reproductive age, it is important to use birth control during treatment and for 1 year after treatment is completed. This is to make sure you don’t conceive with sperm that may have been damaged by exposure to radiation, which could possibly result in birth defects.

Skin and hair reactions
During treatment, you will probably not notice any changes in your skin in the area being treated. However, you may lose some or all of the hair in your pubic area. The hair will usually grow back 3 to 6 months after treatment is done; however, the color and texture may be different.

Below are guidelines to help you care for your skin during treatment. These guidelines refer only to the skin in the area being treated with radiation.

Keep your skin clean

- Bathe or shower daily using warm water and a mild unscented soap, such as Neutrogena®, Dove®, baby soap, Basis®, or Cetaphil®. Rinse your skin well and pat it dry with a soft
towel.

- When washing, be gentle with your skin in the area being treated. Do not use a washcloth, a scrubbing cloth, or brush.

- If you received tattoo marks before your treatment, they are permanent and won’t wash off. You may get other markings during treatment such as an outline of your treatment area with a purple felt-tipped marker. You can remove these markings with mineral oil when your therapists say it’s okay.

- **Do not use alcohol or alcohol pads on your skin in the area being treated.**

**Moisturize your skin often**

- Start using a moisturizer when you begin treatment. This can help to minimize any skin reaction. You can use over-the-counter moisturizers. When choosing a moisturizer pick one that does not have any fragrances or lanolin. There are a number of products that are good to use, and your nurse may suggest one of these to you. Use only one at a time unless your nurse tells you to use more.

- If you are using a moisturizer, apply it 2 times a day. Your nurse will tell you if you need to do it more or less often.
  - If your radiation treatment is in the morning, apply the moisturizer:
    - After your treatment.
    - Before you go to bed.
  - If your radiation treatment is in the afternoon, apply the
moisturizer:

- In the morning, at least 4 hours before your treatment.
- Before you go to bed.

- On the weekends and on days that you don’t have treatment, apply the moisturizer:
  - In the morning.
  - Before you go to bed.

Avoid irritating the skin in the area being treated

- Wear loose-fitting cotton clothing in the area being treated. Do not wear tight clothing that will rub against your skin.
- Use only the moisturizers, creams, or lotions that are recommended by your doctor or nurse.
- If your skin is itchy, do not scratch it. Apply moisturizer. Ask your nurse for recommendations on how to relieve the itching.
- Do not let your treated skin come into contact with extreme hot or cold temperatures. This includes hot tubs, water bottles, heating pads, and ice packs.
- If you have no skin reactions during your treatment, you can swim in a chlorinated pool. However, be sure to rinse off the chlorine right after getting out of the pool.
- Avoid tanning or burning your skin during treatment and for the rest of your life. If you are going to be in the sun, use a PABA-free sunblock with an SPF of 30 or higher. Also, wear
loose-fitting clothing that covers you as much as possible.

**Fatigue**

Fatigue is a feeling of being tired or weak, not wanting to do things, not being able to concentrate, or feeling slowed down. You may develop fatigue after 2 to 3 weeks of treatment, and it can range from mild to severe. Fatigue may last 6 weeks to 12 months after your treatment ends.

There are a lot of reasons why you may develop fatigue during treatment, including:

- The effects of radiation on your body.
- Traveling to and from treatment.
- Not having enough restful sleep at night.
- Not eating enough protein and calories.
- Having pain or other symptoms.
- Feeling anxious or depressed.
- Certain medications.

You may find that your fatigue is worse at certain times of the day. Below are suggestions to help you manage your fatigue.

**Ways to manage fatigue**

- If you are working and are feeling well, continue to do so. However, working less may help increase your energy.
- Plan your daily activities. Pick those things that are necessary and most important to you and do them when you have the...
most energy. For example, you may go to work but not do housework, or watch your children’s sports event but not go out to dinner.

- Plan time to rest or take short naps (10 to 15 minutes) during the day, especially when you feel more tired. If you do nap, try to sleep for less than 1 hour at a time.

- Try to sleep at least 8 hours every night. This may be more sleep than you needed before you started radiation therapy. You may also find it helpful to go to sleep earlier at night and get up later in the morning. One way to sleep better at night is to be active during the day. For example, if you are able to exercise, you could go for a walk or do yoga. Another way to sleep better at night is to relax before going to bed. You might read a book, work on a jigsaw puzzle, listen to music, or do calming hobbies.

- Ask family and friends to help you with things like shopping, cooking, and cleaning. Check with your insurance company to see if they cover home care services.

- Some people have more energy when they exercise. Ask your doctor if you can do light exercise, such as walking, stretching, or yoga. Avoid riding a bicycle during treatment as this may put pressure on your prostate area.

- Eat foods that are high in protein and calories. Ask your nurse for the resource *Eating Well During and After Your Cancer Treatment*.

- Other symptoms, such as pain, nausea, diarrhea, difficulty
sleeping, or feeling depressed or anxious can increase your fatigue. Ask your doctor or nurse for help with any other symptoms you may have.

**Emotional health**

The diagnosis and treatment of cancer can be a very stressful and overwhelming event.

You may feel:

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All these feelings are expected if you or someone you love has a serious illness. You may also worry about telling your employer that you have cancer or about paying your medical bills. You may worry about how your family relationships may change, about the effect of cancer treatment in your body, or if you will continue to be sexually attractive. You may worry that the cancer will come back. We are 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 may help to talk about your feelings with someone you trust. You may choose your spouse or partner, a close friend, family member,
chaplain, nurse, social worker, or psychologist. You may also find it helpful to talk to someone who is going through radiation therapy, or a cancer survivor or caregiver who has been through a similar treatment. Through our Patient-to-Patient Support Program, you have a chance to speak with former patients and caregivers. To learn more about this service, please call 212-639-5007.

- Join a support group. Meeting other people with cancer will give you a chance to talk about your feelings and listening to other people who have same concerns. You will learn how others cope with their cancer and treatment. Your doctor, nurse, or social worker can tell you about the support groups you might be interested in.

- Try relaxation and meditation. You may try thinking of yourself in a favorite place while breathing slowly and paying attention to each breath or listening to a soothing music or sound. For some people, praying is another way of meditation. These kinds of activities can help you feel relaxed and calm.

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

We all have our own way of dealing with difficult situations. Generally, we use whatever has worked for us in the past. However, sometimes this is not enough. We encourage you to speak with your doctor, nurse, or social worker about your concerns.
After Your Treatment

At the end of treatment, you will be told how often to see your doctors for follow-up appointments. Please be sure to keep your follow-up appointments with your radiation oncologist. He or she will evaluate your response to treatment. You may have blood tests, x-rays, scans, and biopsies during these visits. Before coming, write down your questions and concerns. Bring this and a list of all your medications with you. You can also call your doctor or nurse at any time after your treatment is completed, or in between follow-up appointments, if you have any questions or concerns.

Late side effects

Keeping your follow-up appointments will help us identify any late effects of treatment.

Radiation can cause permanent side effects in the bladder and bowel. Many people are not aware of these changes and do not have any symptoms. However, some people will develop symptoms 4 months or more after treatment. These may be similar to the ones you had during treatment. However, there is a very small chance that you may develop others. These are very rare but may include:

- Narrowing of the opening of the bladder
- Loss of urinary control
- Blood in the urine
- Rectal bleeding
These symptoms may come and go over time. They can also be persistent and chronic. Even if you do not develop any late side effects, remember that the tissues in your bladder and rectum have been affected by the treatment. Call your radiation oncologist if you:

- Have any new urinary, bladder, or bowel symptoms.
- Need to have a colonoscopy. Avoid having a colonoscopy for the first year after treatment.
- Need any type of rectal procedure.

If you took vitamins before your treatment, you can re-start taking them 1 month after your treatment is done. If you would like to speak with a dietitian about your diet or supplements, please ask your nurse to arrange this.

**Resources**

Many of the resources listed in this guide can be found on the Internet. If you don’t have a computer or if you don’t know how to use the Internet, check with your local public library or community center.

**MSK resources**

**Counseling Center**

646-888-0200

Many people find counseling helpful. We provide counseling for individuals, couples, families, and groups, as well as medications to help if you feel anxious or depressed.
Integrative Medicine Service
646-888-0800
Offers many services to complement traditional medical care, including music therapy, mind/body therapies, dance and movement therapy, yoga, and touch therapy.

Nutrition Services
212-639-7071
Our Nutrition Service offers nutritional counseling with one of our certified dietitians. Your dietitian will review your current eating habits and give advice on what to eat during and after treatment.

Patient-to-Patient Support Program
212-639-5007
You may find it comforting to speak with a cancer survivor or caregiver who has been through a similar treatment. Through our Patient-to-Patient Support Program, we are able to offer you a chance to speak with former patients and caregivers.

Sexual Health Program
Cancer and cancer treatments can have an impact on your sexual health. MSK’s Sexual Health Program can help you take action and address sexual health issues before, during, or after your treatment. Our Male Sexual and Reproductive Medicine Program helps male patients who are dealing with cancer-related sexual health challenges, including erectile dysfunction. For more information, or to make an appointment, please call 646-888-6024.
Tobacco Treatment Program
212-610-0507
The Tobacco Treatment Program at MSK can help you stop using tobacco, whether or not you are a patient at MSK. We use a wide range of approaches to help you quit including medications and behavioral techniques. We are located at 641 Lexington Avenue between East 54th and East 55th Streets on the 7th floor.

External resources

American Cancer Society
www.cancer.org
800-227-2345
Provides information and support to people with cancer and their caregivers. It supports research, provides printed materials, and conducts educational programs.

American Society for Therapeutic Radiology and Oncology
www.rtanswers.org
800-962-7876
Group of radiation oncology professionals that specializes in treating patients with radiation therapy. Provides detailed information on treating cancer with radiation and contact information for radiation oncologist in your area.

CancerCare
www.cancercare.org
800-813-HOPE
National nonprofit organization that helps people with cancer
and their caregivers through counseling, education, information, referrals, and direct financial assistance.

**Cancer Support Community**
www.cancersupportcommunity.org
Provides support and education to people affected by cancer.

**National Cancer Institute’s Cancer Information Service**
www.cancer.gov
800-4-CANCER (422-6237)
Provides education and support to people with cancer and their families. Publications are available online and in print.

**National Alliance of State Prostate Cancer Coalitions (NASPCC)**
www.naspcc.org

**Prostate Cancer Foundation**
www.pcf.org

**US Too International Prostate Cancer Education and Support Network**
www.ustoo.org

**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.

Radiation oncologist: ____________________ Number
Questions To Ask Your Doctor or Nurse

We recommend that you write the questions to ask during your visit with your doctor or nurse. Write down the answers during your appointment so that you can review them again later.

Examples of questions to ask
What kind of radiation therapy will I get?

How many treatments will I get?

What side effects should I expect during radiation therapy?

Will these side effects go away after radiation therapy is finished?

What kind of late side effects should I expect after radiation
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 _______________________. After 5:00 PM, during the weekend, and on holidays, please call_____________________. If there’s no number listed, or you’re not sure, call 212-639-2000.

About Your Stereotactic Hypofractionated Accelerated Radiation Therapy to the Prostate (SHARP)

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