

*Mary Bird
Perkins
Cancer Center
is the only
independent,
nonprofit
radiation
treatment
center in
the state of
Louisiana.*

FOLLOWING UP ON YOUR IMPLANTS

Because of the possible side effects of the implant, it is important that you keep in contact with your radiation oncologist and urologist, especially if there are any problems. Generally, you will be asked to see either or both your radiation oncologist and urologist within two weeks after your implant. All patients will be scheduled to come in one month after the implant, after some of the swelling has resolved, to check the quality of the implant using a CT scan. There is no preparation for this study. The actual "success" of the implant, meaning whether the cancer remains active or not, can only be determined on following the blood PSA levels over time. Your urologist will generally check PSA levels within a couple of months following treatment, and usually at six month intervals, or sooner, for several years.

If you have any questions, please contact us at 225-215-1515.



Robert S. Fields, M.D.
Radiation Oncologist

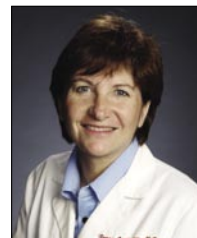


Gregory C. Henkelmann, M.D.
Radiation Oncologist/
Medical Director



Sheldon A. Johnson, M.D.
Radiation Oncologist

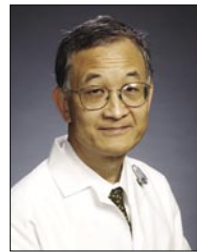
Mary Bird Perkins Radiation Oncologists



Renee A. Levine, M.D.
Radiation Oncologist



Maurice L. King, M.D.
Radiation Oncologist



Kenneth K. Lo, Ph.D., M.D.
Radiation Oncologist



Baton Rouge | Hammond | Covington

www.marybird.org



MARY BIRD PERKINS
CANCER CENTER

PATIENT INSTRUCTIONS

FOR RADIOACTIVE PROSTATE

IMPLANTS

Radioactive sources (or seeds) have been implanted into your prostate. These "seeds" are implanted in strands or ribbons with nonradioactive material separating the individual seeds. The seeds are small capsules made of titanium containing radioactive iodine-125 or palladium-103. These seeds have a silver metallic appearance and the material between the seeds (spacer) is black. The strands may be anywhere from 1/2 inch in length to 2 inches in length. They are approximately the diameter of a pencil lead. They remain permanently in the prostate. The seeds do not interact chemically with the tissues. They treat by releasing radiation over an extended length of time.



Mary Bird Perkins Cancer Center is committed to providing the latest technology for radiation therapy.

MORE ABOUT PROSTATE IMPLANTS
The rate at which the radiation levels decrease is called a half-life, meaning that the level of the radiation received by the prostate decreases, after the implant, by half over this length of time. Therefore,

in two months, iodine-125 seeds (which have a half-life of 60 days) will treat at one-half of its original activity. In four months after the implant the activity would be one-fourth of the original activity, and at 6 months one-eighth. The other type of radioactive seed, palladium-103 has a half-life of 17 days. We consider the time over which the radiation continues to treat the prostate cancer and for the radioactivity to be “gone” to be about five half-lives. This would mean that the iodine-125 seeds treat over a period of approximately ten months and the palladium seeds treat over a period of approximately three months.

COMMON SIDE EFFECTS

The side effects from the prostate radiation implant are from two causes. The first is **trauma** received by the prostate from the needles carrying the radioactive sources. The second is from the **radiation** itself.

Bleeding and swelling will occur within the prostate due to the insertion of the needles into the prostate tissue. Bleeding may result in finding blood in the urine, which usually only occurs for up to two to three days after the implant. This is usually minor and results in only coloring the urine red. If heavy bleeding occurs or blood clots block the urine you should contact your urologist. The swelling of the prostate from the implant generally causes a slowness of the urinary flow. Sometimes you will receive a type of drug called an alpha blocker to aid in improving the urinary flow. This restriction of urinary flow is usually most severe after your bladder catheter is removed the day of or the day after the implant. If you are unable to urinate, the catheter will need to be replaced. This will necessitate further “trials” of removing your catheter and replacing it if you cannot urinate.

Infection could also occur within the prostate gland. Your urologist generally will prescribe a course of antibiotics that are given during the implant and to be taken for the week after the implant to prevent infection.

The side effects of the **radiation** from the implant usually are noticeable within two weeks after the implant. The radiation may cause symptoms of irritation to the bladder, resulting in an urgent need to urinate, frequent urination and/or burning on urination. Medications can be given to reduce these symptoms. This may continue for up to several months following the implant. The radiation may also contribute to swelling of the prostate and restriction of urinary flow. The alpha blockers may also help the urine flow in this instance.



Swelling of the prostate may occur to the point where you cannot urinate. If this does occur, you will need to contact your urologist or go to the emergency room to have a catheter placed to empty the bladder. Occasionally the bladder may retain urine and you may frequently urinate very small amounts. This is called overflow incontinence. If you continue to fail to empty your bladder, you may accumulate dangerously large amounts of urine in the bladder, which could result in injury to the kidneys or other organs. Other symptoms of urinary retention may include swelling over the pelvis from a distended bladder and swelling in the legs. **If you feel this may be occurring, it is very important to contact your urologist or your radiation oncologist to assess the problem.**

OTHER PRECAUTIONS:

Loss of Seeds

Occasionally a seed or strand of seeds may be discharged in the urine or semen. In the event you should pass a seed or strand of seeds, do not touch it or try to retrieve it. If the seeds are lost in the toilet, simply flush the toilet. If a seed were to fall on the floor use a spoon or similar utensil to pick it up and flush the seed down the toilet. If you are sexually active, you are advised to abstain from intercourse for two weeks after the implant and to wear a condom for two months thereafter to minimize any risk to your partner.

Radiation Exposure to Others

Any radiation exposure to your family or others in close contact with you is very low and well within acceptable limits to the general public. However, it is still our responsibility to inform you of the best way to minimize any possible exposure to anyone in close contact with you. You do not have to sleep alone, although sleeping on your back will reduce radiation dosage to anyone that sleeps with you. To minimize radiation exposure to others, you should not allow infants, children, or pregnant women to sit on your lap for two months from the date of the implant.