

# Radiotherapy to the Bladder

A guide for patients and their carers



## Contents

|  |             |
|--|-------------|
| What is radiotherapy?                    | 2           |
| Your treatment                           | 3           |
| Agreeing to treatment                    | 3           |
| Treatment preparation                    | 4           |
| Your treatment                           | 5           |
| Some questions about treatments          | 8           |
| Side effects from treatment              | 11          |
| What can you do to help?                 | 14          |
| Stopping smoking                         | 18          |
| What can the staff do to help?           | 18          |
| Relatives and carers                     | 18          |
| What happens now? Follow-up arrangements | 19          |
| Appointments                             | 19          |
| Other information                        | 20          |
| Benefits and financial information       | 23          |
| Contacts                                 | inside back |



## Introduction

This booklet is to tell you about radiotherapy to the bladder. The Christie Hospital is a specialised centre for radiotherapy and patients come for treatments that are not always available at general hospitals. If you are having radiotherapy as an inpatient, please bring this booklet with you.

You may have heard about radiotherapy from people you know or from the patients in the hospital. Remember that their information may not apply to you.

## What is radiotherapy?



The treatment machine

Radiotherapy is the use of exact, carefully measured doses of radiation to treat diseases. It is used to treat a wide variety of conditions including cancer, thyroid disorders and some blood disorders.

Most patients having radiotherapy are treated

using a high energy beam of x-rays delivered by a machine called a linear accelerator, to the precise area affected by your illness. The rays are used only to treat the tumour and a small surrounding area.

While not all machines look alike, they all work in a similar way. In fact, these machines are just more powerful versions of the x-ray machines that are used to take pictures of chests, broken bones and so on.

Radiotherapy is often given in several small doses over a specified period of days or weeks, but may be given in a single treatment.

Specially trained male and female health care professionals called therapy radiographers operate the radiotherapy machines. They will be able to answer any queries or concerns you may have.



## Your treatment

The specialist doctor who is in charge of your treatment is a clinical oncologist. A team of doctors, radiographers and nurses will care for you. This team will not necessarily include the doctor who saw you first of all but a named consultant will be responsible for your treatment.



CT Scanner

In choosing your treatment, your clinical oncologist at the Christie has carefully considered the nature of your illness, and your particular needs with regard to your treatment plan.


The first stage of your treatment will be a planning scan. Shortly following this, within two weeks, your radiotherapy treatment will start.

***“If anybody asked my advice it would be not to worry as the staff are fantastic and helped to ease my worries”***

## Agreeing to treatment

### Consent To Treatment

The doctors, clinic nurses and specialist radiographers will normally give you some written information to support what they have said about your treatment. At the time your treatment is being planned, you will have a further opportunity to discuss anything that you do not understand, or any anxieties you may have, before you actually start.



We will ask you to sign a consent form agreeing to accept the treatment that you are being offered. The basis of the agreement is that you have had the Christie hospital's written description of the proposed treatment, and that you have been given an opportunity to discuss any concerns.

Radiation can be harmful to the unborn child. It is important to let the radiographers know before you have any radiation exposure if you have missed a period or suspect that you might be pregnant.

### **What are the benefits of treatment?**

The radiotherapy treatment for your cancer is intended to kill the cancer cells in your bladder and reduce the chance of the cancer recurring.

### **Are there any alternatives to the treatment**

Surgery to remove your bladder may be an alternative to the radiotherapy treatment that has been discussed with you.

### **What will happen if I do not have this treatment?**

Without treatment to your bladder, the cancer will continue to grow which may mean the development or worsening of symptoms. Some (but not all) cancers may then spread away from the bladder and become incurable.

## **Treatment preparation**

The preparation for treatment takes some time - in some cases it may take up to 2 weeks or more. It is time well spent, as the treatment is being tailored to your particular needs.

Before treatment begins, we will ask you to come for a scan which helps us to identify the position for your treatment.



We will give you an appointment card with the date of your first appointment and the unit where you should go. This will usually be within two weeks of the scan.

Treatment preparation is done on a C.T. Scanner (see page 3). Marks are put on your skin with a special pen so that x-rays can be focused accurately. The marks may rub off a little onto clothing. Do not worry too much if they do - they will wash out -but it might be sensible to wear older clothing. The radiographers will explain how you can keep the treated area clean, and will tell you when you can wash the marks off.

Once the treatment is started, tiny permanent marks are made on the skin.

## Your treatment

On the day of your first treatment, you will come to the Radiotherapy department. If you are an inpatient, you may be collected by a male or female therapy care assistant. They wear white uniforms with a red trim.

You may have already visited this department as part of the preparation for treatment, and met some

of the therapy radiographers. They are easy to recognise in their white uniforms with a maroon trim. The radiographers will be giving you the precise treatment prescribed by the doctor. They will explain to you what is going to happen



Radiographer explains the treatment



Being positioned on treatment bed



Machine lined up for treatment

before they take you into the treatment room. The Christie is a training hospital so you may meet male and female students in the Radiotherapy Department who may be involved in the delivery of your treatment.

You may be asked to change in a cubicle into a loose gown or to remove or loosen any clothing that covers the area being treated. The radiographer will help you onto the treatment bed and will then adjust both the bed and the machine to the exact positions

that are needed. They will try to make you comfortable as you will be asked to keep as still as possible for a few minutes during treatment.

The radiotherapy machines are quite big, and if you have never seen them before, you might feel anxious. But there is no need to worry - the treatment is absolutely painless. It is just like having an x-ray picture taken. The treatment only lasts a few minutes. However, the treatment session



may take about 15 minutes, allowing time for changing and the machine to be set up.

The therapy radiographers operate the machines from outside the room. When all the adjustments have been made, they will leave the room while you have your treatment. It is the only time you will be alone, but even then, the radiographers will be watching you carefully on a closed circuit television system (see picture above). If for any reason you need them, just wave your hand to them and they will interrupt the treatment and come in to you immediately.



The radiographers at the controls

Some people are worried that they will be completely enclosed by the machine - this will not happen. The overhead section of the machine can rotate, but nothing will press down on you. Most machines make a buzzing noise when they are operating. This is how you will know when the treatment is happening.

After a few minutes, your treatment will be over for that day. This routine will go on each working day until your course of treatment is finished. The prescribed radiation dose and the number of days over which it is given varies between patients. Normally, there is no radiotherapy treatment on Saturdays and Sundays, and this is taken into account when your treatment is planned.



The radiographer will give you information about who to contact if you have any problems during treatment.

Your treatment appointment time may vary from day to day for a variety of reasons. Please discuss this with the therapy radiographers on your treatment unit.

## Some questions about treatments

*“The treatment takes a remarkably short time and is painless”*

### **Will it hurt?**

No. You will feel no pain at all while you are actually having your treatment.

### **How does it actually work?**

Our bodies are made up of cells, and all cells have the capacity to divide. If radiation hits a cell that is dividing, it will be damaged. Cancer cells are much less able than normal cells to repair the damage, so more of the cancer cells will be destroyed.

### **Will I lose my hair?**

You may lose some pubic hair during and after treatment. But it usually starts to grow back some time after treatment is finished.

### **Is it safe?**

Radiation used in medical treatment is given in controlled, carefully measured doses. The aim is to treat the illness without harming the patient.

### **Will I be radio-active?**

No. Patients treated by x-rays do not become radio-active. The radiation does not stay in your body after treatment, so you cannot do anyone else any harm. It is perfectly safe for



you to mix with other people and to have visitors if you are on the wards.

However, as some people are treated with radio-active substances on the ward, there may be some restriction on visiting patients on the ward. Pregnant women should always check with the ward sister before entering the ward. For the same reason, children are not encouraged to visit the wards. Patients who are fit enough can meet their families in the Oak Road foyer or in the conservatory and gardens.

### **I already have problems with my general health. Will radiotherapy treatment make them worse?**


Not usually, but some health problems such as diabetes, need to be monitored more closely during radiotherapy. Ask your doctor if you are worried about any other health problems.

### **If I have to stay in hospital, can I go home for the weekend?**

Yes, if your doctor thinks that you are well enough, but you must make your own transport arrangements to go home and come back to hospital. At the present time on Oak House ward you can go on weekend leave after your treatment on Friday, and return in good time for your treatment on Monday - the ward re-opens at 7.30am on Monday morning. The times of weekend leave vary on other wards, so please check with the nurse in charge of the ward about the time you need to return.

### **As an inpatient, when will I have my treatment?**

The radiographers will give you a leaflet on your first appointment at the radiotherapy department, explaining how many treatments you will have and the date of your



last treatment. Unfortunately, they cannot always give you an exact appointment time for the next day's treatment, but you will be told whether this will be in the morning or afternoon. They will give you an appointment time whenever possible.

If you have a morning appointment please stay on the ward until after your treatment, but if you have an afternoon appointment you may leave the ward in the morning. You must check with your ward sister first.

Inpatients should be able to go home as soon as their course of treatment is finished, or very shortly afterwards. The Community Link Team will arrange for a district nurse to visit you at home, if this is necessary.

### **Can I be treated as an outpatient?**

Yes, if your doctor thinks you are well enough. Some people continue to work, but you may find it difficult to go out to work, run the home and cope with treatment as well. After daily travel and treatment, you will almost certainly feel tired and need to rest. Space in the waiting area is limited, please only bring one person with you.

You may be entitled to help with travel costs. Ask at the Post Office, Christie Social Work department or local DSS for leaflet HC1 'Help with health costs'. Other financial help may be available through the Christie social work department.

If you live too far away to travel daily but you are otherwise fit, you may be allocated a bed in Oak House ward, open Monday to Friday. Here, as on most wards, you will be able to wear your own clothes and can go out, once you have had your treatment for the day. Check with the nurse in charge before you leave the ward.



*If you are being treated as an outpatient, you will have to pay for your prescriptions unless you are exempt. If you think you will need more than 5 items in the next 4 months, you will find it cheaper to buy a pre-payment certificate. Ask for details at the Christie pharmacy*

## **Can I be treated early on a Friday?**

No, unfortunately we cannot guarantee this, as other patients would like an early appointment too. If this is going to cause you serious difficulty, please speak to the radiographer.


## Side effects from treatment

Side effects from radiotherapy vary. Some people have hardly any side effects. Any side effects you get will depend on which part of your body is treated, and on the number of treatments you have. Even people who have had very similar treatments can have different side effects. So be prepared, but do not worry if you are different.

Most people begin to notice the side effects during the second half of their course of treatment. But for some people, the side effects begin when treatment finishes. Usually, the first two weeks after treatment is the time when side effects can be at their worst. They should gradually fade over the first 4 to 6 weeks after treatment finishes.

During your course of radiotherapy, one of the doctors,

***“I was asked each day how I felt and when I mentioned the problems, I was given medication which was effective.”***



nurses or research radiographers on the team looking after you will see you regularly.

## Bladder symptoms

- Your bladder will become irritable during the course of treatment so that you may pass urine more frequently, perhaps with burning. Or you may feel an urgent need to pass urine. Drink plenty of clear fluids each day. Try to drink more than normal by having extra glasses of water and fruit juices until these symptoms settle. Some people find a glass of cranberry juice helpful. Avoid large quantities of tea, coffee and alcohol as these make the symptoms worse. If burning persists, you may need a course of antibiotics.
- You may notice some blood in your urine. Don't be alarmed – in most cases this settles within a month of finishing your treatment.

## Bowel symptoms

- You may have more frequent bowel actions during treatment and for several weeks afterwards. The staff will give you Fybogel to help. Please don't take any other bowel medicines without discussing it with your GP. If diarrhoea is a problem, we recommend you follow the diet on page 15.
- You may develop tenesmus – the urge to open your bowels but without passing anything. If the Fybogel does not help to control this, then consult your doctor.
- If your bowels become stubborn, contact your GP to get a prescription of **Lactulose** to prevent constipation, but don't take laxatives without discussing it first with your doctor.
- You may also notice an increase in the amount of 'wind' you pass.



- If opening your bowels becomes painful, we can give you some local anaesthetic cream to apply.
- You may have some spotting of blood or bleeding with bowel movements which can sometimes go on for a few months. Don't be alarmed as this bleeding is not uncommon.

### **Sore skin:**

- The skin can become red and itchy and sometimes sore in the treatment area. Ask the radiographers for advice, as it is easier to minimise any reaction if we look after the skin early on.

### **Tiredness:**

- You may feel a sense of fatigue or have less energy during and after your course of treatment - just as you would when recovering from an operation. You can help yourself by taking time to rest and relax. Do rest before you get tired. Do not be afraid of asking family and friends for help. Some patients find that it helps to have a short rest each day after having their treatment. However, it is beneficial to take gentle exercise as well as taking rest.

***“Tiredness also kicks in as a result of the radiotherapy, but can be helped by an afternoon nap or an early night – probably as well because sleep is often interrupted during the night through trips to the toilet.”***

### **Late or permanent reactions**

It is possible for some types of reaction to occur months or years after the treatment has finished, although this is less common these days because of recent improvements in treatment. Your doctor at the Christie will discuss any possible late effects with you. Long term risks of radiotherapy to the bladder may include:

- radiotherapy to the pelvis is very likely to induce the menopause in women who are still having regular periods.
- bleeding from the back passage which on occasion may need medication or surgery
- more urgent need to open the bowels and more frequently
- more urgent need to pass urine and more frequently than before treatment
- difficulty in obtaining erections firm enough for intercourse. This may be improved with drugs such as Viagra. Those men who are sexually active following treatment may notice a reduction or lack of semen
- the sperm count may be reduced
- it is rare, but some women may have vaginal stenosis. This is shrinking and narrowing of the vagina as a result of scar tissue which can form in the vagina following this treatment.

## What can you do to help?

### **Your skin**

- Do not use any creams, moisturisers, make-up, deodorants, perfumed soap or talcum powder on the part of your skin which is being treated. Baby-washing products and Simple soap are safe to use. Keep on using unperfumed toiletries whilst your skin is sore.
- Wash the treated skin gently with warm water, and pat dry with a soft towel.



- Wear something loose and comfortable. Cotton is best next to the treated skin - better than man-made material.
- Keep the area of skin that has been treated away from direct heat, such as sunlamps, hair-dryers and direct sunlight. You should take extra care of your skin during treatment and as long as the reaction lasts. Your skin may always be more sensitive, so you may need to take care in the sun, even after your treatment has finished. You can use high protection sun-cream on the treated area when the side effects have settled.

## Your diet

It is important that you continue to eat nourishing food during and after treatment. Ask the nursing or radiotherapy staff for a copy of *Eating Help Yourself*, which has information about coping with problems such as loss of appetite. If diarrhoea becomes a persistent problem you may need to follow a low fibre diet to ease your symptoms. Follow the diet for as long as side effects last, then gradually resume your normal diet.

**If you have diabetes** and you have developed diarrhoea, still follow the low fibre diet advice but make sure you eat meals and snacks containing low fibre starchy foods such as white bread, white rice and cereals from the 'Foods low in fibre list'. Once your symptoms have resolved, go back to your normal diabetic diet.

Fibre is the part of grains (flours and cereal), pulses, vegetables and fruit which is not digested and passes down the gut. To cut down the amount of fibre in your diet, try to follow the 'Foods low in fibre' list.



| Foods high in fibre that may make your symptoms worse  | Foods low in fibre   |
|--|--|
| Beans, lentils, pulses, quorn  | Meat, fish (tinned, fresh, frozen), eggs, tofu.  |
| Wholemeal, granary or multi-grain bread and flours, high-fibre white bread, wholemeal chapatti or pitta bread and wholewheat crackers.   | White bread and flour, bread sticks, crumpets, plain rolls, white chapatti or pitta bread and cream crackers   |
| Brown rice, whole-wheat pasta and whole-wheat noodles  | White rice, pasta, spaghetti, noodles and couscous.  |
| Biscuits and cakes made with wholemeal flour, or dried fruit e.g. flapjack, dried fruit biscuits, mince pies, fruitcake, fruit scones, digestive, plain or chocolate covered oat biscuits. | Biscuits or cakes made with white flour e.g. Rich tea, custard creams, shortbread, chocolate-coated plain biscuits, plain or cheese scones, doughnuts, Madeira cake. |
| High-fibre breakfast cereals e.g. Weetabix, Shredded wheat, muesli, Fruit & Fibre, bran and oat cereals.   | Rice Krispies, Cornflakes, Special K, Coco pops, Frosties.   |
| Vegetable skins and pips, potato skins, sweetcorn. All vegetables except those listed in 'foods low in fibre' section. Salad, peppers and onions.  | Potatoes skinless, up to 2 tbsp per day of skinless courgette and cucumber, passata, carrot,   |
| Soups – lentil, vegetable  | Soups – 'cream of' tomato, chicken, mushroom or oxtail   |



| Foods high in fibre that may make your symptoms worse  | Foods low in fibre   |
|--|--|
| <p>All fruit except those listed opposite. No fruit with pips, peel or skin such as strawberries, blackcurrants, passion fruit, kiwi or bananas. Dried fruit or olives. Fruit juice ('with bits'): orange, prune, tomato juices.</p> | <p>Fruit with all skin, peel and pips removed such as grapefruit or orange segments or peeled apple. Small portions of melon, seedless grapes (no skins), tinned peaches, fruit cocktail. Fruit juice ('without bits' or smooth) orange, apple, grapefruit, pineapple and grape juice.</p> |
| <p>Build up drinks, smoothies. Cheese or cottage cheese with added fruit and nuts. Fruit yoghurt or fromage frais with added fruit/cereal (check the label)</p>  | <p>Milk, cheese, plain cottage cheese, cheese spreads. Plain yoghurt, fromage frais, ice cream, jelly, sorbet, ice-lollies, instant whips, crème caramel, milk puddings, custard and blancmange.</p>   |
| <p>Wholemeal savoury snacks, nuts, popcorn</p>   | <p>Crisps.</p>   |
| <p>Marmalade or jam with peel or pips.</p>   | <p>Shredless marmalade, jelly jam, honey and lemon curd.</p>   |
| <p>Peanut butter</p>   | <p>Tomato sauce, yeast extract.</p>  |
| <p>Fruit and nut chocolate, coconut</p>  | <p>Plain or milk chocolate, boiled sweets, toffee, fudges, wine gums.</p>  |

If you are following this diet for more than a week, a complete multivitamin and mineral supplement is recommended daily such as Centrum, Boots A-Z, Lamberts A-Z Multi. For a more detailed list please ask for a copy of the low-fibre diet booklet.

## Stopping smoking

If you continue to smoke, **this will reduce the chance of the treatment being successful**. It will also make the reaction worse and will significantly **increase the risk of serious late side effects**. It also increases the risk of further cancers. We strongly advise you not to smoke. The Christie booklet 'Stopping Smoking' gives hints about giving up. You can also contact Quitline on 0800 002200.

## What can the staff do to help?

It is part of the staff's job to help you through any side effects you may have. If you feel uncomfortable in any way, do mention it to the doctor, the nurses or the radiographers. They all want you to be as comfortable as possible.

Please remember, do not hesitate to ask the staff if you have any problems or concerns - however trivial these may seem. If you have any queries after your treatment, before your follow-up appointment you can ring the Radiotherapy department on 0161-446 3485 and ask to speak to a radiographer.

### **For more information ....**

**You may have particular queries that are not answered here. Please do not hesitate to ask the staff.**

## Relatives and Carers

Please share this booklet with your family and friends. It is important that they feel well-informed and understand what is happening. Families and carers can have a role in helping you. There are also videos on radiotherapy, which you can



take home to watch. Please ask your doctor, a radiographer or the ward staff.

## What happens now? Follow-up arrangements

We will arrange an appointment to phone you at home, six to eight weeks after treatment has finished to check that the side effects of the radiotherapy have settled. Providing all is well, we will usually discharge you to the care of your urologist.

After this, the urologist will see you at your local hospital. Three to four months after treatment you will have a cystoscopy when the urologist may also take a biopsy. The urologist will keep you under review with cystoscopies at regular intervals. The reason for these tests is to check that the cancer cells have gone.

### **What symptoms should I report or be worried by?**

If you have heavy blood loss in your urine, weight loss or new swelling in one or both legs contact your urologist or GP to ask for an early appointment.

## Appointments

Once you are having treatment, if you have a problems with your appointment time, please contact the Radiotherapy Department at the Christie on 0161 446 3485 as soon as possible. It is helpful if you can quote your hospital number - it will be on your appointment card or letter.

If your follow-up appointment is inconvenient, please contact the Health Records department on 0161 446 3346 or 0161 446 3347. Or you could write to:



*The Health Records Officer,  
Christie Hospital NHS Trust,  
Withington,  
Manchester M20 4BX.*

If you do write, please make sure that your letter arrives well in advance of your appointment, as this will make it easier to arrange another appointment for you.

If you change your address, please let the Health Records Department staff know your new address - and the address of your new family doctor.

## Other information

### **Cancerbackup**

Cancerbackup is a national cancer information charity which runs a cancer information service. The cancer support service freephone number is 0808 800 1234 (or 020 7613 2121 for charged calls). Calls are answered by specially trained cancer nurses who can give you information on all aspects of cancer and its treatment.

Cancerbackup also publish booklets which are free to patients, their families and carers. You can get a copy by ringing the freephone number or writing to: *Cancerbackup, 3 Bath Place, Rivington Street, London EC2A 3JR.*

The information is also on their website:

**[www.cancerbackup.org.uk](http://www.cancerbackup.org.uk)**



## **Cancerbackup booklets include:**

- Booklets on specific cancers, for example, Bladder and Prostate.
- Understanding radiotherapy and Understanding chemotherapy.
- booklets on living with cancer - some of these are listed below:
  - Who can ever understand? - talking about your cancer
  - Lost for words: how to talk to someone with cancer
  - What do I tell the children?
  - Cancer and Complementary therapies

The Cancer Information Centre on the glass link corridor has the full range of Cancerbackup booklets available free to patients and their relatives or carers.

## **Continence Foundation**

307 Hatton Square  
16 Baldwins Gardens  
London EC1N 7RJ  
0845 345 0165  
[www.continence-foundation.org.uk](http://www.continence-foundation.org.uk)

## **Incontact: Acton on Incontinence**

United House  
North Road  
London N7 9DP  
0870 770 3246  
[www.incontact.org](http://www.incontact.org)

## Christie hospital information

The Christie hospital produces a range of patient information booklets and videos. Some of these are listed below:

### ■ Videos and DVDs 'Radiotherapy: a guide for patients and their families'

Also available in Urdu, Cantonese and Mandarin. Videos and DVDs can be borrowed to watch at home. Ask on the ward, the staff in outpatients or Radiotherapy Department.

### ■ Where to get help: services for people with cancer

This booklet discusses sources of help when you have cancer, where to go for financial help, palliative care and cancer support groups.

### ■ Booklets on diet and nutrition

**Eating Help Yourself** gives advice on eating problems when you don't feel well and you are having treatment.

**Advice about soft and liquid foods** and **Nutritional drinks** also give helpful advice on diet.

### ■ Radiotherapy and chemotherapy booklets are available in Urdu, Punjabi, Traditional Chinese and Simplified Chinese.

There are audio-cassettes on radiotherapy and chemotherapy in Urdu, Punjabi, Mandarin and Cantonese. Please ask the staff for a copy or pick one up at the Cancer Information Centre.



Booklets are free to patients coming to the Christie. If you would like a copy, please ask the ward staff. If you are an outpatient, please ask your nurse, doctor or radiographer.

Large print versions are available.  
Please contact Patient Information on  
0161-446-3576.

If you would like to purchase copies of these booklets, contact the Patient Information Co-ordinator on 0161-446 3576 or email [margaret.watson@christie-tr.nwest.nhs.uk](mailto:margaret.watson@christie-tr.nwest.nhs.uk)

## Benefits and financial information

You may be entitled to Disability Living Allowance (for under 65s) or Attendance Allowance (65+) or other benefits.

Find out more today, **freephone 0800 882200**

Pick up a leaflet or see a social worker



### **Christie Website**

Many of the Christie booklets and a list of UK help groups are available on the Christie website. You can also access other patient information sites in the UK such as Cancerbackup and Cancerhelp UK via the Christie website.

*[www.christie.nhs.uk](http://www.christie.nhs.uk)*



## Contacts

Dr Cowan .....0161 446 3332  
Dr Livsey .....0161 446 8278  
Dr Logue .....0161 446 3355  
Dr Wylie .....0161 446 3341

### **Nurse Clinician:**

Jeanette Lyons .....0161 446 8594

### **Nurse Specialist:**

Jane Booker .....0161 446 8018

### **For queries about appointments:**

Radiotherapy department .....0161 446 3485

### **For queries out of hours:**

Ring the Christie switchboard and ask to speak to the  
Nurse Practitioner: .....0845 226 3000



### **Please note:**

mobile phones can interfere with the treatment equipment. Please look out for signs letting you know if it is safe to use your mobile phone. If you do have one with you, you may need to turn it off.

Christie Hospital **NHS**  
NHS Trust

in  
partnership  
with

 **cancerbackup**  
*informing understanding supporting*

## **Cancer Information Centre**

on the glass link corridor near Oak Road

Open: Monday to Friday\*

\*Opening times can vary, please ring to check before making a special journey

Tel: 0161 446 8100

Email: [christie@cancerbackup.org](mailto:christie@cancerbackup.org)

**Christie Hospital Tel: 0845 226 3000**

Christie Hospital Patient Information Service • February 2007 - Review Feb 2010

[www.christie.nhs.uk](http://www.christie.nhs.uk)

CHR/XRT/427/04.10.05