

My Journey Part 2 – Bulletin No 4

I will be starting my radiotherapy program (25 sessions of radiotherapy over a 5 week period) on Monday 30 March under the supervision of my radio oncologist Dr Eric Khoo. Dr Eric arranged for me to have another PET scan on Monday 23 March to determine more accurately the location and size of the two tumours that need to be treated, the larger being in my upper left neck region and the smaller one in the vicinity of my throat. As a result of this PET scan and comparing it with the one I had before the start of the chemo program it showed that there had been a reduction in the size of the tumours as a result of the chemo program, which was the result he had hoped for. Whilst the CT scan is an excellent tool in the treatment program, the PET scan provides a better imaging facility to allow for a more accurate picture of the tumours. Since the start of the year I have had 3 CT scans, 2 PET scans and an MRI scan.

In 2016 I had 35 sessions of radiotherapy to treat 5 high category tumours and the after effects of this treatment were horrific leaving me with 3rd degree radiation burns to my lower face, neck and upper chest, the loss of saliva and taste and mouthful of ulcers. I was fitted with a PEG which allowed me to be fed via a stomach tube with a syringe for 4 months with Resource 2 (calorie dense, high nitrogen, complete liquid formula, specifically designed for the management of fluid restriction and elevated nutritional needs), as I was unable to swallow food. In that time I lost 18kgs. I have been assured that the current treatment will relatively trouble free without any nasty side effects.

There are risks involved with subjecting the neck to a 2nd program of radiotherapy, the highest risk being a 10% chance of rupturing the aorta. Life is full of challenges and the risk involved with this challenge is minimal when you consider the outcome that can be achieved by accepting the challenge.

After the 25 sessions I will have 3 months wait as the effects of the radiotherapy continues to work for that length of time, after which a PET scan will determine the success of the program. In 2016 all of my tumours had been dissipated by radiotherapy and I can see no reason why the same outcome will not occur this time around. Bring it on.

Radiotherapy

Radiotherapy is delivered by a linear accelerator (LINAC) which customises high energy x-rays to conform to a tumour's shape and destroy cancer cells while sparing surrounding normal tissue. It features several built-in safety measures to ensure that it will not deliver a higher dose than prescribed and is routinely checked by the medical physicist to ensure it is working properly.

If you're scheduled for radiation therapy using a LINAC, your radiation oncologist will collaborate with a radiation therapist and a radiation physicist to develop a treatment plan for you. This devised plan is double-checked before treatment begins and quality control procedures are implemented to ensure that each treatment is delivered in the exact same manner.

The treatment couch can move in many directions including up, down, right, left, in and out. The beam comes out of a part of the accelerator called a gantry which can be rotated around the patient. Radiation can be delivered to the tumour from any angle by rotating the gantry and moving the treatment couch. Radiotherapy head cast enables the patient to be anchored to the platform thus ensuring there is no movement during the radiation.

Communication

I am a great believer in communicating with family and friends especially in matters such as I am now facing. At the moment my bulletins are being received by over 600 people and no doubt many of these people forward them on to their friends. Amongst the recipients are members of the Gold Coast Bridge Club, the Gold Coast Head and Neck Cancer Support Group, health professionals associated with my treatment, Gold Coast Retired Police branch members, my police probationary squad (Class of 61), my Murwillumbah High School class mates (Class of 59) and many family and other friends. It is surprising the interest generated by the bulletins and many ask when the next bulletin is going to be published as they follow my journey.

Attachments (P 2)

Top photo linear accelerator, bottom photo head cast, my neck also displays radiation burns (2016) which had by then mostly healed.

Always Look on the Bright Side of Life

Neil Raward

"Always Look On The Bright Side Of Life" – Please click on

