

PATIENT INSTRUCTIONS FOLLOWING PROSTATE IMPLANTS

After you recover from the anesthesia, you will be discharged from the hospital with a Foley catheter in place. It is normal to have some blood in the urine. This bleeding may continue for several days, so do not be alarmed. Drinking plenty of water helps prevent blood clots and flushes the bladder. If you should experience severe pain or bleeding, you should call Maggie Dudik, R.N. or Dr. Song or Dr. Song's resident at 410-955-6981 (from 8a.m. to 4:30p.m. Monday-Friday) and 410-955-4331 (evenings, weekends, holidays)

A dressing will be in place on your perineum (area where needles were inserted behind your scrotum). Keep this dressing on for 24 hours, then you may remove it as long as there is no continued bleeding. You may experience some soreness in this area which is normal. Tylenol 500mg may be taken every 6 hours as needed for discomfort; you will also be given a prescription for a stronger pain medication for use as needed (Tylox). You may experience some irritation of your rectum, and you may use Anusol rectal suppository as needed for this.

You will need to return to the Radiation Oncology Department in the Weinberg Building, Level L2, in the morning the day after your implant to have your catheter removed.

A CT scan will be performed on the day of your visit on Weinberg L2 to enable physicians to determine the exact position of each seed in the prostate. This is necessary to determine that your prostate gland is receiving the proper amount of radiation throughout the entire gland. On rare occasions, it has been necessary to give an additional amount of radiation with external radiation or another implant. Check in at the Radiation Oncology desk fifteen minutes prior to the test. Please stop by the nursing desk following the CT scan to let us know how you are doing. You need to void (pass your urine) before you go home. This appointment is scheduled for _____.

You will also be asked to undergo a chest x-ray on that day on Weinberg Level 2. This appointment is scheduled for _____.

DIET: Your first meal after your implant should be clear liquids (see handout). Unless you are on a special diet for other reasons, you may return to a normal diet after this. If

you develop frequent urination or pain with urination, then avoiding acidic foods may be helpful.

MEDICATIONS: *Antibiotics* were given to you before the implant to prevent infection. You should continue to take the antibiotic as prescribed by your physician until it is completely finished. If you develop fever, chills, or a rash contact either Maggie Dudik, R.N., or Dr. Song's resident, or go to the emergency room for medical care.

Additionally, before your implant you were started on a medication (*tamsulosin, a.k.a. Flomax*) to assist you in urinating; continue this medication until you feel your symptoms have nearly resolved, then try reducing the dose gradually. If the symptoms listed below ('Later Side Effects') become bothersome, additional medication from your radiation oncologist or urologist may be helpful.

ACTIVITY: Avoid heavy lifting or strenuous physical activity for the first two days that you are home. After that you may return to your normal activity level.

After a two-week period there is no specific danger related to the resumption of sexual activity. You may, however, feel more comfortable after waiting for a period of 4 weeks following the implant. Ejaculation will involve a reduced volume, may be associated with burning, and may be blood-tinged. *The use of a condom for the first 3 months of sexual activity* is recommended to prevent the extremely unlikely discharging of a seed into the vagina.

RADIATION PRECAUTIONS: For the first 90 days after the Palladium seed implant (120 days after Iodine seed implant) do not allow females who may be pregnant or children to sit upon your lap. Pregnant women should be at arms length from the patient. Although the radiation risk to those around you is too low to be estimated, this measure reflects a sensible approach for family members who may be especially sensitive to any dose of radiation.

POSSIBLE SIDE EFFECTS FROM THE IMPLANT

IMMEDIATE POSTOPERATIVE SIDE EFFECTS:

1. Slight bleeding beneath the scrotum.
2. Blood in the urine.
3. Bruising and tenderness between the legs.
4. Fatigue.

If at any time you cannot pass your urine, you should either contact Maggie Dudik R.N. (410-955-6981) or Dr. Song (410-502-5875), contact your urologist, or go to the Emergency Room for care.

LATER SIDE EFFECTS:

1. Frequent urination
2. Burning with urination
3. Sense of urgency
4. Weaker urinary stream

After healing from the implant, most of the side effects are due to the radiation from the seeds that were placed into the prostate. The radiation causes swelling and irritation of the prostate which causes the above symptoms. Drink plenty of *fluids* and *avoid caffeine-containing beverages or acidic foods* to help relieve these symptoms.

You may also feel fatigued during the first 4-8 weeks of the implant. This is your body's normal reaction to the radiation and the fatigue should resolve over the next two months.

FOLLOW-UP:

You have elected to have treatment for your prostate cancer by the implantation of radioactive seeds in your prostate. This implant may have been preceded by hormone injections and/or external beam therapy. After the implant, you will need regular checkups to be sure the prostate cancer is controlled and to monitor for late side effects.

Within four weeks of the implant, you will be asked to return to the Radiation Oncology Department for a brief visit. Please come to the Department of Radiation Oncology, Weinberg Building, Level L2 on that date.

This appointment time will be given to you on the day after your brachytherapy.

Medication Checklist for Brachytherapy Patients

- 1) Ativan 0.5mg tabs, take 1-2 tabs at 30 minutes prior to Volume Study
- 2) Flomax 0.4 mg by mouth once or twice daily, Dispense #60, 5 refills. Patient to begin taking 1 week prior to seed implant and continue as needed.
- 3) Keflex 500 mg by mouth twice daily, Dispense #20. Patient to begin taking 2 days prior to implant and continue until all pills are gone.
- 4) Tylox 1-2 by mouth every 4 hours as needed, Dispense #20. Use if needed for pain after seed implant.
- 5) Anusol rectal suppository, one in rectum every 8 hours as needed, Dispense #7. Use if needed for rectal irritation after seed implant.