Patient Education



BMDA High Dose Rate (HDR) for Vaginal Radiation Treatment

HDR is a type of radiation. It is used to deliver radiation to the vagina for patients who have had a hysterectomy. To prevent the tumor from coming back, HDR is usually given in 1-5 treatments. If multiple treatments are scheduled, they are spread out over a few weeks.

Procedure

- Your nurse will schedule your treatments and confirm them with you.
- When you arrive for HDR treatment, we will obtain your vital signs, you will be asked to undress from the waist down and put on a gown.
- Your will be asked to empty your bladder immediately prior to the procedure.
- We will escort you to the simulation room and you will be assisted on the treatment table.
- Your radiation oncology doctor will insert a small cylinder into your vagina. A Computed Tomography (CT) scan will be taken to ensure proper placement of the cylinder. The cylinder should feel snug, but should not be painful.
- A CT scan will be done with the device in place to confirm that it is positioned correctly. The radiation oncology doctor will then begin planning your radiation treatment, which normally takes about 30-45 minutes.
- You will be transferred to a stretcher with the assistance of a special inflatable mattress. This is for your comfort and to ensure that the device has minimal movement.
- Once transferred to the treatment room you will rest for a few minutes with the device inserted until the radiation oncology doctor finishes your treatment plan. One of our team members will be with you the entire time to ensure your comfort.
- Once treatment begins the cylinder will be connected to the treatment machine by a wire. The radiation will last for about 5 minutes. A Video camera will be used to monitor you during treatment.
- When your treatment is complete, the cylinder will be removed, and you may get dressed.

Discharge Instructions

• After your treatments are complete, it is important to follow up with your gynecologic oncologist, and your radiation oncology doctor. You may make any appointments that are needed at checkout.

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•Side effects from treatment may continue for a few days after treatment. They may include:

- Uterine cramping
- Frequency of and/or burning during urination
- Diarrhea
- Pelvic rest is usually recommended for 4-6 weeks from the end of your procedure dates, but your radiation doctor will confirm this towards the end of your treatment.
- You may receive a vaginal dilator to use after your pelvic rest time is complete. This will help prevent narrowing of the vagina. Your physician or nurse will teach you how to use the dilator. When you resume sexual intercourse, you can stop using the dilator. If you are not sure about continuing the use of the dilator, consult your gynecologic oncologist.
- You may bathe as usual and ease back into normal daily activities. Some patients may have menopausal symptoms due to previous surgery or radiation therapy. Symptoms may include hot flashes or vaginal dryness. To help ease these symptoms, ask your gynecologic oncologist if estrogen replacement therapy is an option for you.
- Please call your radiation oncology nurse as soon as possible with any of the following symptoms:
 - Fevers greater than 100.4
 - Heavy bleeding after the procedure (where you soak through multiple pads a day)
 - Severe pelvic pain
 - Rectal bleeding
 - Inability to urinate
 - Pain or burning with urination
 - Blood in your urine

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