
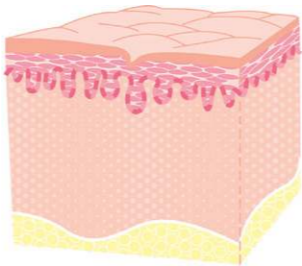

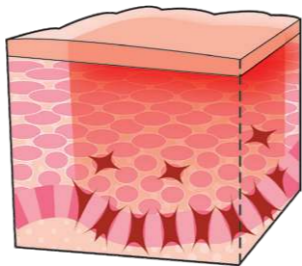

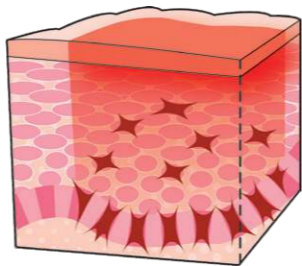

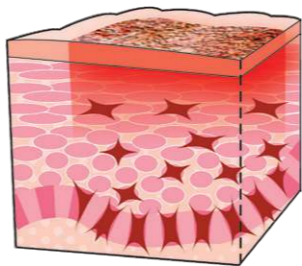

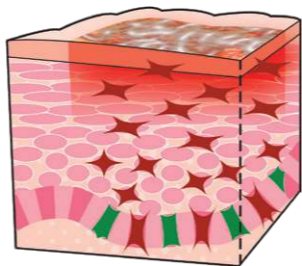


Radiotherapy Induced Skin Reactions

Intervention guidelines[†]

Assessment / Observation		Effects of Radiotherapy on Skin Cells	Intervention (action)	Rationale
	RTOG 0 No visible change to skin		To apply aqueous cream initially twice daily	To promote hydrated skin & maintain skin integrity
	RTOG 1 Faint or dull erythema. Mild tightness of skin and itching may occur		Increase application of aqueous cream as needed. 1% Hydrocortisone cream may also be prescribed for symptomatic relief. Commence analgesia as guided by WHO analgesic ladder	To promote hydrated skin, patient comfort and maintain skin integrity. To treat itchy skin. To reduce pain, soreness and discomfort.
	RTOG 2 Bright erythema / dry desquamation. Sore, itchy and tight skin		Increase application of aqueous cream as needed. Continue as RTOG 1 interventions	As RTOG 1
	RTOG 2.5 Patchy moist desquamation Yellow/pale green exudate. Soreness with oedema		Continue aqueous cream on unbroken skin. Stop hydrocortisone on broken skin. Apply an appropriate dressing* [†] to exuding areas (e.g. PolyMem, Mepilex, Allevyn N.A. / Gentle are all suitable options). Analgesia as guided by WHO analgesic ladder. Wear loose fitting clothing	To promote comfort. Reduce risk of complications of further trauma and infection. To reduce pain, soreness and discomfort
	RTOG 3 Confluent moist desquamation. Yellow/pale green exudate. Soreness with oedema		Stop using aqueous cream on moist/broken skin. Continue with RTOG 2.5 interventions	To promote comfort Reduce risk of complications of further trauma and infection
	RTOG 4 Ulceration, bleeding, necrosis (rarely seen)		Seek specialist advice (i.e. Clinical Oncologist, Radiotherapy Clinical Nurse/Radiographer Specialist in your area).	

* Based on the Princess Royal Radiotherapy Review Team's experience to date.

[†] Refer to Toolkit booklet for full product references.

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