



PATIENT EDUCATION

Actinic keratosis & radiation therapy

A plain-language guide for patients and families. Bring this to your visit. It does not replace advice from your clinician.

What is this condition?

Actinic keratoses (AKs) are rough, sun-damaged spots that can, over time, turn into squamous skin cancer. Most are treated with freezing, creams, or photodynamic therapy. Radiation is not first-line for a few spots. It is sometimes considered for a large, stubborn field in someone who cannot use or has failed field treatments — a specialist decision.

What you may notice

- Sandpaper spots on the scalp, face, ears, or hands
- Many spots in one “field” of sun damage
- A spot that grows, bleeds, or thickens — that may already be cancer and needs a biopsy
- Prior skin cancers — tell us the map

Usual care

Dermatology leads. Biopsy anything that does not look like a typical AK. Sunscreen and hats are lifelong. Field creams treat the “bad neighborhood,” not just one roof.

Where CureRays may fit. CureRays may treat a selected refractory field with superficial radiation after dermatology agrees and cancers have been biopsied. We will not radiate a whole face “just in case.” Confirm every lesion that might be invasive cancer first.

What treatment usually involves

- Dermatology notes and biopsies in hand
- A mapped field with photographs
- A short superficial course
- Skin-care teaching; follow-up with dermatology for new spots

Immobilization — why it matters

A shield protects eyes, lips, or hairline as needed. You hold still for a brief session. Marks should not be washed off until we say so.



Side effects you should know about

Low-dose or superficial courses use much less dose than most cancer plans. Effects are usually local. Confirm your list with your clinician — this is not a consent form.

- **Redness and crusting** in the field — expected; looks like a stronger sunburn.
- **Fatigue** is usually little.
- **Rare / serious.** Spreading infection or a non-healing ulcer — call.

What this means for you at CureRays

Radiation treats the agreed field; it does not replace lifelong skin checks. New spots outside the field still need dermatology.

Questions to ask

- Have the worst spots been biopsied?
- Why not another round of cream or PDT?
- Exactly which skin is in the field?
- Who sees me for the next full-body skin exam?

How to schedule or learn more

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