



PATIENT EDUCATION

Acute toxicity during brain and CNS radiation

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

Why these effects happen

Brain tissue, scalp, hair follicles, and sometimes the ear sit in the field. Hair thins in the beam path. The brain can swell a little (edema), which is why many people are on a steroid such as dexamethasone during part of care. Fatigue and a foggy head are common. This sheet is for adult brain and CNS treatment — not a childhood-cancer handout.

What often shows up by week

- Days to week 2: scalp redness or itch; hair begins to shed in the field.
- Headache, nausea, or sleepiness can rise if swelling increases — report a change, do not 'push through.'
- Ear fullness or hearing change if the ear canal is in the field.
- Steroid effects: extra hunger, high blood sugar, mood swing, or weak thighs after longer courses.

Confirm with your care team. Never stop steroids suddenly. A missed taper can make swelling rebound. Confirm every dose change, seizure medicine, and blood-sugar check with your care team.

What you can expect

- A mask or frame for accuracy. Extra time and medicine for claustrophobia if you need it.
- The Fatigue, Brain focus, and When to call printouts go with this sheet.



Self-care and medicine pointers

- Take steroids exactly as written, including the morning timing if they want that.
- A bland scalp moisturizer if the skin is dry. No harsh dyes or tight hats on open skin.
- Fall-safe home: night light, clear walkways. Do not drive if seizures or a new field cut are not cleared.
- Blood-sugar checks if you have diabetes or are on more than a short steroid burst.

Monitor for (named conditions)

- **Cerebral edema / raised pressure** — worse headache, vomiting, new double vision, or increasing sleepiness.
- **Seizure** — a spell, a stare, or a shaking event, even if you have never had one.
- **Steroid hyperglycemia** and **steroid myopathy** — high sugars; trouble standing from a chair.
- **Steroid mood change or insomnia.**
- **Radiation dermatitis of the scalp** and **otitis externa** if the ear is in the field.
- **Venous clot** if you are less mobile — one-sided leg swelling or sudden chest pain.
- **Fatigue and short-term attention change** during the course.

When to call the clinic vs go to the ER

- Same-day clinic: a steroid side effect you cannot manage, a new rash on the scalp that weeps, or rising sugars.
- ER or 911: a seizure, the worst headache of your life, new weakness or facial droop, or you cannot stay awake.

Questions to ask

- What is my steroid taper on paper?
- Am I cleared to drive?
- Which symptoms mean I should go straight to the emergency department?

How to schedule or learn more

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