



PATIENT EDUCATION

Acute toxicity during breast 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

The beam treats the breast or chest wall and, for some people, nearby nodes. Skin and the lining of ducts turn over quickly, so they show injury first. Effects stay in the treated area. They are expected tissue reactions, not a sign that cancer is spreading. Chemo given near the same time can add fatigue, mouth sores, or low blood counts.

What often shows up by week

- Weeks 1 to 2: mild tiredness; faint pink skin or itch, especially under the breast or in the armpit.
- Weeks 3 to 5: deeper red, tightness, heat, or dry peel in the fold or along the scar.
- Last week and 1 to 2 weeks after: skin can peak after the last session (moist peel in a fold).
- Breast heaviness or swelling can appear during the course or soon after.

Confirm with your care team. Your weekly on-treatment visit is the place to report new redness, fever, or a jump in swelling. Confirm lotions, steroids, and pain medicine with your care team before you start them.

What you can expect

- Most people finish the course with skin care and pacing.
- Skin often looks its worst shortly after the last beam, then slowly settles.
- A well-fitting soft bra or going without a bra at home can be more comfortable than an underwire.



Self-care and medicine pointers

- Wash with mild soap and pat dry. Use the bland moisturizer your nurse named. No heating pads, ice packs, or sun on the field.
- Hydrocortisone or a silver dressing is only if they wrote it for itch or a moist area.
- Pain pills, anti-nausea drugs, or growth-factor shots follow the chemo or surgery plan — not this sheet.
- See the Skin care and Fatigue printouts for day-to-day detail.

Monitor for (named conditions)

- **Radiation dermatitis** — pink to red skin, dry peel, or moist peel in the inframammary fold or axilla.
- **Breast or chest-wall edema** — new heaviness, shine, or a larger cup size on the treated side.
- **Cellulitis or wound infection** — spreading redness, fever, pus, or a bad smell, especially after surgery or with an expander.
- **Acute radiation esophagitis** — burning swallow if internal mammary or high nodes are treated.
- **Treatment fatigue** and, if you are on chemo, **neutropenia** (fever is an emergency).

When to call the clinic vs go to the ER

- Same-day clinic: moist peel you cannot keep clean, a jump in swelling, pain that breaks your plan, or burning swallow.
- ER or 911: fever 100.4 F (38 C) or higher on chemo, rapidly spreading redness, trouble breathing, or fainting.

Questions to ask

- Which fold or scar is most likely to peel for my plan?
- What cream or dressing do you want if the skin opens?
- Who do I call after hours in week 1 after the last session?

How to schedule or learn more

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