PATIENT EDUCATION

Acute toxicity during esophageal 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 esophagus is a muscular tube whose lining turns over quickly. When the beam treats an esophageal cancer (or a nearby chest field), that lining becomes raw. Swallowing hurts. Chemo given with radiation usually makes this harder. Weight and fluids are the safety issues, not a sign the cancer is 'moving.'

What often shows up by week

- Weeks 1 to 2: a scratchy swallow or heartburn-like burn.
- Weeks 2 to 5: pain as if hot liquid sits in the chest; you move to softer food.
- Peak pain can last into the first 1 to 2 weeks after the last session.
- Cough or a wet voice with sips means food or liquid may be going the wrong way.

Confirm with your care team. A feeding tube, if offered, is a bridge so you can finish on time — not a failure. Confirm pain mixtures, acid reducers, and antifungal medicine with your care team.

What you can expect

- Weekly weight. Soft or liquid calories. The Nutrition and Dysphagia printouts pair with this sheet.
- Most swallow pain eases over the weeks after the course if you stay hydrated.

Self-care and medicine pointers

- Cool or room-temperature soft food. Sit up during and after meals. Sip through the day.
- A numbing swallow mix or acid reducer only if they wrote it. No alcohol or tobacco.
- Take pain medicine before meals if that is the plan. Ask before using honey or glutamine.

Monitor for (named conditions)

- **Acute radiation esophagitis** — burning swallow, food sticking, or drooling because it hurts.
- **Dehydration and unplanned weight loss.**
- **Aspiration** — cough, wet voice, or fever after a sip or bite.
- **Esophageal candidiasis** — worse pain plus white plaques if they look in the mouth or on scope.
- **Bleeding** — vomiting blood or black stool.
- **Fistula** (uncommon) — sudden cough with every swallow, or food seeming to enter the airway.
- **Feeding-tube blockage or leak** if you have a tube. **Neutropenic fever** if you are on chemo.

When to call the clinic vs go to the ER

- Same-day clinic: you skip a day of fluids, pain stops all calories, or a tube will not flush.
- ER or 911: you cannot swallow saliva, coughing blood, chest pain with shortness of breath, or choking that does not clear.

Questions to ask

- What is my 'call today' weight number?
- Do I need a feeding-tube talk now?
- Which swallow mixture is safe with my other medicines?

How to schedule or learn more

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