



**PATIENT EDUCATION**

## **Desmoid tumor (fibromatosis) & 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?**

A desmoid tumor is a locally aggressive growth of fibrous tissue. It is not a cancer that spreads through the bloodstream, but it can invade nearby muscle and make function hard. Some shrink or stay still with watching or medicines. Surgery, ablation, or radiation are used when a tumor threatens function or grows.

### **What you may notice**

- A firm, deep mass that slowly enlarges
- Pain or limited motion if it sits in a limb or the abdominal wall
- A history of surgery, pregnancy, or FAP/Gardner syndrome — tell us
- Fear from the word “tumor” — we will say “not cancer” out loud when that is true

### **Usual care**

Sarcoma or desmoid-experienced teams should guide care. Watchful waiting is appropriate for many. Medicines (including some hormonal or targeted options) are used. Surgery is chosen carefully because desmoids can return in a scar.

**Where CureRays may fit.** CureRays offers image-guided radiation for selected desmoids when a specialty conference agrees — for example, a growing tumor that is a poor surgical target. We will not rush you from a watch plan. Confirm with a desmoid-experienced surgeon or medical oncologist.

### **What treatment usually involves**

- MRI review and prior-surgery history
- Simulation of the full tumor with margin
- A multi-week course in many cases
- PT for the limb or trunk during recovery

### **Immobilization — why it matters**

A mold keeps a limb or trunk still so the field covers infiltrative edges. Bolus may be used if the scar needs dose.



### 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.

- **Skin** reaction in a generous field.
- **Fatigue and stiffness.**
- **Rare / serious.** Wound problems if surgery is later combined, or a rapidly worsening neuro deficit.

### What this means for you at CureRays

Success may be stopping growth, not making the MRI blank on day 30. We will say how we will measure that.

### Questions to ask

- Is watchful waiting still safe?
- Why radiation instead of medicine or surgery?
- How big will the field be compared with the lump I feel?
- Who follows the MRI after we finish?

### How to schedule or learn more

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