PATIENT EDUCATION

Kidney cancer & 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 cancer?

Kidney cancer (often renal-cell carcinoma) usually starts in the filtering tissue of the kidney. Many masses are found on a scan done for something else. Surgery or ablation can remove or destroy a localized tumor. Radiation is not the first treatment for most primary kidney tumors, but it is useful for metastases (bone, brain, lung) and sometimes for a mass that cannot be operated on.

What you may notice

- Blood in the urine, flank pain, or a mass — or no symptoms at all
- Anemia or fever in some people
- Bone pain or neurologic change if it has spread
- A second opinion question: “Do I need the whole kidney out?” — fair to ask

Usual care — the big picture

Urology leads most localized care (partial or radical nephrectomy, or ablation). Systemic immunotherapy or targeted drugs treat many advanced cases. Radiation is a local tool for selected sites of spread or for bleeding/pain.

Where CureRays may fit. CureRays uses image-guided radiation for selected kidney-cancer metastases and, less often, for a primary mass when surgery is not possible. We work with your urologist and medical oncologist. Confirm the goal: control a spot, relieve pain, or something else.

What radiation treatment usually involves

- Review of CT/MRI and prior surgery
- Simulation focused on the target (spine, bone, brain, or kidney bed)
- A short or standard fraction course depending on the site
- Pain and kidney-function checks as needed

Immobilization — why it matters

Immobilization matches the site — a mask for brain, a mold for a limb or pelvis. Accuracy protects nearby bowel and remaining kidney when relevant.

Side effects you should know about

Effects depend on the area treated, the dose, and other therapies. This list is typical, not a promise and not complete. Confirm your personal list with your clinician.

- **Site-specific.** Skin, bowel, or nerve effects depend on where we treat — we will list yours.
- **Fatigue.**
- **Rare / serious.** New weakness, sudden pain, or no urine output — call.

What this means for you at CureRays

Do not assume radiation replaces a needed kidney surgery. Do not assume it has no role if the cancer has traveled. Ask us to point to the spot on your scan and say what radiation can and cannot do.

Questions to ask

- Is radiation for my kidney, a metastasis, or both?
- How do we protect the remaining kidney?
- What systemic therapy am I on, and how do the schedules fit?
- What symptoms should I report after a bone or spine treatment?

How to schedule or learn more

CureRays Radiation Medicine® — 300 Sierra College Drive, Suite 150, Grass Valley, CA 95945

Toll free: (844) CURERAYS / (844) 287-3729 · Office: (530) 802-6400 · office@curerays.com · www.curerays.com