PATIENT EDUCATION

# Late toxicity after breast radiation

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

## Why late effects can appear

After the skin heals, deeper change can still build: scar-like tightness (fibrosis), slower lymph flow, and rare strain on the heart or lung at the edge of the old field. Left-sided treatment, anthracycline chemo, and some HER2 medicines add heart watch-items. Most people do not get every item on this list. Your plan, dose, and other treatments decide the short list.

## What this sheet is for

Bring it to survivorship and primary-care visits. It is a monitor list, not a prediction and not a consent form. Screening intervals are written by your oncologists — follow that letter.

**Confirm with your care team.** New swelling, chest pain, shortness of breath, or a breast-skin change years later still needs a call. Do not assume it is 'just radiation.' Confirm every test interval with your care team.

## Who usually follows you

- Medical and radiation oncology for the first years, then a shared plan with your regular clinician.
- Breast imaging as scheduled (mammogram, and MRI only if they ordered it).
- Rehab or a certified lymphedema therapist if an arm or breast starts to swell.

## Monitor for (named conditions)

- **Lymphedema** of the arm, breast, or chest wall — tightness, heaviness, rings that do not fit, or recurrent cellulitis.
- **Breast or chest-wall fibrosis** — firmness, retraction, or chronic pain in the old field.
- **Cardiac disease** after left-sided RT and/or anthracycline or HER2 therapy — chest pain, swelling of legs, new shortness of breath.
- **Radiation pneumonitis or lung fibrosis** — dry cough or breathlessness weeks to months later (pneumonitis) or a lasting exercise limit.
- **Hypothyroidism** if the supraclavicular neck was treated — fatigue, cold intolerance, weight gain.
- **Brachial plexopathy** (uncommon) — new hand weakness, burning, or numbness in a nerve pattern.
- **Rib fracture or chest-wall pain** after a fall or without one.
- **Secondary malignancy** (uncommon) — a new breast, chest-wall, or skin change, including rare angiosarcoma on the treated skin.
- **Implant or flap problems** if you had reconstruction — tightness, malposition, or infection.

## Usual surveillance cadence (your letter wins)

- Breast imaging on the schedule they wrote (often yearly mammogram after the first phase).
- Arm and breast measurements or photos if swelling is a risk.
- Heart follow-up if cardio-oncology set one (echo or symptom review — not a guess from this sheet).
- TSH if the low neck was in the field.

## When to call

- Clinic: new arm or breast swelling, a skin color change that does not fade, or a new lump.
- ER or 911: crushing chest pain, sudden shortness of breath, or one-sided weakness.

## How to schedule or learn more

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