PATIENT EDUCATION

# Vulvar 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?

Vulvar cancer usually starts as a squamous cancer on the outer genital skin. HPV and chronic skin conditions (such as lichen sclerosus) raise risk. Surgery is the main treatment for many early cases. Radiation, with or without chemotherapy, is added for close or positive margins, involved nodes, or tumors where surgery would be very extensive. Sexual health and urine/bowel function belong in the first visit.

## What you may notice

- Itching, pain, a lump, or a color change that does not fade
- Bleeding or a sore that will not heal
- A groin node
- A long history of vulvar skin disease - tell us

## Usual care — the big picture

GYN oncology leads excision and sentinel-node or groin surgery. Staging exams decide whether radiation follows. Skin care in the folds is a large part of getting through a pelvic course.

**Where CureRays may fit.** CureRays delivers image-guided pelvic and groin radiation when your GYN oncologist agrees. We will teach skin care before the reaction peaks. Confirm whether the goal is after surgery or a primary chemoradiation plan.

## What radiation treatment usually involves

- Pathology and operative-note review
- Simulation of the vulva, groins, or both - bolus if the skin needs full dose
- Daily treatments; chemo on agreed days if used
- Sitz, barrier-cream, and pain plans; dilator teaching when indicated

## Immobilization — why it matters

A pelvic mold keeps you still. Bolus may sit on the skin so the dose reaches the surface. Tell us about pain before setup - we can pre-medicate.

## 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.

- **Skin** in the vulva and groin folds - expected; call if it opens or smells.
- **Bowel and urinary** irritation with pelvic fields.
- **Fatigue** and blood counts if chemotherapy is paired.
- **Rare / serious.** Fever, inability to void, or a wound that opens after surgery.

## What this means for you at CureRays

Ask us to point to the scar and the node basins on a picture. You should know why the field is larger than the sore you can see.

## Questions to ask

- Did my nodes show cancer, and does that change radiation?
- Is this after surgery or instead of a larger operation?
- What is my skin-care kit this week?
- What intimacy and dilator plan do you recommend?

## How to schedule or learn more

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