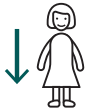


# 4

## Radiotherapy



### + Benefits



Reduce the risk of disease recurrence



Increases the chance of staying cancer free



Taking action

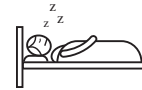


Possible to maintain daily activities

### ÷ Disadvantages



Skin reactions



Fatigue



Heart and lung tissue damage



Many hospital appointments



Late side effects



Body image. Solid tissue formation in the breast



# 4

## No Radiotherapy



### + Benefits



No side effects



No late side effects  
from treatment



Not time consuming



Less time as a  
patient

### ÷ Disadvantages



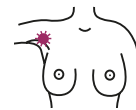
Increase risk of  
disease relapse in  
the breast



Decreases the  
chance of staying  
cancer free



Patients concern of  
disease relapse



Increases the risk of  
incurable disease  
relapse



# 4

## Patient stories



The responsibility towards the family (husband/children/grandchildren) meant, that I chose radiotherapy.

- Patient 63 years

If my benefit of the treatment had been very small, I wouldn't have chosen radiotherapy.

- Patient 54 years

My 88-year-old aunt chose not to get radiotherapy, because she felt "too old".

- Relative

Radiotherapy was chosen because I was afraid that the disease would spread if I did not accept treatment.

- Patient 72 years

I chose not to get radiotherapy in fear of damaging lungs and heart and because it can be difficult to operate in irradiated tissue.

- Patient 49 years

DECISION HELPER™  
preview



# 4

## Risk of local disease recurrence up to 5 years after radiotherapy, hormone sensitive tumor



### Radiotherapy



1.3 out of 100 women will experience local disease recurrence

The statistics are based on women >65 years. For patients under the age of 50 og operated for HER2 positive or triple negative cancer, the absolute benefit of radiotherapy is greater than stated above.

### No radiotherapy



4,1 out of 100 women will experience local disease recurrence

The statistics are based on women >65 years. For patients under the age of 50 og operated for HER2 positive or triple negative cancer, the absolute benefit of radiotherapy is greater than stated above.





# 4

## Risk of disease recurrence up to 5 years after operation for precursors for breast cancer



### Radiotherapy



7.6 out of 100 women will experience disease recurrence of precursors or cancer in the same breast

The statistics are based on 3729 women who have either received or not received radiotherapy after breast-conserving surgery for DCIS from 1985-1999

### No radiotherapy



18.1 out of 100 women will experience local disease recurrence of precursors or cancer in the same breast

The statistics are based on 3729 women who have either received or not received radiotherapy after breast-conserving surgery for DCIS from 1985-1999



# 4

## Risk of dying from lung cancer after radiotherapy (smoker)



Radiotherapy



11.8 out of 100 women will die from lung cancer before the age of 80

The statistics are based on a 60-year-old woman, a smoker. Data assess the woman's risk of dying from lung cancer before the age of 80

No radiotherapy



8.7 out of 100 women will die from lung cancer before the age of 80.

The statistics are based on a 60-year-old woman, a smoker. Data assess the woman's risk of dying from lung cancer before the age of 80



# 4

## Risk of dying from lung cancer after radiotherapy (non-smoker)



Radiotherapy



0.6 out of 100 women will die from lung cancer  
before the age of 80

The statistics are based on a 60-year-old woman, a non-smoker. Data assess the woman's risk of dying from lung cancer before the age of 80

No radiotherapy



0.4 out of 100 women will die from lung cancer  
before the age of 80

The statistics are based on a 60-year-old woman, a non-smoker. Data assess the woman's risk of dying from lung cancer before the age of 80



# 4

## Risk of heart attack. Left-sided radiotherapy (non-smoker; no pre-existing heart disease)



Radiotherapy



3.9 out of 100 women will be affected by a heart attack before the age of 80.

The statistics are based on a 60-year-old woman, a non-smoker with no pre-existing heart disease. Data assess the woman's risk of dying from heart attack before the age of 80

No radiotherapy



3.4 out of 100 women will be affected by a heart attack before the age of 80.

The statistics are based on a 60-year-old woman, a non-smoker with no pre-existing heart disease. Data assess the woman's risk of dying from a heart attack before the age of 80





# 4

## Risk of heart attack after left sided radiotherapy (smoker / pre-existing heart disease)



Radiotherapy



7.6 out of 100 women will be affected by a heart attack before the age of 80.

The statistics are based on a 60-year-old woman, a smoker or with a pre-existing heart disease. Data assess the woman's risk of dying from heart attack before the age of 80.

No radiotherapy



6.6 out of 100 women will be affected by a heart attack before the age of 80.

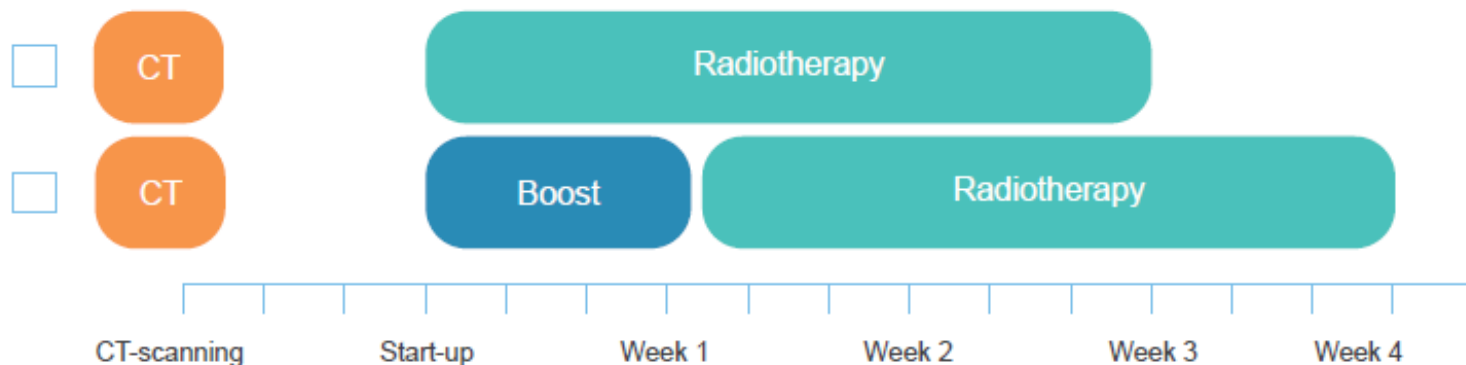
The statistics are based on a 60-year-old woman, a smoker or with a pre-existing heart disease. Data assess the woman's risk of dying from heart attack before the age of 80.



# 4 Overview over the course of your treatment



Your treatment



 CT

 Radiotherapy

Number of treatments: \_\_\_\_\_



Radiotherapy + Boost

Number of treatments: \_\_\_\_\_

The possibility of prophylactic radiotherapy after breast-conserving surgery for early-stage breast cancer

# 4

## Overview over the course of your treatment



Your treatment

☐

CT

☐

CT

Radiotherapy

Radiotherapy

Boost

CT-scanning

Start-up

Week 1

Week 2

Week 3

Week 4



CT



Radiotherapy

Number of treatments: \_\_\_\_\_



Radiotherapy + Boost

Number of treatments: \_\_\_\_\_

