

Patient information

# Vaginal dilation after radiotherapy to the female pelvis

**Important: Please tell us if you have a cardiac device as we will need to monitor your heart during your treatment.**

**Please let us know if you are pregnant or think you might be pregnant.**

It is important to remember that you need to use contraception whilst receiving treatment for cancer in order to prevent pregnancy – please see our leaflet ‘Avoiding pregnancy during radiotherapy and chemotherapy’.



## Introduction

This leaflet is for women undergoing **radiotherapy to the pelvis**. It contains useful information on how to minimise potential long term side effects from your treatment.

You will have an appointment with a specialist radiographer to discuss vaginal dilation. Please do not hesitate to ask the radiographers if you have any problems or questions during or after the discussion.

Please refrain from using tampons and 'douching' (inserting fluid into the vagina) during your treatment and for a period of 3 months following treatment as this can increase the risk of infection.

## The side-effects of radiotherapy treatment

Radiotherapy and sometimes surgery can potentially cause **long term side effects** to the **vagina**.

Radiotherapy/Brachytherapy can cause the walls of the vagina to stick together (referred to as adhesions). This may cause narrowing or shortening of the vagina (referred to as vaginal stenosis). This can happen because of gradual damage to blood vessels and surrounding tissue over time.

You will be given separate information explaining what radiotherapy and brachytherapy treatments are.

Radiotherapy can also reduce natural vaginal lubrication causing vaginal dryness, irritation, and soreness.

We therefore recommend using vaginal dilators to help break down any adhesions that may form from your treatment and to reduce the risk of scarring within the vagina.

**Dilation** means '**stretching and opening**' and can be done by:

1. Use of a dilator
2. Sexual intercourse
3. A combination of intercourse and dilator use.

## Why do I need to use a vaginal dilator?

Whether you are **sexually active or not**, using the dilators will help to:

- Reduce potential long-term discomfort that vaginal scarring can cause.
- Allow the medical team to examine you internally without causing discomfort as part of your ongoing care.
- Ensure sexual relations can continue or recommence after treatment if you wish.
- Reduce the incidence of uncomfortable or painful sexual intercourse.
- Reduce potential difficulties for penetrative sexual intercourse in the future if you are not in a sexually active relationship at the present.

**It is important to remember that when you come to the follow-up clinic the doctor will give you an internal examination. This is the best way of checking the cancer has not come back. If you do not use the vaginal dilators the doctor might not be able to examine your vagina properly because it is too scarred from the treatment.**

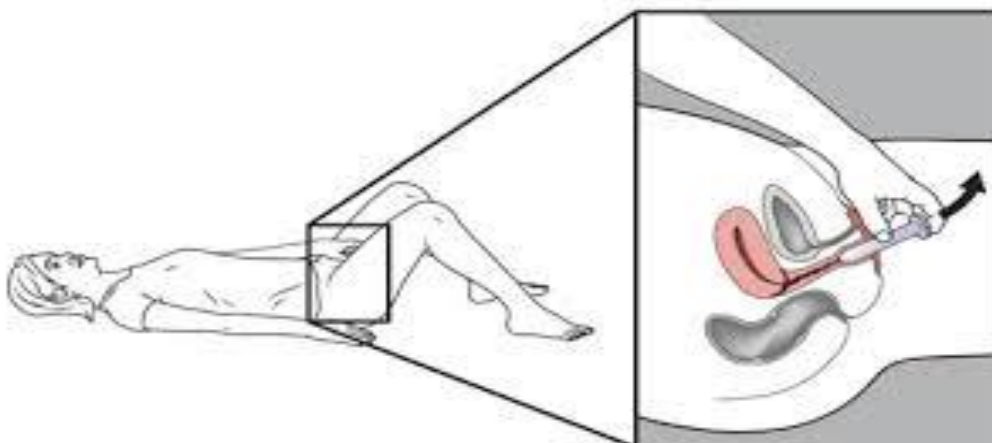
## What is a vaginal dilator?

The vaginal dilator is a smooth plastic tube which comes in a set of four different sizes and should be used as instructed to prevent the shortening and narrowing of your vagina. Attach the dilators together as shown in the picture below. Each cone has two ends. One end will be inserted into the vagina; the opposite end can be used as a handle.



## How do I use the dilator?

1. Choose a time and place when you will not be interrupted.
2. Wash your hands and the dilator with hot soapy water. Use unscented soap.
3. If you are leaking urine (pee), wash your genital area before dilating to prevent any infections.
4. Check that the dilator is smooth with no rough spots or edges.
5. The easiest position to adopt is to lie on your back on your bed, bend your knees and allow your knees to fall apart. If preferred, it can be done in the shower but ensure you don't use any toiletries when in the shower as this may cause irritation of the lining of the vagina. Alternatively, stand with one foot on the ground and the other raised on the side of the bed or on a stool in the shower.
6. Lubricate the dilator. Make sure the lubricant covers all areas of the dilator that will go inside of you.
7. Spread your labia with one hand. With the other hand hold the dilator at the opening of your vagina.
8. Try to relax your pelvic muscles as much as possible. Take a deep breath. Slowly blow out.
9. Keep the dilator in place. Wait, take a deep breath, and as you blow out continue to gently push the dilator further in. Do this a few times.
10. Continue gradually pushing the dilator in until you feel it is in as far as it can go.
11. Continue keeping a bit of pressure on the dilator so that it continues to push to the very top of your vagina.
12. Once the dilator is in as far as it can go, turn it **clockwise for 20 seconds clockwise and then anticlockwise for 20 seconds, 40 to 60 seconds maximum.**
13. Remove the dilator.
14. Wash the dilator with hot soapy water and air dry. Wash off any lubricant. Wash your hands.



**Start with the smallest size dilator (size 1 in picture below) and gradually progress to the second size if you feel comfortable to do so. You can progress to the third size if you have been advised by your doctor or specialist radiographer. But please do not use the fourth size. If you ever feel pain or discomfort when dilating, then stop and try again at later time.**



### **When do I need to use the dilator and how frequent?**

We recommend that you start dilating **3-4 weeks after your treatment has finished**. This allows enough time for the short-term side effects from radiotherapy to resolve.

We recommend dilating **two to three times per week for 40 to 60 seconds maximum each time**.

Your doctor may ask you to reduce it to once a week at a later stage. It is important to remember that sexual intercourse is a form of dilation so this will count towards the weekly target. You will be seeing your doctor and specialist radiographer in outpatient clinic 4-6 weeks after treatment so you can discuss the use of dilators with them if you have any queries or problems.

**We recommend that you continue to dilate for at least five years after treatment.** This can be discussed further with your doctor or specialist radiographer at your follow-up appointments.

## What are the side effects of using dilators?

You may experience mild discomfort when first using the dilators, but this should not be too painful. It is possible that you may experience spotting or slight bleeding following use of the dilators. This is due to the scar tissue in the vaginal walls being broken down. If bleeding becomes excessive, or if you have a heavy, discoloured, bad smelling vaginal discharge please contact a member of staff in the radiotherapy department, your doctor, or the clinical nurse specialist straight away.

**They are available from 9am to 5pm Monday-Friday. Outside of these times, contact your GP.**

## Is it normal to experience pain?

It is normal to experience some pain when first using the vaginal dilator, although this pain should reduce as your anxiety level lessens. Ensure that you use plenty of lubricating gel and relax your pelvic muscles as much as possible when using the vaginal dilator. If you have just gone up a size in dilator, go back down a size and assess whether the pain settles. However, if you are unable to use any of the dilators or to have sexual intercourse because of pain, please discuss this with your doctor or specialist nurse.

## Vaginal dryness

Vaginal dryness can be another long-term side effect from radiotherapy.

There are several creams and gels available which can help with dryness by moisturising the vagina internally.

We recommend 'Sylk' and 'Yes' as these can be used as both a lubricant for vaginal dilating as well as an internal moisturiser. You will be offered samples of these during your discussion with the specialist radiographer. They can be prescribed by your GP or purchased from a pharmacy.

## Dilators/vibrators – which one?

Here at Bart's Health, we will supply a set of dilators free of charge. We are also able to supply a vibrator at a reduced cost of £15. If you have joint problems affecting your grip or wrist and arm movement, you may find a vibrator helpful as it will perform the dilating motions for you. All patients have the option of purchasing a vibrator at the consultation meeting with the specialist radiographer.

## Staying Motivated!

Dilating is often uncomfortable and inconvenient. For some women the pressure of needing to dilate seems overwhelming. It is important not to put off dilating thinking that you'll have more energy or more time later. Putting it off until later can mean:

- Dilation may be more painful and difficult.
- Your vagina may not respond to the dilation as well as it could have if you had started earlier or kept at it.

Try to include dilating into your week and keep the routine. If you are nervous about beginning dilation or having a hard time staying motivated, you are not alone.

Feel free to contact your specialist radiographer at any time to talk this over.

## Contact Us

### Radiotherapy

Radiotherapy Basement  
King George V Wing (KGV)  
St Bartholomew's Hospital  
West Smithfield  
London EC1A 7BE

Radiotherapy Reception (Mon-Fri 8.30am-5pm): **020 3465 5222**

Emergency Hotline (when the department is closed): **07917 093 738**

**Specialist Gynae Radiographer: Sita Mahto 020 346 56219**

### Macmillan Cancer Information Centre

West Wing, Ground Floor  
King George V Wing (KGV)  
St Bartholomew's Hospital  
West Smithfield  
London EC1A 7BE

### **Specialist Macmillan Support**

Just drop in Mon-Fri 10am-12noon and 2-4.30pm. Or call on **020 346 56611**. If calling outside working hours, ring Macmillan free on 0800 808 00 00 or visit the Macmillan website.

### Maggie's Centre @ St Barts

St Bartholomew's Hospital  
West Smithfield  
London EC1A 7BE

Tel: 0203 904 3448

Drop in Mon-Fri: 9am-4pm

<https://www.maggiescentres.org/our-centres/maggies-barts>



## Large print and other languages

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. For more information, speak to your clinical team.

এই তথ্যগুলো সহজে পড়া যায় অথবা বৃহৎ প্রিন্টের মত বিকল্প ফরম্যাটে পাওয়া যাবে, এবং অনুরোধে অন্য ভাষায়ও পাওয়া যেতে পারে। আরো তথ্যের জন্য আপনার ক্লিনিক্যাল টিমের সাথে কথা বলুন।

Na żądanie te informacje mogą zostać udostępnione w innych formatach, takich jak zapis większą czcionką lub łatwą do czytania, a także w innych językach. Aby uzyskać więcej informacji, porozmawiaj ze swoim zespołem specjalistów.

Macluumaadkaan waxaa loo heli karaa qaab kale, sida ugu akhrinta ugu fudud, ama far waa weyn, waxana laga yabaa in lagu heli luuqaado Kale, haddii la codsado. Wixii macluumaad dheeraad ah, kala hadal kooxda xarunta caafimaadka.

Bu bilgi, kolay okunurluk veya büyük baskılar gibi alternatif biçimlerde sunulabilir, ve talep üzerine Alternatif Dillerde sunulabilir. Daha fazla bilgi için klinik ekibinizle irtibata geçin.

یہ معلومات متبادل فارمیٹس میں دستیاب کی جا سکتی ہیں، جیسا کہ پڑھنے میں آسان یا بڑا پرنٹ اور درخواست پر متبادل زبانوں میں بھی دستیاب ہو سکتی ہیں۔ مزید معلومات کے لیے، اپنی کلینکل ٹیم سے بات کریں۔!

## Tell us what you think

Tweet us @NHSBartsHealth

Talk to us via [facebook.com/bartshealth](https://www.facebook.com/bartshealth)

Leave feedback on NHS Choices [www.nhs.uk](http://www.nhs.uk)

## Patient Advice and Liaison Service (PALS)

Please contact us if you need general information or advice about Trust services:

[www.bartshealth.nhs.uk/pals](http://www.bartshealth.nhs.uk/pals)

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All our patient information leaflets are reviewed every three years.