

Rectal Pain or Bleeding prolonged following radiotherapy?  
Compiled by Charles (Chuck) Maack – Prostate Cancer Advocate/Activist

Disclaimer: Please recognize that I am not a Medical Doctor. I have been an avid student researching and studying prostate cancer as a survivor and continuing patient since 1992. I have dedicated my retirement years to continued research and study in order to serve as an advocate for prostate cancer awareness, and, from a activist patient's viewpoint, to help patients, caregivers, and others interested develop an understanding of prostate cancer, its treatment options, and the treatment of the side effects that often accompany treatment. Readers of this paper must understand that the comments or recommendations I make are not intended to be the procedure to blindly follow; rather, they are to be reviewed as my opinion, then used for further personal research, study, and subsequent discussion with the medical professional/physician providing prostate cancer care.

The condition is likely radiation proctitis. The following suggestions should also be available from one's radiation oncologist.

Possibly the below suggestions will help. If not, go to the internet and enter "Radiation Proctitis" in the search box, click "Go" and I would surmise you will receive a multitude of articles wherein something recommended will relieve your pain. I hope something here will do the trick:

If this has been prolonged pain without relief, I would suggest you discuss Hyperbaric Oxygen Therapy (HBOT) with your radiologist or other physician, since this therapy has helped many who have suffered rectal pain following radiation therapy.

If prolonged bleeding has been occurring, consider the following:

Hyperbaric Oxygen Therapy (HBOT) is an appropriate option to rein in rectal bleeding from Radiation proctitis:

[http://www.thegreenjournal.com/article/S0167-8140\(05\)00497-4/abstract](http://www.thegreenjournal.com/article/S0167-8140(05)00497-4/abstract)

Open this URL then scroll down to the listing for your State and give them a call to discuss your situation. There are many hospitals and facilities throughout many States and likely some near you:

[http://miraclemountain.homestead.com/Providers2.html#anchor\\_12998](http://miraclemountain.homestead.com/Providers2.html#anchor_12998)

I think both Hyperbaric Oxygen Therapy and Argon laser treatment should be considered.

Noticed that the instillation of Formalin is also practiced to stop rectal bleeding, so should likely also be included in considerations. See:

<http://cat.inist.fr/?aModele=afficheN&cpsidt=17781703>

Proctofoam-HC is a topical aerosol foam for anal use. It is supplied in an aerosol container with a special anal applicator. You use it 3 to 4 times a day. It's best applied after a bowel movement. Another effective agent is anusol-HC suppositories, which are also used 3 times a day (e.g., morning, afternoon, and night); they too are best applied after a bowel movement. Some patients respond better to one agent than the other, so please try both. The HC in both of these agents stands for hydrocortisone.

Vitamin A serves to help heal inflammation. Metronidazole is mentioned as is rectal sucralfate, so these, too, should be discussed.