

SUPPLEMENT

1. Standard field borders
 - a. superior - the sacral promontory for middle-third rectal tumours or mid sacro-iliac joint for lower-third tumours
 - b. inferior: 1cm below the obturator foramina or 3cm below the tumour for middle-third tumours and 1cm below the anal marker for lower-third tumours
 - c. lateral: 1cm lateral to the bony pelvic sidewall
 - d. anterior: 2-3cm anterior to the sacral promontory
 - e. posterior the sacral hollow and pre-sacral lymph nodes were covered

2. Details of questionnaire to assess patient comfort and ease of set up.

To assess patient comfort a validated linear analogue scale questionnaire for comparisons of radiotherapy set-up positioning was adapted. The questionnaire was used weekly and consisted of 5 questions; how comfortable was the treatment position during the past week, how easy did you find it to stay still in the treatment position during the past week, how easy did you find it to get into the treatment position during the past week, how would you rate your overall health during the past week and how would you rate your overall quality of life during the past week.

3. Details of questionnaire: ease of set up by treating radiographer.

A radiographer who had frequently treated the patient assessed ease of set-up in the final week with a linear analogue questionnaire that consisted of 3 questions; was the patient difficult to position, did the patient have the mobility to get on and off the belly board themselves and did the patient line up easily using the belly board.

4. Details of results from specific questions relating to patient comfort satisfaction

Twenty-five points regarding patient comfort satisfaction and quality of life were evaluated using the Wilcoxon rank sum test. Overall, 11 out of the 25 points assessed indicated that the distribution of scores for the belly board arm were significantly better than those for the standard arm (95% CI $p < 0.05$). 10 out of the 15 points that assessed patient comfort were significantly better in the study arm compared to the control arm. Question 1 regarding comfort in the treatment position showed a significant difference between the groups at 3 of the 5 assessed stages. Question 2 regarding staying still in the treatment position showed a significant difference during the later stages of radiotherapy. Question 3 regarding getting into the treatment position showed a significant difference throughout treatment. 1 out of the 10 points that assessed quality of life was significantly better in the study arm compared to the control arm. Questions 4 and 5 related to overall health and quality of life and showed no real significant differences at any stage of treatment. None of the 25 points were significantly worse in the belly board arm. The patient comfort questionnaire results expressed as mean percentage satisfaction for questions 1, 2 and 3 are shown in Fig. below.

Patient Comfort Questionnaire Results.

*** = Statistically significant result $p \leq 0.05$.**

