

What can I eat?



Lynn Harbottle
HSSD Consultant
in Nutrition &
Dietetics

Nutrition and Eating in cancer patients

- Improve immune function
- Enhance ability to withstand treatment
- Promote recovery/healing
- Improve quality of life
- Symptomatic relief



Effects of Treatments on Nutrition

1. Surgical

- periods of fasting
- reduction in ability/capacity to eat
- malabsorption
- post-op anorexia

Effects of Treatments on Nutrition

2. Chemotherapy

- nausea and vomiting
- altered taste and food aversions
- increased mucous/sores
- malabsorption

Effects of Treatments on Nutrition

3. Radiotherapy

- nausea and vomiting
- altered taste
- altered mucous production
- inflammation
- malabsorption

Clean Diets in Neutropenia

- basic food hygiene
- observance of sell-by dates
- suitable cooking methods
- avoidance of high risk foods

Cachexia

- Altered metabolism – tumour products, increased cortisol, inflammatory response
- Anorexia, tumour products, pain, treatments
- Reduced muscle mass
- Weight loss



Managing symptoms

- Nausea - plain diet, low smell, small frequent intake, ginger, anti-emetics
- Constipation – review opioids, fluid, increase fibre, appropriate laxatives
- Diarrhoea - review laxatives! Low residue/soluble fibre, elemental diet, bile acid sequestrants/ Creon

Managing symptoms contd.

- Anorexia – small, plain, frequent intake, soft/easy to chew/swallow, nourishing fluids + alcohol, megace (4 weeks), steroids
- Dry mouth
- Taste changes
- Swallowing problems
? alternate feeding



Managing symptoms contd.

- Anxiety – reassurance, encouragement
buffet/grazing rather than meals
supplements, permission to not eat



Nutrition in Palliative Care

- maintenance /improvement in quality of life
- positive support with family meals
- counter treatment symptoms
- relaxation of restrictions



Summary

- Dealing with every patient as an individual
- Need for close and ongoing monitoring
- Attention to side-effects of treatments and specific tolerances
- Encouragement and reassurance at all stages

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Produced by Nutrition & Dietetic Dept,
HSSD, 2009