

# Survivorship

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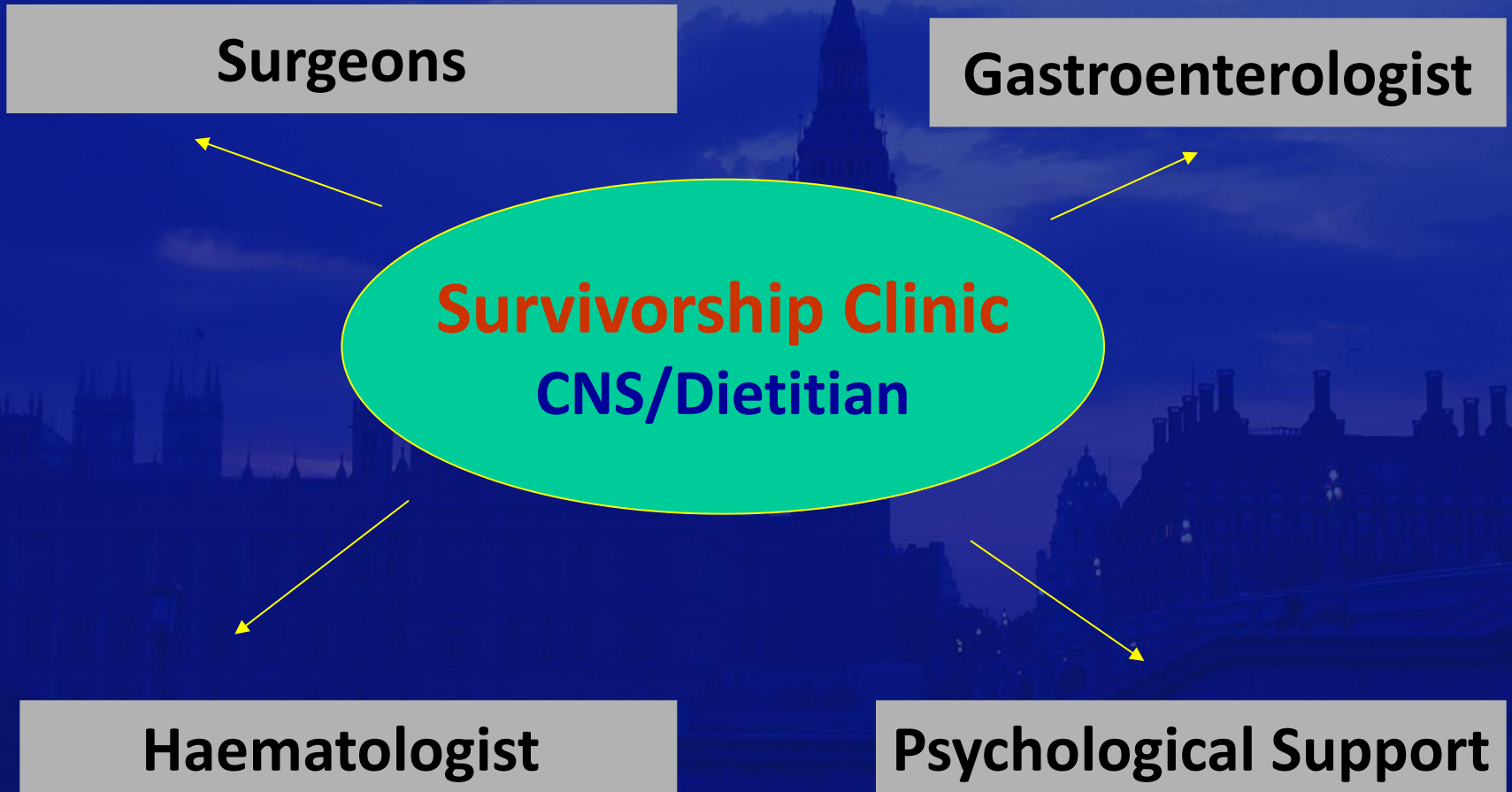
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# Survivorship

- Refers to living with or beyond cancer - What happens to these patients after they have finished their treatment
- January 2010 National Cancer Survivorship Initiative published a vision document - are not meeting all cancer survivors' needs following treatment
- Restoring quality of life and supporting patients to recover

# Aim: Quality of Life after Surgery



# Why is Nutrition a Problem

- The anatomical location of the disease can lead to dysphagia/delayed gastric emptying/vomiting
- Decreased appetite, weight loss, metabolic alterations & inflammatory state
- Treatments cause additional symptoms which impact on nutrition
- Long treatment pathway – using a combination of chemotherapy, radiotherapy, surgery
- Post treatment changes

# Why is Nutrition Important

Nutrition plays a pivotal role across the entire pathway from diagnosis to survivorship.

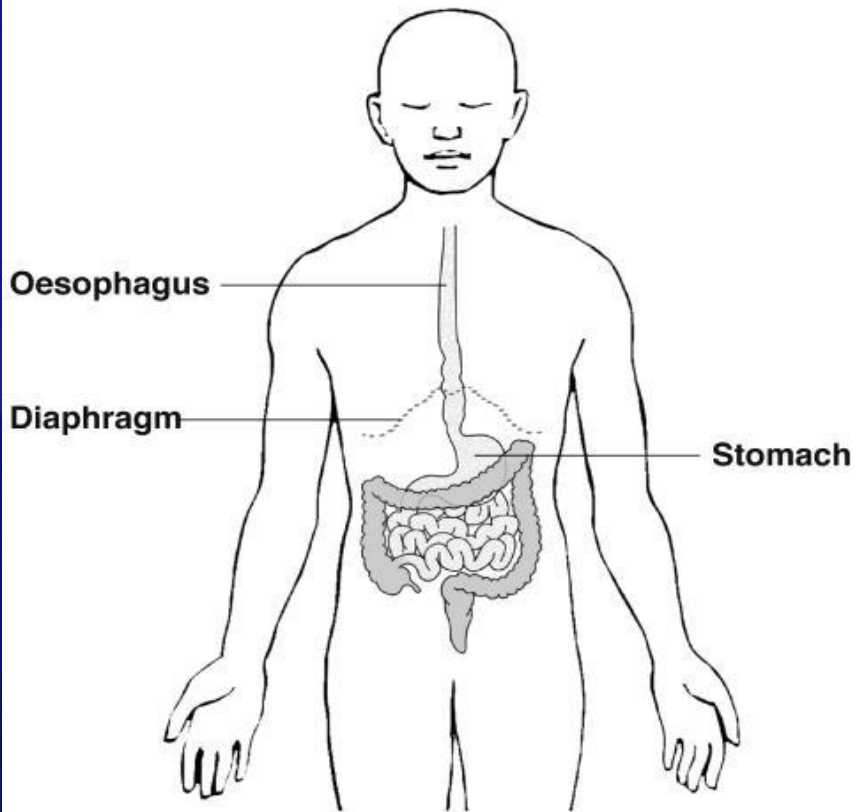
- Preserve performance status
- Reduce the risk of treatment related toxicities so that you can get full doses of oncological treatments
- Reduce risk of postoperative complications
- Maintain/preserve QOL

# Post Surgery

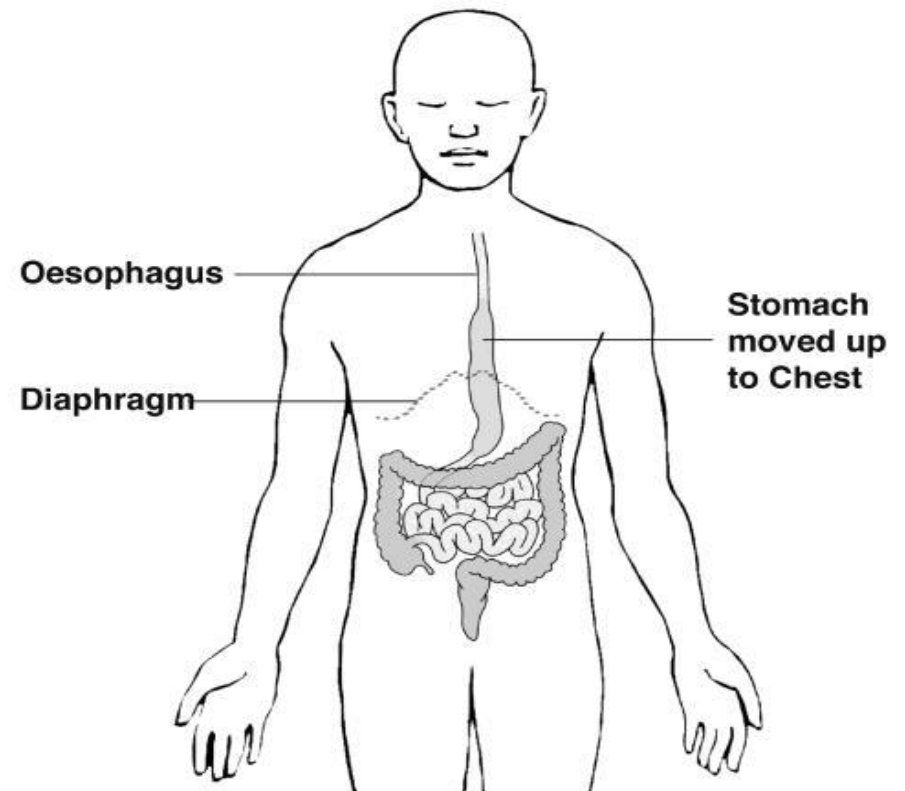
- Weight loss can be a problem
- Eating and drinking is difficult
- Maintaining a good nutritional status is challenging
- Dietary assessment is important – in determining the problem but also in helping to manage the problem
- Symptom management

# Early Satiety & Reduced Appetite

Pre - Operation



Post - Operation



# Early Satiety & Reduced Appetite

- Smaller stomach capacity or none
- Disruption of gut hormone and innervation
- ‘Little & often’, ‘Grazer not a feaster’
- ‘Hard to change the habits of a lifetime’
- ‘Don’t feel hungry’
- Worsened by weight loss and malnutrition
- Following regime, rather than hunger

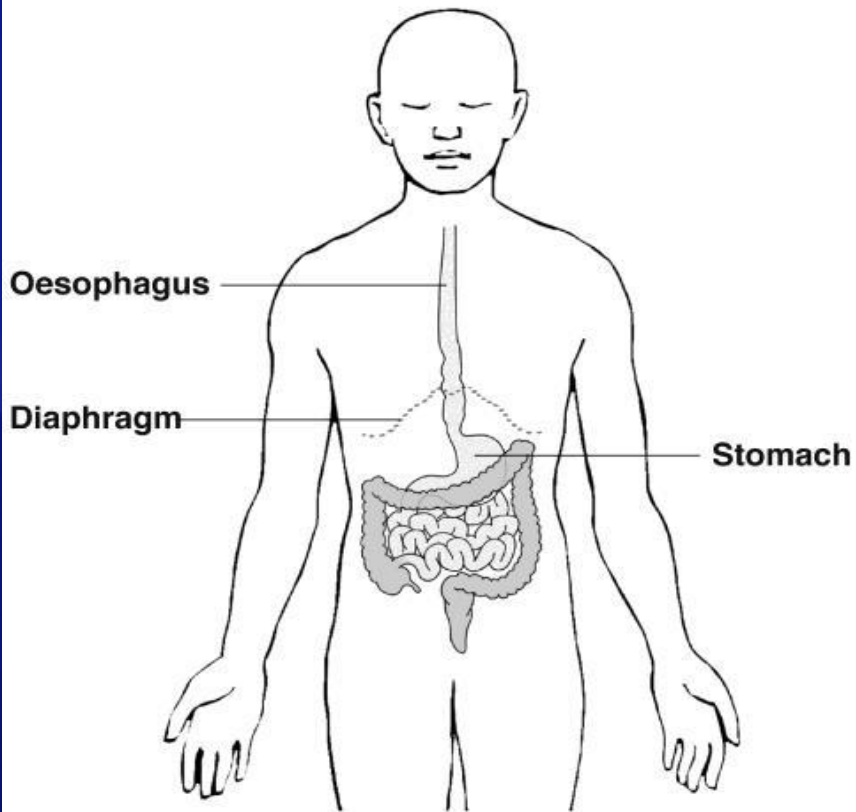


# Problems Swallowing

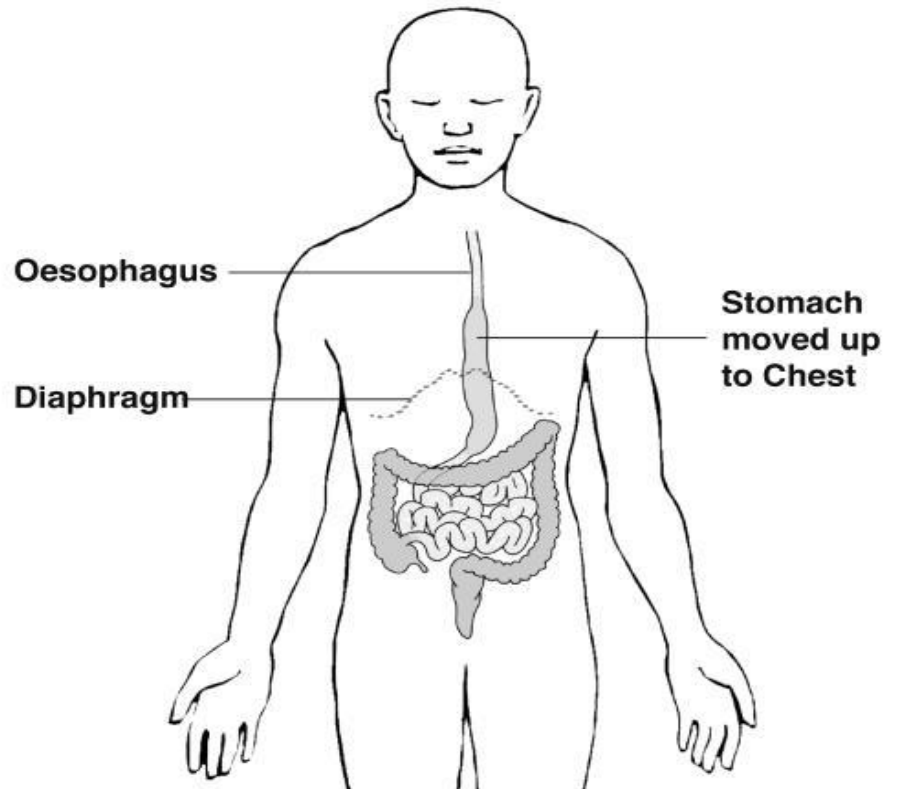
- Bread and chunks of meat – likely to be a problem
- Sips of fluid with meals
- Anastomotic stricture ‘tightening of the join’
- Sensation of food sticking
- Solid foods → Soft Diet → Pureed Diet/Liquids
- When dietary intake becomes a problem, intervention needs to be considered
- Dietary advice to ensure nutritional adequacy
- Endoscopy & stretch

# Acid Reflux

Pre - Operation



Post - Operation



# Acid Reflux

- Common to require antacids
- Watch out for other signs – cough or hoarse voice in the morning
- Important – can make ‘tightening of the joint’ worse
- Dietary changes – avoid obvious problematic foods

# Bile Reflux

- Burning, bad taste, nausea
- Delayed gastric emptying
- Responds well to sucralfate suspension
- Endoscopy & stretch

# Delayed Gastric Emptying

- Bad Reflux
- Appetite in the morning but less as the day goes on
- Regurgitation/Vomiting
  
- Management:
  - Prokinetics
  - Endoscopy & stretch

# Taste changes

- Consequence of treatment
- Bile reflux
- Check Vitamin B12 & Zinc

# Diarrhoea/Steathorrhoea

- Decreased gut transit, intestinal hurry
- Loose stools to be expected
- Improves with time
- Loperamide/Immodium
- Pale floating stools, difficult to flush - Fat malabsorption
- Very unpleasant, Weight loss, malnutrition
- PERT – Pancreatic Enzyme Replacement Therapy

# Diarrhoea/Steathorrhoea

- Bile Salt malabsorption
  - Diagnosed by SeHCAT scan
  - Cholestyramine/Colesevelam
- Small bowel bacterial overgrowth
  - hydrogen breath test
  - duodenal aspirates
  - antibiotics
  - probiotics
- Dietary advice – last resort, fibre, fat, low FODMAPs



# Dumping Syndrome

- Early:

bloating/nausea/fullness/palpitations/pain after eating/flushing/sweating/faintness/ loose stools or diarrhoea may follow.

- Late:

Tiredness/tremor/palpitations/sweating/giddiness

# Dumping Syndrome

- Complex
- Dietary advice may help
- However seek advice from dietitian – avoid unnecessary restrictions
- \*\*\*\*\*review other medications\*\*\*\*\*
- Immodium/loperamide
- Acarbose/Octreotide

# Fatigue

- Treatment, stress, anxiety, low mood/depression
- Anaemia – reduced capacity to send oxygen around the body
- Causes:
  - Chemotherapy
  - Dietary deficiencies e.g. iron, Vitamin B12, folate
  - Iron & Vitamin B12 deficiency is common after surgery
- Regular check of iron, vitamin B12 & folate
- Oral iron tablets, IV iron infusion, Vitamin B12 injections

# Protein

- You need extra
- Make sure you think about protein in your snacks
- Meat, fish, chicken, eggs, beans
- Milky drinks
- Yoghurts, crackers and cheese, custard, rice pudding
- Nuts

# Iron

## Symptoms of deficiency:

Fatigue, lethargy, dizziness, SOB, weakness, palpitations, headache, depression, tinnitus, angina, confusion, poor condition of hair, nails, skin, restless leg syndrome, poor wound healing

- Needs regular surveillance, possibly tablets
- Meat, liver, beans
- Nuts
- Dried fruit – such as dried apricots
- Wholegrains – such as brown rice
- Fortified breakfast cereals
- Most dark-green leafy vegetables – such as watercress and curly kale

# Vitamin B12

## Symptoms:

- Tiredness, lack of energy, pins & needles, muscle weakness, depression, problems with memory, understanding, judgement
- If you are deficient, you will need B12 injections
- Meat, salmon, cod
- Milk, cheese
- Eggs
- some fortified breakfast cereals.

# Vitamin D

- Symptoms of deficiency are non specific: tiredness; aches and pains; muscle weakness; general sense of not feeling well - deficiency can be masked.
- Sunlight!
- Public health problem
- Oily fish – such as salmon, sardines, herring and mackerel
- Red meat, liver
- Egg yolks
- Fortified foods such as most fat spreads and

# Calcium

- Very important for bone health
- Milk, cheese and other dairy foods.
- Green leafy vegetables – such as broccoli, cabbage and okra, but not spinach.
- Soya beans, tofu.
- Nuts.
- Bread and anything made with fortified flour.
- Fish where you eat the bones – such as sardines and pilchards.



# Zinc

## Symptoms:

Loss of appetite, weight loss, diminished taste or smell, poor wound healing, depression, apathy, diarrhoea, hair loss, increased susceptibility to infections

- Beef, lamb, Turkey
- Sesame seeds, pumpkins seeds
- Lentils
- Cashew nuts