"YES" to Concerns about nutrition and food



What are your specific questions?

Potential Prompts

- Best food to eat
- Foods to avoid
- Dietary supplements
- Herbs
- Vitamins
- Minerals
- Nutrients in foods

→ Options/Recourse

Differential diagnosis & appropriate treatment: Offer reassurance that treatment and/or cancer affects nutritional state

- Reduce intake of sweets, such as desserts and juices
- Avoid drinking beverages that have sugar
- Eat more fruits and vegetables, whole grain breads, cereals and beans
- If safe, increase physical activity such as walking
- Choose lean meats and low-fat dairy products
- Limit fats such as margarine, mayonnaise and high-fat- sauces or dressings
- Avoid transfats (anything made with partially hydrogenated oils or shortening)
- Try broiling or steaming foods rather than frying them in oil or butter
- Drink lots of water, unless instructed to limit fluid intake

Cachectic Patients

- Need high fat, high calorie nutrition
- Enjoyable food choices of any type in small portions may be of benefit to the patient

Next Step

Timing

Refer to Registered Dietitian if available, if not, refer to Registered Dietitian at outside cancer center if possible

See Reference links below for additional information

Share Patient Links and Handouts as appropriate Routine – within 1 week

Notes

Stages I-III: Nutrition recommendations are based on individual labs, comorbidities, tolerances and preferences of the patient, not necessarily based on stage. Discussion on healthy diet consisting of real food verses processed, fruits and vegetables, nuts, beans whole grains and unprocessed meats.

Stage IV: Nutrition recommendations are based on individual labs, comorbidities, tolerances and preferences of the patient, not necessarily based on stage. If patient closer to dying, discuss lowered appetite/nutritional needs. Encourage eating for pleasure and comfort. Review cultural implication of eating/drinking less. Review medications (Polypharma) as some may no longer be needed.

Geriatric: This population may have issues with fluids and keeping hydrated which can affect taste. Reduced saliva production may be an issue. Sucking on lemon flavored candy can help increase saliva and in turn, reduce or mask bad taste. Coumadin food restrictions are not necessary when life limiting late stage disease is present or has comorbidities.

Patient Links and Handouts:

- American Cancer Society Nutrition for People with Cancer
- > Cancer.Net. Food and Cancer Risk
- NIH, NCI, Nutrition in Cancer Care (PDO®)—Patient Version
- > ASCO Answers. Food Safety & Cancer Treatment

CSOC Patient Handout can be accessed at: http://cancer-help.me/nutrition

References:

- > NIH. PDQ®. Overview of Nutrition in Cancer Care
- > NIH. PDQ®. Nutrition Assessment in Cancer Care
- > NIH. PDO®. Treatment of Symptoms
- > NIH. PDQ®. Nutrition Needs at End of Life

