HEARTBURN CANCER UK

Is it really only Heartburn?

Dietary Changes

After Oesophagectomy - What Can I Expect?

This information aims to give you an overview of what you might expect in terms of diet and eating after Oesophagectomy, however please be aware that every hospital may have slightly different processes and methods on how and when nutrition is re-introduced and built up after your operation, and every individual person is different too- so please speak to your own Dietitian, Specialist Nurse or Surgeon for advice specific to you.

When will I Start Eating Again After my Operation?

Immediately after your operation it is usually a couple of days before you will be able to start taking fluids and food by mouth, this is to allow for the join (known as the anastomosis) created during the operation to begin healing. You may initially receive some nutrition either through a drip (known as intravenous, or parenteral nutrition), or through a feeding tube either placed directly into your abdomen (known as a jejunostomy tube), or through the nose (known as a nasojejunal (NJ) tube), until you are able to start taking nutrition by mouth. Some people may go home from hospital with a feeding tube and your healthcare team will provide you with support and training for this if required.

Usually, you will be advised to start drinking water first, building up to other fluids and then food gradually by mouth. The texture of the food you are able to eat is also likely to slowly be increased from liquid consistency foods such as smooth soup and ice cream, to blended, smooth (purée) consistency such as smooth yogurts or custard consistency, before moving to soft solid foods, and then a normal texture diet. Again, you will be advised on this by your surgical team and Dietitian.

You may also be given some nutritional supplements in liquid form to help maximise your nutritional intake. There are many different brands and types, your Dietitian will advise you on which are most suitable for you and arrange a prescription for you.

How Much will I be able to Eat?

After your operation you will have a much smaller ‘storage area’ for food, so you will feel full very quickly on eating. Its therefore important to eat small but more regular meals spread over the day, for example aiming for 6-8 small meals and snacks in more of a ‘grazing’ pattern of eating every 2-3 hours. Try to avoid eating and drinking at the same time as the fluid can fill you up more quickly, leaving less room for food!

As a rough guide 3-4 tablespoons of food at a time is likely to be sufficient for the first couple of

weeks, gradually building up to a small average yogurt-pot sized quantity of food at a time. When you feel full its best to stop eating, then waiting for an hour or two before having another snack or small meal. Trying to eat large portions of food may cause you symptoms of something called 'Dumping syndrome'- please see our information for advice on this.

You can try gradually increasing your portion sizes over the first few months after your operation, most people are able to manage a small side-plate or starter sized portion by around 6 months post-operatively, however everyone is different so speak to your healthcare professionals for individual advice and guidance on this.

Will my Appetite be Affected?

Many patients report that their appetite, interest in food and also taste can be reduced or changed for the first few months after surgery, however for most people this will return with time. Try to continue with regular small meals and snacks, even if you don't feel hungry, as ensuring you have enough sufficient nutritional intake will help aid your recovery from surgery.

Will my Digestive System be the Same?

Many people find their bowel movements can be altered after surgery, especially whilst re-introducing food in the first few weeks, but this generally settles down with time. You may have heard of, or read about, a term call 'Dumping syndrome'. This can happen after Oesophagectomy due to food being 'dumped' into the intestine quickly.

You may experience symptoms of dizziness, faintness, sweating, feeling hot and nauseous, discomfort or pain in the abdomen with diarrhoea. This can happen just after you have eaten or up to two hours later. Symptoms usually improve three to six months after surgery, but it can continue to be a persistent problem for some people. Please see our more in-depth information on dumping syndrome if you would like more information on this.

Occasionally after oesophagectomy food can pass through your digestive system without being fully broken down and absorbed, this is known as malabsorption. The signs of this can be similar to dumping syndrome and include:

- Bowel movements that are loose pale in colour and can be very smelly
- Stools that are difficult to flush away
- Stools that look greasy or oily
- Bloating and excessive wind/flatulence
- A good appetite and food intake but you are continuing lose weight

If you regularly experience these symptoms then please speak to your specialist nurse or dietitian.

Useful Hints and Tips

We have put together some useful hints and tips below, some of which have been contributed by patients who have had Oesophagectomy with first-hand experience of eating afterwards!

- Ifyou are prescribed nutritional supplement drinks then sip these slowly over at least 1-2 hours. Drinking them too quickly could cause nausea and symptoms of dumping syndrome
- Serve meals on a side plate or in ramekins so that it doesn't look too overwhelming

- Chew your food well and eat slowly, taking approximately 20 minutes to eat your meal. Eating with a teaspoon can help slow you down if you are naturally a quick eater!
- Sit upright during and for 30 minutes after meals to help food go down
- Batch cooking and then freezing small portions of meals can save time and effort
- But don't feel you have to cook everything from scratch- you can buy foods of an already appropriate texture from supermarkets, for example pots of custard or smooth soup to save you time. Several online companies (such as Wiltshire Farm Foods or Oakhouse Foods) can deliver ready-made meals that have a range of suitable textures, including 'mini' or 'petite' ranges for smaller portions, which you may find helpful if you are feeling too tired to cook
- Avoid eating and drinking at the same time- leave 10-15 minutes either side of food to have a drink
- Some people find planning meals and snacks in advance in a meal plan or food diary can help them keep on track through the day
- If you find some foods taste bland due to taste changes, you can try adding sauces or mild spices such as mustard, mayonnaise, soy sauce, paprika etc to enhance flavours

Please speak to your Dietitian or Specialist Nurse if you require more specific, personalised advice.