

## Eating after radiotherapy to the head and neck area

### Immediate side effects

Many patients have ongoing side effects in the first few weeks after treatment.

Most common ones include:

- Pain in mouth or throat
- Fatigue
- Taste changes

This can result in missing meals, having smaller portions and not getting enough nutrition or fluid. Getting enough nutrition and fluid is very important.

This helps to:

- prevent weight and muscle loss
- improve healing
- prevent dehydration
- aid recovery

If you are worried you are not eating or drinking enough or you are losing weight, you should report this to your Doctor and Dietitian. If your pain is not well controlled, discuss this with your Doctor.

### Short term side effects

Everyone recovers at a different rate. It can often be a few weeks after treatment ends until the side effects start to get better.

### Sore mouth or throat

Your mouth or throat may be sore due to ulcers from the radiation. Until this improves you may need:

- a softer diet such as a liquid, pureed or minced diet
- to avoid foods that irritate your mouth (e.g. salty, spicy or citrus foods, or those containing alcohol)
- high protein high energy milk drinks and/or supplements (e.g. Sustagen, Ensure Plus, Fortisip Multifibre, Resource)

Follow advice from the Speech Pathologist, Nursing Staff or Dentist on mouth cares. This will help to heal ulcers and reduce the risk of infection.

### Difficulty Swallowing

If you are having problems swallowing, discuss with your Speech Pathologist.

They will be able to:

- assess your swallow
- advise on the best foods to prevent food or drink going down the wrong way. Food may end up in your lungs and lead to chest infections.

- provide exercises to strengthen your swallowing muscles

### **Taste changes**

You may start to notice your taste buds returning slowly. This can help with your appetite. Different tastes may return at different times. It is best to keep testing out a wide range of foods, not just your old favourites.

### **Dehydration**

Fluids are important to keep well hydrated. This will keep your kidneys working well and help your bowels open regularly. Aim for 2-3L per day

### **Long term side effects**

Some side effects can last for months after treatment. Some side effects may be long term changes you will need to get used to.

### **Dry mouth**

Lack of saliva means you may need to:

- use sauce/gravy to moisten foods
- have a drink with meals to help wash food down
- sip water during the day to moisten your mouth
- take extra care of your teeth
- try sugar free mints and chewing gum to help with saliva flow

Your healthcare team can advise you on products to help manage a dry mouth.

### **Dental care**

It is best to see a Dentist who specialises in post radiotherapy dental care. You will be at higher risk of tooth decay without saliva. They can give you extra advice on how to care for your mouth and teeth.

If you had your teeth removed prior to radiotherapy, ask your Radiation Oncologist when you can have dentures fitted. Often this can be six months after radiotherapy. Putting dentures back in too early can cause ulcers.

### **Tube feeding**

Some patients may have a feeding tube during or after treatment. This may be a nasogastric tube or a gastrostomy tube (often called a PEG tube or a RIG).

It is important to have regular contact with your Dietitian and Speech Pathologist after treatment.

- As you recover from the side effects, you will be advised on which foods are safe for you
- As your eating improves, you will be advised by the Dietitian on reducing your tube feeds

## Tube removal

The timing of feeding tube removal will vary for everyone.

- If you are taking enough food and fluid orally and keeping your weight steady, your team may recommend tube removal.
- Your medical team may prefer for your tube to stay in place until after your three month scans and check up.
- A small number of people require a feeding tube long term. This may be due to ongoing swallowing problems. Some patients may not be able to maintain their weight on oral diet alone.

## Further information

The Cancer Council helpline provides useful support. There are counselling services or patient support groups.

**Phone 13 11 20**

<p><b>Dietitian:</b> _____</p> <p><b>Phone:</b> _____</p>
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Key reference: Head and Neck Guideline Steering Committee. Evidence-based practice guidelines for the nutritional management of adult patients with head and neck cancer. Sydney: Cancer Council Australia. [Version URL: <https://wiki.cancer.org.au/australiawiki/index.php?oldid=116710>, cited 2018 Aug 9]. Available from: [https://wiki.cancer.org.au/australia/COSA:Head\\_and\\_neck\\_cancer\\_nutrition\\_guidelines](https://wiki.cancer.org.au/australia/COSA:Head_and_neck_cancer_nutrition_guidelines)