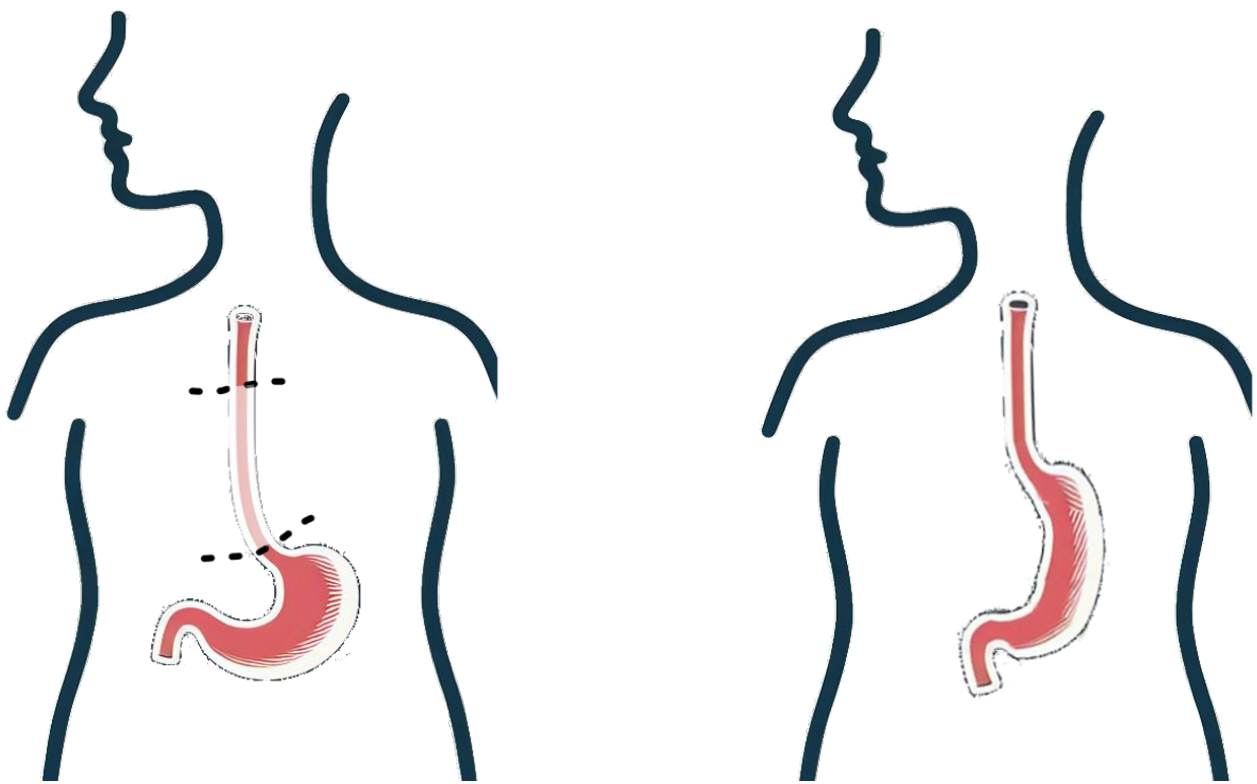


### What is an oesophagectomy?

An oesophagectomy is an operation that removes all or part of the oesophagus (food pipe). The oesophagus is replaced with another part of the gastrointestinal tract, usually the stomach. This means there is less room for food in the stomach and you may feel full more quickly. Food can pass into your small bowel sooner after eating.



### Eating again

Your diet will progress in stages after surgery, beginning with liquids and moving to a puree, soft then normal diet. Your surgeon will tell you when to progress your diet, but this will also depend on your tolerance to food at each stage. You should still be able to enjoy all the foods you ate before your operation. However, you may have to make some changes to your eating habits, like eating smaller amounts more frequently.

## Tube feeding post-surgery

A feeding tube is sometimes placed during your surgery as you may not be able to eat or drink initially. The feeding tube will provide you with nutrition until you are able to start eating and drinking. Depending on your progress after surgery, you may require ongoing tube feeding when you leave hospital (your dietitian and doctor will discuss this with you).

## Common problems and management

The surgery can cause problems as described below. Not everyone will get these complications.

### 1 Poor appetite or feeling full early

- Eat small meals every few hours, aiming for a total of six or more meals or nutritious snacks each day.
- Have drinks at least 30 minutes before or after meals. Drinking with meals may fill you up too quickly.

### 2 Reflux and difficulty swallowing

- Reflux is common post-surgery. Consider discussing medications to manage this with your doctor.
- Strategies to manage reflux include having small frequent meals, sitting upright when eating and remaining upright for at least 30 minutes post meals.
- Adjusting to swallowing can take some time after surgery. Consuming softer foods and having small sips of water when eating may help.

### 3 Unintentional weight loss

- Include foods that contain fat and protein at every opportunity i.e., eggs, meat, chicken, fish, tofu, baked beans, cheese, milk, olive oil, avocado or nuts (including peanut butter).
- Include nourishing drinks – choose milkshakes, Milo, Sustagen, or Ensure. Your dietitian may recommend specific nutritional supplement drinks.
- Monitor your weight weekly and let your dietitian or doctor know if you keep losing weight.

## 4 Vitamin and mineral deficiencies

- You may be at risk of vitamin and mineral deficiencies if you are unable to eat enough or need a modified diet for a long time. Consider a multivitamin daily.
- Your doctor will check your levels and advise you if you need supplementation.

## 5 Dumping syndrome or diarrhoea

Normally there is a muscle at the bottom of the stomach that controls the amount of food the stomach lets into the small bowel. This muscle is often removed or doesn't work as well following surgery, causing food to move too quickly from the stomach into the small bowel.

You may have:

- Nausea and vomiting
- Bloating, cramping or diarrhoea
- Palpitations, sweating or shakiness
- Fullness
- Lack of concentration or tiredness



Most people experience symptoms 10 to 30 minutes after eating (early dumping syndrome), others have symptoms one to four hours after eating (late dumping syndrome).

To help prevent symptoms of dumping syndrome:

- Avoid large meals by eating small and frequent meals
- Have large drinks at least 30 minutes before or after meals instead of with meals
- Avoid food and drinks that contain a lot of sugar i.e., regular cordial, soft drink, mixed alcoholic beverages.
- Include high fibre foods or trial a fibre supplement (i.e., Benefibre, ProNourish) if you have late dumping symptoms. High fibre foods include lentils, baked beans, oat bran, wholegrain breads and cereals, skins on fruit and vegetables.
- Lying down after eating may help if you experience severe symptoms.
- Taking a starchy snack (i.e., slice of bread, banana, oatmeal biscuit) may help symptoms.

## Making the most of what you eat

If you can't manage a lot of food throughout the day, it is important to make the most of what you do eat. You could try:

This is a consensus document from Dietitian/ Nutritionists from the Nutrition Education Materials Online, "NEMO", team.

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## Dairy

- Add cream or cheese to main meals such as scrambled eggs, omelettes and casseroles.
- Add skim milk powder to your milk drinks.
- Choose dairy snacks like custard, yoghurt, ice cream, rice puddings and mousse.



## Meat and meat alternatives

- Add meat, lentils or other legumes to dishes such as soups and casseroles.
- Eggs make a nutritious addition to meals or an easy snack.



## Breads and cereals

- Choose nutritious sandwich fillings e.g., sliced meat, canned fish, baked beans, cheese, avocado, tinned spaghetti or eggs.



## Fruit and vegetables

- Add margarine, butter, oil or cheese to vegetables e.g., cauliflower cheese or a creamy potato bake.
- Add ice cream, yoghurt or custard to fruit.
- Try to eat a variety of types and colours to ensure you are getting a good variety of nutrients.
- Include fruit/vegetable juice if you have difficulty eating enough fruit and vegetables.



## Easy snacks

- Supermarket freezers can provide ready-made meals and snacks that require little preparation.
- Dairy foods like custard, yoghurt, rice pudding, milk desserts and milk drinks make easy snacks. Choose full cream options where possible.
- Muesli bars, pre-packaged crackers and dips/cheese and drinks such as Up & Go make handy snacks.

## Future nutrition goals

If over time you are able to tolerate a more normal diet and your weight is stable, aim to progress back to the general healthy eating guidelines with regular exercise to aid healthy weight maintenance.

## Sample meal plan for the first few weeks

Approximate time	Food or drink
7am - On waking	Glass of fruit juice (unsweetened)
9am - Breakfast	Weetbix softened with full cream milk + added cream and honey
10am - Early morning	Glass of Sustagen/Ensure made on milk
11am - Mid-morning snack	Mashed banana + peanut butter on crackers
12pm - Lunch	Omelette or scrambled egg with grated cheese and margarine/butter/ avocado/mayonnaise
2pm - Early afternoon	Glass of Sustagen/Ensure made on milk
3pm - Mid-afternoon snack	Tub of yoghurt / rice pudding / crème caramel / sponge and custard
5pm - Late afternoon	Water / tea / coffee / milk
6pm - Dinner	Shepherd's pie - diced zucchini, carrot, pumpkin in mince with mashed potato and cheese topping
7pm - Supper	Water / tea / coffee / milk
8pm - Before bed snack	Tinned fruit and ice cream

## Summary

- Diet progression is individual and will be guided by your surgeon.
- Eat a healthy diet choosing a wide variety of foods.
- Eat slowly and chew foods well.
- Avoid very sugary food and drink (such as soft drink, cordial, lollies) and monitor caffeine which may contribute to dumping syndrome.
- Have most of your fluids at different times to your meals. Small sips of fluid with meals may help with discomfort on swallowing.
- Include foods that contain fat and protein at each meal.
- Aim for six to eight smaller meals/snacks throughout the day.
- Your doctor is the best person to advise you regarding your alcohol intake.

For further information, contact your Dietitian or Nutritionist \_\_\_\_\_