

Eating problems and cancer



About this booklet

Many people have eating problems during and after cancer treatment. This can be related to the cancer or to the side effects of cancer treatments. This booklet talks about some common eating problems and why they might happen. It also suggests some practical ways to manage them. There is also information for carers, family members and friends.

This booklet is part of a series of booklets on diet and cancer. The other booklets in the series are:

- **The building-up diet**
- **Healthy eating and cancer**
- **Managing weight gain after cancer treatment** (page 40).

Check with your doctor, nurse or dietitian that this is the right booklet for you, and whether you need more information.

How to use this booklet

This booklet is split into sections to help you find what you need. You do not have to read it from start to finish. You can use the contents list on page 3 to help you.

On pages 43 to 46, there are details of other organisations that can help. On pages 47 to 48, there is space for you to write down questions for your doctor, nurse or dietitian.

If you find this booklet helpful, you could pass it on to your family and friends. They may also want information to help them support you.

Quotes

In this booklet, we have included quotes from people who have had eating problems, which you may find helpful. Some are from our Online Community ([macmillan.org.uk/community](https://www.macmillan.org.uk/community)). The others are from people who have chosen to share their story with us. To share your experience, visit [macmillan.org.uk/shareyourstory](https://www.macmillan.org.uk/shareyourstory)

For more information

If you have more questions or would like to talk to someone, call the Macmillan Support Line free on **0808 808 00 00**, 7 days a week, 8am to 8pm, or visit [macmillan.org.uk](https://www.macmillan.org.uk)

If you would prefer to speak to us in another language, interpreters are available. Please tell us, in English, the language you want to use.

If you are deaf or hard of hearing, call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

We have some information in different languages and formats, including audio, interactive PDFs, easy read, Braille, large print and translations. To order these, visit [macmillan.org.uk/otherformats](https://www.macmillan.org.uk/otherformats) or call **0808 808 00 00**.

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How cancer can affect eating

People with cancer may have different dietary needs. Some people feel well and are able to eat normally. For others, weight loss or a poor appetite were symptoms that led to their diagnosis. If you had eating problems before you were diagnosed, you may need support to improve your diet. Speak to your doctor or dietitian before you start treatment.

Some eating problems may be related to the cancer itself. Depending on where the cancer is in your body, it can cause you:

- to feel sick (nausea)
- to be sick (vomit)
- pain
- poor digestion.

The cancer may also change the way your body uses the food you eat. This means that you do not get all the nutrients you need.

Dietitians

Qualified dietitians are experts in assessing people's food needs. They can look at your diet and any special dietary requirements you have. They can advise you on which foods are best for you, and if any food supplements would be helpful.

If you have problems with your diet, you can ask your doctor at the hospital to refer you to a dietitian. In some hospitals, you can refer yourself. Contact the hospital's dietetic department for more information. If you are not in hospital, your GP or district nurse can refer you to a community dietitian. They can visit you at home.

Food takes on a life of its own during chemotherapy. I mostly ate toast, tomato soup and cheese and crackers. Eat what you fancy and little and often is best. You'll work out what is best for you.

Sue

Cancer treatments

Some cancer treatments can cause eating problems. Some problems are temporary and improve when you finish treatment. Others may last longer. Your doctor, specialist nurse or dietitian will support you and advise you on what might help.

Surgery

Some types of surgery can slow down your digestion. If you have surgery to your mouth, throat, oesophagus (gullet), stomach or bowel, you may need to adjust to changes in your eating pattern.

After some types of surgery, you may only be able to eat soft foods.

Radiotherapy

Radiotherapy to your head, neck or chest area can cause:

- changes to taste
- swallowing difficulties
- a dry mouth
- a sore mouth and throat
- blisters in your mouth
- thick saliva.

Radiotherapy to the abdomen (tummy) or pelvic area (the area between the hips) can make you feel sick or be sick. It can also cause diarrhoea.

We have more information in our booklets (page 40):

- **Understanding pelvic radiotherapy**
- **Managing the bowel late effects of pelvic radiotherapy.**

Chemotherapy

Common side effects of some chemotherapy treatments include:

- loss of appetite
- feeling sick or being sick
- constipation
- diarrhoea
- a sore mouth
- changes to taste.

Targeted therapy

Targeted therapies can affect your appetite or your ability to eat. Problems might include changes to taste, a dry or sore mouth or feeling sick.

Immunotherapy

Immunotherapy can cause side effects such as diarrhoea, nausea or a reduced appetite. These can affect your appetite and eating.

During sessions, I had a chemotherapy rucksack in which I kept healthy snacks, including crudites, dips, nuts and fruit. I also drank lots and lots of water during chemotherapy, which helps to flush out toxins.

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Risk of infection (reduced immunity)

Cancer or cancer treatments may increase your risk of infection. Some treatments can temporarily lower the number of white blood cells in your body. These cells help fight infection. Having a lower number of white blood cells than normal is called neutropenia.

Most people having cancer treatment will not need to change their diet. If you are having high-dose chemotherapy, you may be advised to avoid foods that might contain harmful bacteria. You may also need to be extra careful with food hygiene. This is called a 'clean diet'. It can help reduce your risk of getting an infection. Your specialist nurse will talk with you about this.

Foods to avoid if your immunity is low

If your immunity is very low, you might need to avoid certain foods. Your doctor, nurse or dietitian will be able to tell you whether you need to avoid any foods. Different hospitals will have different recommendations. Your doctor or nurse will give you more details and advise you how long you should avoid these things for after treatment.

Foods to avoid may include:

- cheese or other foods or drinks made from unpasteurised milk
- mould-ripened and blue-veined cheeses
- meat and fish pate
- yoghurt or other products that contain probiotics
- raw or undercooked meats, poultry, fish and shellfish
- cold meats that have been smoked but not cooked, such as salami
- runny eggs, and any product containing raw egg – such as homemade mayonnaise.

It is important to wash all fruit, vegetables and salad before eating them.

Special diets

Some people with cancer may have specific eating problems. For example, this may include people who have:

- diabetes
- a colostomy or ileostomy
- had all or part of their stomach or bowel removed
- had radiotherapy to their mouth or jaw.

If you have any of the above, you may need to follow a special diet. Your doctor, specialist nurse or dietitian can give you advice. We also have more information about diabetes in our booklet **Diabetes and cancer treatment** (page 40).

Mouth and throat problems

Some cancer treatments can damage the cells that line your mouth or throat. Soreness and ulceration of the lining of the mouth or throat is called mucositis. It can be very painful.

Mucositis can be caused by:

- chemotherapy
- targeted therapy
- immunotherapy
- radiotherapy to the head and neck.

Any damage is usually temporary, and most side effects improve when treatment ends. But sometimes side effects can be permanent.

A common mouth infection called thrush (candidiasis) can make eating unpleasant and change how things taste. Thrush coats your tongue, the inside of your cheeks and the back of your throat. It can look red with spotty, pale patches. Your doctor can prescribe an anti-fungal medicine to help.

Your specialist nurse, doctor or speech and language therapist (SLT) will talk to you about mouth care during treatment. They may also look at your mouth. Tell them if your mouth becomes sore or if the soreness gets worse. They may be able to give you something to help.

We have booklets about different cancer treatments and their side effects (page 40).

Tips to keep your mouth healthy

The following tips may help keep your mouth healthy during and after cancer treatment.

Drinks

- Drink plenty of fluids, especially water. If fruit juices sting your mouth, try less-acidic juices instead – for example, peach or pear nectar, or blackcurrant or rosehip syrup. You could try freezing them in an ice cube tray and sucking on the ice cubes to soothe your mouth.
- Avoid fizzy drinks because these may sting your mouth.
- Try milk or milk-based drinks, such as malted drinks, milkshakes and hot chocolate. These can be from cow's milk, goat's milk or a plant-based alternative such as soya, rice or oat milk.
- Cold drinks may be soothing – try adding crushed ice to drinks.
- Very hot or very cold drinks may irritate a sore mouth. Some people find drinks that are lukewarm or at room temperature more soothing.
- Try drinking through a straw.

Food

- Avoid salty or spicy food.
- Avoid rough-textured food like toast or raw vegetables.
- Keep your food moist by adding sauces and gravies.
- Cold foods may be soothing – try eating ice cream or soft milk jellies.
- You may find that taking painkillers before meals can help you swallow more easily.

Mouth care

Using a mouthwash

Mouthwashes can be very soothing, but many of the ones available in chemists or shops may be too strong for you.

Salt water mouthwashes can help reduce soreness, if it is not too severe. To make the mouthwash, add 1 teaspoon of salt to cold or warm water. Rinse this around your mouth. Then spit it out and rinse your mouth with cold or warm water.

Your doctor can prescribe an anaesthetic gel or mouthwash to help if needed.

Looking after your teeth and dentures

Many hospitals have their own mouth care guidelines for people having chemotherapy or radiotherapy, which include the best toothpaste to use. Your doctor or specialist nurse will be able to advise you.

You may be advised to see your dentist before you start treatment. They may recommend using high-fluoride or non-foaming toothpaste to help reduce any soreness.

Use a soft toothbrush to clean your teeth gently. Avoid using toothpicks when cleaning your teeth. If you want to use dental floss, check with your doctor or specialist nurse first. If you have a low platelet count, flossing can make your gums bleed.

If you wear dentures, soak them in a denture-cleaning solution overnight. Leave them out for as long as you can during the day to prevent them rubbing against your gums.

If you are having radiotherapy to the jaw area, you may be advised to keep your dentures in as much as possible during the day. This helps to maintain the shape of your gums. But if your mouth is very sore, it may be more comfortable to leave your dentures out.

If your tongue is ‘coated’

This may make your food taste unpleasant and put you off eating. You can clean your tongue with a bicarbonate of soda solution. Dissolve 1 teaspoon of bicarbonate of soda (available from your chemist) to a pint (570ml) of warm water. Dip a soft toothbrush or gauze in the solution and use it to clean your tongue.

If this does not help, talk to your doctor or specialist nurse because you may have oral thrush and need medicine. If you are having radiotherapy for a head and neck cancer, brushing your tongue is not recommended. Your clinical nurse specialist can give you more advice.



Tips if you have a dry mouth

Radiotherapy to the head and neck area and treatment with some cancer drugs can damage the saliva glands. This may cause a dry mouth (xerostomia).

The following tips may be helpful for coping with a dry mouth during and after cancer treatment:

- Taking sips of water can help keep your mouth moist. Keep a glass of water by your bed and carry water with you when you go out.
- Try sucking ice cubes or lollies. You can make lollies by freezing fresh fruit juice in ice cube trays or in lolly containers with sticks.
- Add moisture to make food easier to swallow, especially dry and starchy foods like bread, biscuits, crackers and potatoes. For example, you could moisten foods with gravies, sauces, extra oil, salad dressings, yoghurt, mayonnaise or butter.
- Chewing sugar-free gum can sometimes help you to produce more saliva.
- Tell your doctor about your dry mouth. They can prescribe mouthwashes, lozenges, artificial saliva sprays, gels or tablets if needed.
- Use a lip balm to protect your lips. But it is important not to use any on your lips during radiotherapy treatment. Speak to your clinical nurse specialist or radiotherapy team about this.
- Try using an atomiser spray with cool water to keep your mouth moist. Keep this in your pocket when you go out.
- Try to avoid alcohol (especially spirits), as these can irritate your mouth. This also includes mouthwashes that contain alcohol.
- Do not smoke as this can irritate your mouth and make it feel dry.
- Some drinks may irritate a dry mouth. Try to avoid caffeinated drinks or citrus drinks.

Tips for coping with changes to taste

You may find that food tastes different during treatment. This is usually temporary, but sometimes it can be permanent. You may no longer enjoy certain foods, or you may find that all food tastes the same. Food may taste very sweet or salty. Or you may have a metallic taste in your mouth or find that things taste like cardboard. You may lose your sense of taste, but it usually comes back.

The following tips may be helpful for coping with taste changes:

- Try different foods to find out what tastes best to you. Keep trying different foods as your taste changes.
- Eat foods that you enjoy and ignore those that do not appeal to you. But try them again after a few weeks, because your sense of taste may have changed.
- Use seasonings, spices and herbs such as pepper, cumin or rosemary to flavour your cooking. But if your mouth is sore, you may find that some spices and seasonings make it worse.
- Try eating bland foods such as bread, potatoes and crackers.
- Try marinating meat.
- Cold meats may taste better served with pickle or chutney.
- Sharp-tasting foods can be refreshing and leave a pleasant taste in your mouth. These include fresh fruit, fruit juices and sugar-free sour or boiled sweets. Be careful if your mouth is sore as these may be painful to eat.
- If you no longer like tea or coffee, try lemon tea, herbal teas or a cold drink such as lemonade.

- Some people find that cold foods taste better than hot foods. If your sense of taste or smell changes, it may help to let your food cool before eating it.
- Serve fish, chicken, red meat and egg dishes with sauces. You could add these sauces to vegetables too. But be careful if your mouth is sore because some sauces, such as curry or sweet and sour, may feel painful to eat.
- If you notice a metallic taste in your mouth, try using re-useable plastic cutlery.
- Brush your teeth before meals.



Tips for coping with difficulties chewing or swallowing

Some chemotherapy, targeted therapy and immunotherapy drugs, and radiotherapy for head or neck cancer can affect the cells in the lining of the throat. This can make it painful to chew or swallow. An infection in your mouth or throat, such as thrush, can also make chewing and swallowing uncomfortable.

Tell your doctor or dietitian if you have any difficulties chewing or swallowing. If you find that drinks make you cough, and you are feeling unwell, you should tell your doctor or nurse as soon as possible. A speech and language therapist (SLT) can advise you about problems with swallowing.



Here are some tips for coping with difficulties chewing or swallowing:

- Taking painkillers 30 minutes before meals may help you chew and swallow more easily. Your doctor or nurse can suggest which painkillers might be best for you to take.
- Choose foods that are easy to swallow, such as scrambled eggs, scrambled tofu or yoghurt.
- Soften foods with sauces and gravy.
- Finely chop meat and vegetables and cook them for a long time. For example, you could make a stew or casserole.
- Cut the crusts off bread to make softer sandwiches. Some people find thin bread easier to swallow.
- If you have a blender, you could liquidise cooked foods.
- Some frozen-meal, home-delivery companies have a soft-food range on their menu.
- There are several food supplements that you may find helpful – for example, Complian® or Meritene® drinks. Your dietitian can provide nutritional advice and prescribe supplements if needed. You can buy these from your chemist or supermarket. Your doctor may give you a prescription for some of them. Always talk to your doctor or dietitian before taking supplements. They can explain which food supplements might be best for you.

If you are too tired to cook or eat

Feeling very tired (fatigued) is a common side effect of cancer treatment. It can also be caused by the cancer itself. Cancer-related tiredness usually gets better after treatment finishes. But it may continue for months or even years. Everyone is different, and there is no way to know how long fatigue may last for each person. You may find you are struggling to cook your meals and you are too tired to eat.

Tips to help you cope with tiredness

There are different ways you can make things easier if you are feeling too tired to cook or eat:

- Use convenience foods such as frozen meals, tinned foods and ready meals. Remember to defrost frozen foods thoroughly and cook all foods properly to avoid any risk of food poisoning. Read and follow cooking instructions carefully.
- Try to plan ahead. If you have a freezer, prepare food when you are feeling less tired. You can freeze it to use when you are feeling tired. You could stock up on convenience foods, or use a local meal-delivery company.
- Family, friends or neighbours may want to help in some way. You could ask if they could get some shopping or cook for you.

- If you really do not want to eat, try having a nourishing drink. You can make a smoothie with bananas, peaches, strawberries or other soft fruit (fresh or frozen). Add these to a blender or liquidiser with fortified milk, plant-based milk, fruit juice, ice cream or yoghurt.
- Ask your doctor, nurse or dietitian to prescribe or recommend supplement drinks for you.
- You might feel you need more help at home with cooking or eating. Tell your GP or contact the dietitian at your hospital. They may be able to arrange for you to have meals delivered, or for someone to help you prepare your food.
- It may be easier to eat smaller meals more often throughout the day, rather than having a few bigger meals.

We have more information that you might find helpful in our booklet **Coping with fatigue (tiredness)** – page 40.

Smoothies can be frozen. You could buy some ice lolly moulds and sticks and make your own. There are lots of recipes available and nearly every fruit and vegetable can be made into a smoothie.

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Bowel changes that affect your diet

Tips to help with constipation

Constipation means that you are not able to empty your bowels (poo) as regularly as you usually do. It can become difficult or painful for you to empty your bowels. Cancer treatments and medicines such as painkillers and anti-sickness drugs can cause constipation.

Here are some tips that can help with constipation:

- Eat plenty of fibre each day. Good sources of fibre include: whole-wheat breakfast cereals (Weetabix®, Shredded Wheat® or muesli), wholemeal bread, flour and pasta, brown rice and fresh fruit and vegetables.
- Drink plenty of fluids – both hot and cold drinks will help. Aim to drink at least 2 litres (3½ pints) a day. This is very important if you increase the amount of fibre in your diet. Eating fibre without drinking enough fluids can make constipation worse.
- You could try a natural remedy for constipation. This includes prune juice, prunes, fig syrup and dried apricots.
- Gentle exercise, such as walking, will help keep your bowels moving.
- If you are constipated because of the medicines you are taking, it may be possible to change the dose you take. Talk to your doctor about this.
- You may need to take laxatives (medicines that help you empty your bowels). Your doctor can give you more advice.
- If you have cancer of the bowel, or you think your cancer treatment is causing constipation, ask your doctor or specialist nurse for advice.

Tips to help with diarrhoea

Diarrhoea means that you need to empty your bowels (poo) more often than you usually do. It also means your stools are looser than usual.

Chemotherapy, targeted therapy, immunotherapy, radiotherapy and surgery can all cause diarrhoea. The treatments can affect the healthy cells that line the digestive tract, which causes diarrhoea. Sometimes an infection or other medications, such as antibiotics, can also cause diarrhoea.

Diarrhoea can be a temporary, mild side effect. But for some people, it can be severe, and they need to see a doctor to help manage it. Tell your doctor if you have diarrhoea. They can find out the cause and may prescribe anti-diarrhoea medicines.

If your diarrhoea is caused by radiotherapy, chemotherapy, targeted therapy or immunotherapy, you must take the anti-diarrhoea medicines prescribed by your doctor. It is not enough to change your diet. If you have diarrhoea after surgery for bowel cancer, talk to your doctor or specialist nurse before changing your diet.

Sometimes diarrhoea can be severe. Contact the hospital straight away if:

- you have diarrhoea at night
- you have diarrhoea more than 4 times in a day
- you have a moderate or severe increase in stoma activity
- the anti-diarrhoea drugs do not work within 24 hours.

Here are some tips that can help with diarrhoea:

- Drink at least 2 litres (3½ pints) of fluids each day. This will replace the fluid lost from diarrhoea.
- Avoid drinking alcohol and coffee.
- Eat small, frequent meals made from light foods. This could be white fish, poultry, well-cooked eggs, white bread, pasta or rice.
- Eat your meals slowly.
- Eat less fibre, such as cereals, raw fruits and vegetables, until the diarrhoea improves.
- Avoid greasy, fatty foods such as chips and beef burgers, and spicy foods like chilli peppers.

If you are taking antibiotics

Antibiotics can kill the healthy bacteria normally found in the bowel. But the bacteria found in live yoghurt or yoghurt drinks may replace them. This may help ease diarrhoea caused by antibiotics. You should avoid live yoghurt while you are having chemotherapy or if your immunity is low.

Tips to help with wind

The amount of wind we produce depends on how healthy bacteria and digestive enzymes in our bowel combine with the foods we eat.

Pelvic radiotherapy (radiotherapy to the lower tummy area) can cause wind. This is because the pelvic floor muscles may become weaker. We have more information in our booklet **Managing the bowel late effects of pelvic radiotherapy** (page 40).

Some types of bowel surgery may also cause problems with wind. Constipation and some types of medicines can also cause wind. If you find wind difficult to cope with, talk to your doctor or specialist nurse. If passing wind becomes painful, tell your doctor.

Below are some tips that can help with wind:

- Eat and drink slowly. Take small mouthfuls and chew your food well.
- Avoid food that you think gives you wind. Beans and pulses, pickles and fizzy drinks often cause problems.
- A popular natural remedy is peppermint water. Or you could try peppermint tea.
- You could try taking charcoal tablets. You can buy these from a health food shop or pharmacy. However, charcoal can affect other medicines you may be taking so always ask your doctor or pharmacist first.
- Gentle exercise, especially walking, can help.
- Try to ensure you empty your bowels (poo) regularly – wind can be a sign of constipation.
- Your GP can prescribe peppermint oil capsules that may help.

Feeling sick, heartburn and indigestion

Tips to cope with feeling sick (nausea)

Some cancer treatments can make you feel sick (nausea). This includes some chemotherapy, hormonal therapy, targeted therapy and immunotherapy drugs.

Radiotherapy to the brain, stomach, bowel or close to the liver can also make you feel sick.

You may also get nausea from some painkillers or antibiotics, or if you have physical problems like constipation or liver damage.

There are very effective treatments to help prevent and control nausea. Your cancer doctor, nurse or GP can prescribe anti-sickness (anti-emetic) drugs for you. Tell them if your anti-sickness drugs are not helping. There are different types you can take.

If feeling sick is putting you off your food, these tips may help:

- Try eating dry food, such as toast or crackers, before you get up in the morning.
- If the smell of cooking makes you feel sick, eat cold meals or food from the freezer that only needs heating up. Remember to follow the cooking instructions to make sure it is properly cooked.
- If possible, let someone else do the cooking for you.
- Avoid fried, fatty foods with a strong smell.
- Try sitting by an open window while you eat. This will let plenty of fresh air into the room.
- Sit in an upright position at a table when eating. Stay sitting for a short time after the meal.
- When you feel sick, start by eating light foods, such as thin soups. Gradually introduce small portions of foods you feel like eating. You can slowly build up to a more varied diet.
- Food or drinks containing ginger can help reduce nausea. You could try crystallised ginger, ginger tea or ginger biscuits.
- Some people find peppermint tea reduces nausea. You could add a teaspoon of honey if you prefer a sweeter taste.
- Sipping a fizzy drink may help. Try mineral water, ginger ale, lemonade or soda water. Sip it slowly through a straw.
- Try having drinks between meals rather than with your food.
- Some complementary therapies such as acupuncture may help. But check with your doctor first. Some people find wearing acupressure wristbands helpful. You can buy these from a chemist.
- Try to make sure you empty your bowels (poo) regularly. Constipation can make you feel sick.

We have more detailed information about coping with nausea and vomiting at [macmillan.org.uk/nausea-vomiting](https://www.macmillan.org.uk/nausea-vomiting)

Tips for coping with heartburn and indigestion

Heartburn is a burning sensation behind the breastbone. It can be very painful. It is caused when acid from the stomach irritates the lining of the gullet (oesophagus).

Indigestion is discomfort in the upper part of the tummy (abdomen). It usually happens after meals. It can happen when stomach acid irritates the lining of the stomach or small bowel. Some drugs (such as steroids or anti-inflammatory painkillers) and some cancer treatments (such as chemotherapy) can also irritate the stomach lining. You may get indigestion if you do not eat or drink much, have a small stomach capacity or do not move around very much.

The Macmillan dietitian knew what I was going through with my diet, and she'd say, "Well, we can try different things, until you feel comfortable." She was always there for advice on changing my diet.

Bethan

Here are some tips to help relieve heartburn and indigestion:

- There are medicines that can help. Your GP or cancer doctor can suggest what might be best for you.
- Make a note of any foods that cause discomfort so you can avoid them.
- Large meals, chocolate, alcohol, fatty and spicy foods, fizzy drinks, chewing gum, hard-boiled sweets and mint are all known to cause problems. You may want to limit or avoid these.
- When symptoms have settled, you can try re-introducing foods you have been avoiding in small quantities, 1 at a time. This is so you can start to have a healthy, balanced diet.
- Wear loose clothing around your waist.
- Limit activity for at least 45 to 60 minutes after eating.
- Try not to lie flat on your back, especially after meals. Use extra pillows in bed or raise the head of the bed by a few inches.
- If you get a lot of indigestion at night, avoid eating a meal or drinking tea or coffee for 3 to 4 hours before you go to bed.
- Try to keep to a healthy weight.
- If you smoke, try to stop or cut down. The chemicals in cigarette smoke may make indigestion worse. The NHS has a lot of information and support to help you give up smoking. Check the NHS website for the country where you live.

Changes to your appetite

Tips if you have a poor appetite

You may lose your appetite during cancer treatment. This may be because you feel sick or tired, or because food and drink taste different.

If you have problems with your diet or appetite, ask your doctor at the hospital to refer you to a dietitian. If you are at home, your GP or district nurse can refer you to a community dietitian.

They can review your diet and your dietary requirements. They can advise you on which foods are best for you, and whether any food supplements would be helpful.

These tips might help:

- Instead of having 3 big meals a day, try eating small, frequent meals or snacks. If you find certain times of the day are better for you to eat, try to eat then.
- Keep snacks handy to eat whenever you can. Nuts, crisps, dried fruit or cheese and crackers are quite light and tasty. If these are hard for you to chew or swallow, try yoghurt, peanut butter or fromage frais instead.
- Try to make your food look as attractive as possible. Put small portions on your plate and add slices of lemon, tomato or parsley. You could use a small plate to serve food on.
- Drinking a small amount of alcohol just before, or with food, may help to stimulate your appetite. Check with your doctor that you can have alcohol.

- If you have recently had surgery or radiotherapy for bowel cancer, you may need advice about the best foods for you. Discuss this with a dietitian, your specialist nurse or doctor.
- Have sweet or savoury nourishing drinks as well as small meals. Sip these slowly through the day. The sugar in these drinks can damage your teeth. It is important to wash your mouth out with water after having any sugary drinks and brush your teeth regularly.
- Eat your meals slowly, chew the food well and relax for a little while after each meal.
- Sometimes the smell of cooking can put you off eating. If you have family or friends who would like to help, ask them if they could cook for you. Or try to eat cold foods that do not need cooking, or ready-made foods that can go straight in the oven.
- Everyone's appetite changes and you may have good and bad days. Make the most of the good days by eating well and treating yourself to your favourite foods.
- Try to eat your meals in a room where you feel relaxed and where there are no distractions.
- It may be possible to stimulate your appetite using medicines, such as a low dose of steroids or the hormone medroxyprogesterone. Your doctor may prescribe these for you.

If you have a big appetite due to medicines

Some medicines, such as steroids, may give you a big appetite. This might make you want to eat much more than usual. It is important to try to eat healthy foods such as fruit and vegetables instead of sweets and crisps. This is so you do not gain too much weight. We have more information about making healthy food choices in our booklet **Healthy eating and cancer** (page 40).



Your feelings about eating problems

You may feel self-conscious about eating at home or when you are out with family or friends. You may worry that changes in your eating will affect your relationships with your partner, family or friends. Or you may be anxious about what people think of your eating problems.

Many people find that it helps to talk to someone close to them. If you find it difficult to talk about your feelings with your family, you could speak to your doctor, specialist nurse or GP. There are ways they can support you.

We have more information on coping with your emotions in our booklet **How are you feeling? The emotional effects of cancer** (page 40).

Getting help with meals

You may not always feel well enough to cook food for yourself or others. This may be frustrating. If you are the person who usually prepares the meals for your family, it may feel strange to let someone else take charge. Try not to feel guilty about letting someone else do the things you usually do. When you feel better, you can get back into your routine.

If you live on your own and need help with cooking or shopping, contact your GP, district nurse or social worker. They may be able to arrange for home help, meals on wheels or a local organisation to help with cooking or shopping.

Caring for someone with eating problems or weight loss

If you are the main carer for someone with cancer, it can be upsetting and difficult to know how to deal with eating problems, such as lack of appetite or weight loss. People who are ill often do not feel like eating. Cancer, cancer treatments and other medicines can all affect someone's appetite. Feeling sick and having diarrhoea or constipation can stop people eating. Or they may feel too tired to eat, have a sore or dry throat or mouth, or find chewing and swallowing difficult.

Mealtimes are often an enjoyable and important part of family and social life. It can be frustrating and worrying when someone you care for cannot eat very much.

The amount someone can eat may change each day, and their likes and dislikes may also change. Try not to put pressure on someone to eat. This can sometimes cause arguments. If you know when their appetite is at its best, you can make the most of it. For example, you could treat them to their favourite foods.

If the person you are caring for continues to struggle with food and is losing weight, speak to their doctor or nurse. They can refer them to a dietitian. The dietitian can advise on using nutritional supplement drinks if this is appropriate.

My husband has challenges eating. He hates the thought, smell and taste of almost everything. The only thing he does tolerate is sweet stuff like custard, yoghurt and rice pudding. It's not an ideal diet, but at least it's something.

Sue

Tips for carers on preparing and serving food

Preparing food

- Ask the person you are caring for what they would like to eat.
- Try to talk openly about their eating problems or weight loss. Talk about the different ways you could both manage it. This can help you both feel more in control of the situation.
- Try to give them small meals and snacks, whenever they feel like eating. This might be better than eating at set times of the day.
- Offer their favourite foods at the times when you know their appetite is at its best.
- The person you are caring for may find that the smell of cooking makes them feel sick. Prepare food in a different room if possible.
- Keep a range of different foods in the house so that you can offer them something at any time of the day. Tinned foods and pre-prepared frozen meals can be as good for them as a meal that takes a long time to prepare.
- If they cannot manage solid food, try soft foods. This might include porridge, bananas, soup, shepherd's pie, yoghurt or milk-based foods like custard or rice pudding.
- Make batches of their favourite meal and freeze some for a quick meal at another time.
- Moist food is often easier to eat and will help to prevent a dry mouth, so try adding sauces or gravies. You may need to use a liquidiser or blender for some dishes.

- You may find it helpful to use meal-delivery companies. Supermarket home-delivery services may make shopping easier for you.
- Try using supplements to add energy to everyday meals and drinks. For example, you could try adding fortified milk or cream to tea or coffee. You can also add cream, butter or cheese to meals.
- Take care preparing food if the person you are caring for may be at risk of infections and food poisoning. The doctors or dietitian will be able to advise you about this. We have information about food hygiene and lowered immunity (pages 8 to 9).
- The person you are caring for may have side effects of treatment. These might be nausea, vomiting, taste changes, a sore mouth or changes to bowel habits. A member of their medical team can either prescribe something to help or refer them to a dietitian.

Serving food

- Try to serve food in a well-ventilated room to help if the person you are caring for has nausea.
- Keep servings small. Offer extra helpings rather than putting too much food on the plate to begin with. Too much food can be overwhelming and off-putting.
- Try not to worry if they cannot always eat what you have cooked. Gently encourage the person you are caring for to eat. But try not to push them too much. It helps to create a relaxed atmosphere at mealtimes.
- If someone's sense of taste or smell has changed, it can sometimes help to serve food cold or at room temperature.
- Use plastic cutlery if the person affected by cancer notices a metallic taste in their mouth.
- Try to create a comfortable eating environment.
- Serve meals so they look appetising.

Helpful resources about eating problems and cancer

We have listed some helpful resources about eating problems and cancer.

The Christie NHS Foundation Trust, 2019

Eating – help yourself. A guide for patients and their carers

This booklet has advice on how to eat well when trying to cope with cancer and its side effects. It has tips on how to make food as nourishing as possible and ideas for snacks and drinks.

The Royal Marsden NHS Foundation Trust, 2019

Eating well when you have cancer

This booklet has been written to help people eat well when they have cancer. It suggests foods to help or to avoid. It also has recipes and sources of further information and support.

The Christie NHS Foundation Trust, 2019

Nutritional products – availability of nutritional drinks, powders and puddings: A guide for patients and carers

This booklet was designed by dietitians for people with eating difficulties. It describes the supplements available, those that are most suitable, and how each product can be used.

Oesophageal Patients Association, 2014

Swallowing & nutrition – when it’s difficult

This booklet gives advice on eating when swallowing is difficult. It includes tips to help cope with a lack of appetite, indigestion, nausea and diarrhoea. It has information about food supplements, energy supplements and soft nutritious foods. It also includes helpful recipes.

Royal Surrey County Hospital – St Luke’s Cancer Centre

Diet and cancer information

Visit royalsurrey.nhs.uk/diet-and-cancer-information for information on eating well during cancer treatments and managing diet with symptoms and side effects of treatment.



Further information

We provide expert, up-to-date information about cancer.
And all our information is free for everyone.

Order what you need

You may want to order more booklets or leaflets like this one.
Visit orders.macmillan.org.uk or call us on **0808 808 00 00**.

We have booklets about different cancer types, treatments and side effects. We also have information about work, financial issues, diet, life after cancer treatment and information for carers, family and friends.

Online information

All our information is also available online at macmillan.org.uk/information-and-support You can also find videos featuring stories from people affected by cancer, and information from health and social care professionals.

Other formats

We also provide information in different languages and formats, including:

- audiobooks
- Braille
- British Sign Language
- easy read booklets
- interactive PDFs
- large print
- translations.

Find out more at macmillan.org.uk/otherformats

If you would like us to produce information in a different format for you, email us at informationproductionteam@macmillan.org.uk or call us on **0808 808 00 00**.

Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we are here to support you.

Talk to us

If you or someone you know is affected by cancer, talking about how you feel and sharing your concerns can really help.

Macmillan Support Line

Our support line is made up of specialist teams who can help you with:

- emotional and practical support if you or someone you know has been diagnosed with cancer
- clinical information from our specialist nurses about things like diagnosis and treatments
- welfare rights advice, for information about benefits and general money worries.

To contact any of our teams, call the Macmillan Support Line for free on **0808 808 00 00**. Or visit **[macmillan.org.uk/support-line](https://www.macmillan.org.uk/support-line)** to chat online and see the options and opening times.

Our trained cancer information advisers can listen and signpost you to further support.

Macmillan Information and Support Centres

Our Information and Support Centres are based in hospitals, libraries and mobile centres. There, you can speak with someone face to face. Visit one to get the information you need, or if you would like a private chat, most centres have a room where you can speak with someone alone and in confidence.

Find your nearest centre at **[macmillan.org.uk/informationcentres](https://www.macmillan.org.uk/informationcentres)** or call us on **0808 808 00 00**.

Talk to others

No one knows more about the impact cancer can have on your life than those who have been through it themselves.

Support groups

Whether you are someone living with cancer or a carer, we can help you find support in your local area, so you can speak face to face with people who understand. Find out about support groups in your area by calling us or by visiting [macmillan.org.uk/selfhelpandsupport](https://www.macmillan.org.uk/selfhelpandsupport)

Online Community

Thousands of people use our Online Community to meet other people going through the same things. Share your experiences, ask questions, or just read through people's posts at [macmillan.org.uk/community](https://www.macmillan.org.uk/community)

Help with money worries

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. If you have been affected in this way, we can help. Please note the opening times may vary by service.

Help with work and cancer

Whether you are an employee, a carer, an employer or are self-employed, we can provide support and information to help you manage cancer at work. Visit [macmillan.org.uk/work](https://www.macmillan.org.uk/work)

Other useful organisations

There are lots of other organisations that can give you information or support. Details correct at time of printing.

Nutrition and diet information and support

British Dietetic Association (BDA)

Tel 0121 200 8080

Email info@bda.uk.com

www.bda.uk.com

Provides training and facilities for registered dietitians. The website includes food facts, and has information on the role of dietitians and how to find one.

British Nutrition Foundation

Tel 0207 557 7930

Email postbox@nutrition.org.uk

www.nutrition.org.uk

The website has information about healthy eating and lifestyle choices.

Diabetes UK

Tel 0345 123 2399 (Mon to Fri, 9am to 6pm)

Email helpline@diabetes.org.uk

Tel (Scotland) 0141 212 8710 (Mon to Fri, 9am to 6pm)

Email (Scotland) helpline.scotland@diabetes.org.uk

www.diabetes.org.uk

Gives information and support on any aspects of managing diabetes, including medication, diet and exercise.

General cancer support organisations

Cancer Black Care

Tel **0734 047 1970**

www.cancerblackcare.org.uk

Provides support for all those living with and affected by cancer, with an emphasis on Black people and people of colour.

Cancer Focus Northern Ireland

Helpline **0800 783 3339** (Mon to Fri, 9am to 1pm)

Email **nurseline@cancerfocusni.org**

www.cancerfocusni.org

Offers a variety of services to people affected by cancer in Northern Ireland.

Macmillan Cancer Voices

www.macmillan.org.uk/cancervoices

A UK-wide network that enables people who have or have had cancer, and those close to them such as family and carers, to speak out about their experience of cancer.

Counselling

British Association for Counselling and Psychotherapy (BACP)

Tel **0145 588 3300** (Mon to Thu, 10am to 4pm)

Email **bacp@bacp.co.uk**

www.bacp.co.uk

Promotes awareness of counselling and signposts people to appropriate services across the UK. You can search for a qualified counsellor.

UK Council for Psychotherapy (UKCP)

Tel **0207 014 9955**

Email **info@ukcp.org.uk**

www.psychotherapy.org.uk

Holds the national register of psychotherapist and psychotherapeutic counsellors, listing practitioners who meet exacting standards and training requirements.

Emotional and mental health support

Mind

Helpline **0300 123 3393** (Mon to Fri, 9am to 6pm)

Email **info@mind.org.uk**

www.mind.org.uk

Provides information, advice and support to anyone with a mental health problem through its helpline and website.

Samaritans

Helpline **116 123**

Email **jo@samaritans.org**

www.samaritans.org

Provides confidential and non-judgemental emotional support, 24 hours a day, 365 days a year, for people experiencing feelings of distress or despair.

LGBT-specific support

LGBT Foundation

Tel **0345 330 3030** (Mon to Fri, 9am to 9pm)

Email **helpline@lgbt.foundation**

lgbt.foundation

Provides a range of services to the LGBT community, including a helpline, email advice and counselling.

The website has information on various topics including sexual health, relationships, mental health, community groups and events.

Support for carers

Carers UK

Helpline (England, Scotland, Wales) **0808 808 7777**

(Mon to Fri, 9am to 6pm)

Helpline (Northern Ireland) **0289 043 9843**

(Mon to Fri, 9am to 5pm)

Email **adviceinfo@carersuk.org**

www.carersuk.org

Offers information and support to carers across the UK.

Has an online forum and can put people in contact with local support groups for carers.

Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date, but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, Macmillan does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it. Some photos are of models.

Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support's Cancer Information Development team. It has been approved by Prof Tim Iveson, Consultant Medical Oncologist and Macmillan Chief Medical Editor.

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Thanks also to the people affected by cancer who reviewed this edition, and those who shared their stories.

We welcome feedback on our information. If you have any, please contact **informationproductionteam@macmillan.org.uk**

Sources

Below is a sample of the sources used in our eating problems information.

If you would like more information about the sources we use, please contact us at **informationproductionteam@macmillan.org.uk**

European Oral Care in Cancer Group – Oral Care Guidance and Support. 1st Edition. Available at: www.eocc.co.uk [Accessed February 2020].

National Cancer Institute. Nutrition in Cancer Care. (PDQ) Updated 2019. www.cancer.gov [Accessed March 2020].

The Royal College of Surgeons of England/The British Society for Disability and Oral Health. The oral management of oncology patients requiring radiotherapy, chemotherapy and/or bone marrow transplantation. Clinical Guidelines. 2018.

UK Oral Management in Cancer Care Group (UKOMiC), Oral Care guidance and support in cancer and palliative care (3rd edition), 2019.

Can you do something to help?

We hope this booklet has been useful to you. It is just one of our many publications that are available free to anyone affected by cancer. They are produced by our cancer information specialists who, along with our nurses, money advisers, campaigners and volunteers, are part of the Macmillan team. When people are facing the toughest fight of their lives, we are here to support them every step of the way.

We want to make sure no one has to go through cancer alone, so we need more people to help us. When the time is right for you, here are some ways in which you can become a part of our team.

5 ways you can help someone with cancer

Share your cancer experience

Support people living with cancer by telling your story, online, in the media or face to face.

Campaign for change

We need your help to make sure everyone gets the right support. Take an action, big or small, for better cancer care.

Help someone in your community

A lift to an appointment. Help with the shopping. Or just a cup of tea and a chat. Could you lend a hand?

Raise money

Whatever you like doing you can raise money to help. Take part in one of our events or create your own.

Give money

Big or small, every penny helps. To make a one-off donation see over.

Call us to find out more 0300 1000 200
macmillan.org.uk/getinvolved

Please fill in your personal details

Mr/Mrs/Miss/Other

Name

Surname

Address

Postcode

Phone

Email

Please accept my gift of £
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I enclose a cheque / postal order /
Charity Voucher made payable to
Macmillan Cancer Support
OR debit my:
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Do you pay tax? If so, your gift will be worth 25% more to us – at no extra cost to you. All you have to do is tick the box below, and the tax office will give 25p for every pound you give.

I am a UK tax payer and I would like Macmillan Cancer Support to treat all donations I make or have made to Macmillan Cancer Support in the last 4 years as Gift Aid donations, until I notify you otherwise.

I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I understand Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

Macmillan Cancer Support and our trading companies would like to hold your details in order to contact you about our fundraising, campaigning and services for people affected by cancer. If you would prefer us not to use your details in this way please tick this box.

In order to carry out our work we may need to pass your details to agents or partners who act on our behalf.

If you would rather donate online
go to macmillan.org.uk/donate



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Please cut out this form and return it in an envelope (no stamp required) to: Supporter Donations, Freepost RUCY-XGCA-XTHU, Macmillan Cancer Support, PO Box 791, York House, York YO1 0NJ

This booklet talks about some common eating problems and why they might happen. It also suggests some practical ways to manage them. There is also information for carers, family members and friends.


At Macmillan we know cancer can disrupt your whole life. We'll do whatever it takes to help everyone living with cancer in the UK get the support they need right now, and transform cancer care for the future.

For information, support or just someone to talk to, call **0808 808 00 00** or visit **macmillan.org.uk**

Would you prefer to speak to us in another language? Interpreters are available.

Please tell us in English the language you would like to use. Are you deaf or hard of hearing? Call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

Need information in different languages or formats? We produce information in audio, interactive PDFs, easy read, Braille, large print and translations. To order these, visit **macmillan.org.uk/otherformats** or call our support line.

The logo consists of a blue rounded rectangle containing the text 'Trusted Information Creator' in black. To the right of the text is a large green checkmark.

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