## **ERAS Cancer Care Guidelines: Esophagectomy**



You may be nervous or scared about surgery for esophageal cancer. It's normal to feel that way. Surgery that removes part or all of your esophagus is called an esophagectomy. This can feel stressful to go through. But, there's a program to help make the process a bit easier. It's called Enhanced Recovery After Surgery (ERAS).

## What is ERAS?

ERAS is a program to improve surgery quality. The guidelines put the focus on the patient. They encourage and empower you to be an active partner in your care.

The goal is to provide a smoother and safer surgery experience. ERAS can:

- Reduce complications
- Shorten your hospital stay
- Improve your outcome

By achieving these goals, ERAS can also help lower your healthcare costs.

A group of experts called the ERAS Society first developed this approach for colon surgery. The guidelines worked so well that they created guidelines for other procedures, such as esophagectomy. Today, many healthcare providers worldwide use the ERAS approach.

## What are the ERAS guidelines for esophagectomy?

ERAS guidelines start as soon as you decide to have surgery. They continue after discharge. Some ERAS guidelines are the same for all types of surgery. But other guidelines vary for each kind of surgery. Guidelines for esophagectomy include:

- Multidisciplinary approach. Working with different healthcare providers can make your care seem
  disjointed. But when your team works together across specialties, everyone is on the same page about
  your care. Multidisciplinary care teams are advised for all people with esophageal cancer.
- Patient education. Learning more about your surgery and recovery can help soothe your fears and ease your recovery. You may have a prehabilitation program. This is a program before surgery. It includes exercise, nutrition education, and support in coping.
- **Timing of surgery.** You will likely have esophageal surgery 3 to 6 weeks after you finish chemotherapy. If you are having chemoradiation, you will likely have surgery 6 to 10 weeks after the last day of radiation therapy.
- Good nutrition. People with esophageal cancer often have trouble eating. You will have a nutrition
  assessment. Your healthcare team will aim to improve your nutrition before you have surgery. Good
  nutrition before surgery enhances your health and recovery. You will likely need to stop eating food 6
  hours before surgery. You will need to stop drinking fluids 2 hours before surgery. After surgery, the goal
  is to give you nutrition soon after surgery. You may have a feeding tube.
- Smart pain management. You can get relief with fewer side effects with a variety of pain control
  methods. One method used is thoracic epidural analgesia. The goal is to limit the use of opioids.
  Opioids can cause nausea, vomiting, sedation, and confusion. Your healthcare team will tell you about
  your pain control options.
- Not smoking and drinking alcohol before surgery. If you smoke, you should stop 4 weeks before surgery. If you drink alcohol regularly, you should stop 4 weeks before surgery. Your healthcare team can help you. This helps prevent problems after surgery.

- Surgery methods. You may have a minimally invasive or open procedure. This depends on your hospital or care center. ERAS guidelines advise that minimally invasive procedures are safe. They may help reduce blood loss, infections, and how long you need to stay in the hospital.
- **Drain and tube management.** You may have a chest tube, a urinary catheter, or a NG (nasogastric) tube after your surgery. ERAS guidelines advise minimal use of chest drains. They advise removing an NG tube and a urinary catheter as soon as possible.
- Early return to activity. By getting up and moving soon after surgery, you can prevent problems. You can return to normal activities sooner.
- A care plan just for you. Adapting care plans to your personal needs means you will have a better recovery.

There are more ERAS guidelines just for esophagectomy. Ask your healthcare team for more details.

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