Nutrition

Introduction

I'm Dr Jonathan Salo, I'm a GI Cancer Surgeon in Charlotte, North Carolina.

Esophageal cancer can cause difficulty with swallowing, which can limit your body's ability to get the nutrition you need in order to keep your body healthy during cancer treatment.

In this video you'll learn about

- Essential building blocks for good nutrition
- Nutritional drinks
- Feeding tubes

There are four major nutritional building block:

- Carbohydrates
- Protein
- Fats
- Vitamins and Minerals

Carbohydrates are important for energy There are many different kinds of carbohydrates: There are sugars, which make food taste sweet but may also raise your blood sugar There are starches, which also provide a source of energy but are easier on your system. Starches are large molecules made up of a long chain of sugars, but don't take sweet, are are found in food such as bread and potatoes. Fats are a second category of nutrients. Fats make food taste better and are important in small quantities for rebuilding tissue. Fat is found in oil, butter, shortening, and fried foods. The average American diet, however, contains more fat than most people need Vitamins and minerals are needed to keep your body running smoothly. A daily vitamin is enough for most people. In some cases, your doctor may recommend iron supplementation, but only if your iron levels are low **Protein** Protein is the essential building block of tissue in your body, especially muscle. If you don't have enough protein in your diet, you can lose muscle mass, which can result in weakness and

fatigue

Protein is found in meats, fish, eggs, nuts, and beans. Your dietitian can give you a more precise number, but in general the average woman needs 60 grams of protein per day and the average man needs 75 grams of protein per day. You may need even more protein during cancer treatment in order to rebuild damaged tissue.

For many people with esophageal cancer, however, eating meat can be difficult. Be this, inadequate protein intake is the most common nutritional problem for patients of patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the most common nutritional problem for patients of the protein intake is the protein intake in the protein intake in the protein intake is the protein intake in the protein intake in the protein intake is the protein intake in the protein intake in the protein intake is the protein intake in the protein int	
For patients who have difficulty eating, we recommend nutritional drinks to make centave enough protein to stay healthy.	tain they
When we talk about nutritional drinks, we will talk about two different categories: • Protein Shakes • Meal Replacements	
Protein shakes contain protein and flavoring and may contain micronutrients, but d to contain much in the way of carbohydrates or fat. An example of a protein shake Premier Protein or Pure Protein.	
Meal Replacements	
Meal replacements contain protein as well as carbohydrates, along with fats. Exameal replacements would be Ensure or Boost.	amples of
Your dietitian will help decide whether a protein shake or meal replacement is best but for most patients that are able to take at least some other food, protein sha better and are usually more suitable.	

Bear in mind that the average woman need 60 grams of protein per day, and the average man needs 75 grams of protein per day, so it will be important to read the label to make certain you're getting enough protein

For most people with esophageal cancer who have difficulty eating, things can get worse during esophageal cancer therapy. The reason is that the most common initial treatment in chemotherapy and radiation.

Chemotherapy can tend to depress your appetite. Radiation can lead to a temporary 'sunburn' on the inside of the esophagus called radiation esophagitis. This usually gets better after the radiation ends, but during the radiation it can make it more difficult to swallow. Swallowing usually gets better within the first 2 to 3 weeks after the end of radiation.

One of the questions you will want to address with your esophageal cancer care team is whether or not you need a *feeding tube* to help with your nutrition during cancer treatment. Your dietitian and physicians will evaluate your situation and made a recommendation. Let's take a look at the options:

A gastrostomy tube is placed into the stomach by a surgical procedure. Feedings can be administered with a syringe. A gastrostomy tube still allows you to each as much as you would like.

A jejunostomy tube is placed into the jejunum, or the small intestine. Feedings require a pump and are generally given overnight, which can take 12-16 hours. A jejunostomy tube still allows you to each as much as you would like.

The decision between a gastrostomy tube and jejunostomy tube can be a little complex, but here are some general principles. For those with stomach cancer who need supplemental feeding, a jejunostomy tube is needed.

For patients who undergo surgery on the esophagus, a jejunostomy tube is frequently used after surgery

For patients who have esophageal cancer and who are undergoing chemotherapy and radiation either a gastrostomy tube or jejunostomy tube can be used, depending upon whether or not surgery on the esophagus is planned. This is a more complicated decision that your care team will make in coordination with your surgeon.
If you or a family member have had an encounter with esophageal cancer, I would love to hear about your experience, so please take a minute to leave a comment below. We're constantly creating new videos, so please subscribe to be notified of new videos when we post them.
Here are some additional videos which you may find helpful: