

EATING WELL WITH CANCER



Being informed is the **first step** in
taking control of your treatment.

With the institutional support of



INTRODUCTION

If you are about to start a treatment or are undergoing chemotherapy, targeted therapy, immunotherapy or radiotherapy, this information may be of help to you. Being informed is the first step in taking control of your treatment.

Did you know that good nutrition is important to the success of your treatment?

During the course of the disease, it is recommended to maintain your weight and muscle strength as much as possible. This helps to limit the side effects of treatment and contributes to a better quality of life.

It is important to know that losing weight unintentionally can affect both your treatment and your recovery. This is also the case for people who were or are overweight.



WE HAVE PREPARED THIS BOOKLET TO:

- Help you better understand what “good nutrition” looks like right now.
- Inform you about nutrition during cancer, including medical nutrition.
- Offer you tips on managing the side effects of treatments.
- Answer some common questions about information in the media or on the internet.

We encourage you to speak to your doctor, nurse and/or dietitian about your nutrition.

For additional information, you may also wish to visit the following website:

www.nutricia.ie/patients-carers/living-with/oncology



GO CHECK IT OUT!

Originally published in France: September 2020
Editors: Philippe Pouillart, Julie Branchu, Magali Pons and Emmanuel Heuzé (NUTRICIA)
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Translated and republished in Ireland: April 2022

A WORD FROM THE EXPERTS

"During the disease, adapting your diet to the treatment can lead to questioning certain usual nutritional recommendations. Don't forget, however, that food is part of the treatment and can contribute to the treatment being all the more beneficial. On the other hand, after the disease, returning to a balanced and varied diet helps to prevent a relapse of certain cancers, such as breast cancer, by fighting weight gain."

Philippe Poullart, Culinary and Health Teacher and Researcher

"When I became ill, I was just starting to take an interest in nutrition. The cancer experience amplified my desire for knowledge, and I realised how food is a foundation of my life and energy.

Today I continue to learn, to experiment and above all to cook."

Lili Sohn, Illustrator

"Because it is supporting your care, it will be important to pay particular attention to food. It is also important not to neglect the pleasure that eating can bring, especially during this period when comfort is needed."

Julie Branchu, Catering & Health Engineer, Dietitian

"Food is an integral part of oncology care and a true complement to treatment. During the illness and the treatment, everyone has a different eating experience. Days with appetite, days without, modified tastes, cravings or no cravings, disrupted eating habits ... it will sometimes be necessary to show adaptation and imagination to continue to eat sufficiently in order to maintain a good nutritional state.

Nutritional advice and support from nutrition professionals will help patients to get through this period."

Magali Pons, Dietitian, Health Executive

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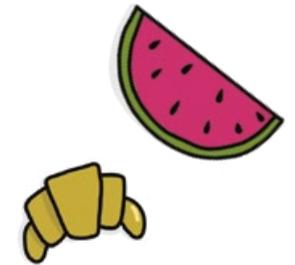
THE ROLE OF NUTRITION AND PHYSICAL ACTIVITY



01

THE ROLE OF NUTRITION AND PHYSICAL ACTIVITY

Weight: an indicator to watch



As highlighted at the start of this booklet, it is recommended that you maintain your weight and muscle strength as much as possible at this time. To help you do so, speak with your team of healthcare professionals in the hospital: dietitian, oncologist, doctor, nurse or in your community: dietitian, GP, community nurse, pharmacist. They will be able to offer you advice or direct you to the appropriate professional depending on your question or concern.

This booklet is designed to give you ideas for enriching your meals, i.e., increasing the energy value of what you eat without increasing the amount. This can be helpful at times when your appetite is low.

If you lose weight or have lost weight in recent months, it is essential to inform your medical team (oncologist, radiotherapist, doctor/GP, nurse) and ask for a referral to a dietitian.

Eating can be difficult during illness and despite your best efforts, enriching your diet may not be enough. In this case, medical nutrition is necessary. Depending on your nutritional status, your treatment and the side effects, you may be offered oral nutritional supplements or enteral or parenteral nutrition.

Enteral nutrition is the delivery of nutrients directly into the stomach through a tube. Parenteral nutrition, on the other hand, allows nutrients to be delivered by infusion. These forms of artificial nutrition support are not related to the stage of disease and both types can be performed at home. Neither enteral nor parenteral nutrition are discussed in this booklet. If you would like more information, talk to your healthcare professional.

For more information on enteral nutrition, you can also visit: www.tube-feeding.com

WEIGHT: AN INDICATOR TO WATCH



The role of protein and energy

Protein is an important nutrient at every stage of your cancer journey.

Proteins contain amino acids, some of which are said to be essential. This means that the human body cannot make them, so they must be provided by the diet. Animal proteins (contained in meat, fish, eggs and dairy products) provide all the essential amino acids needed by the body in balanced proportions.

Plant proteins from cereals (wheat, maize, rye, rice etc.), pulses or legumes (lentils, white beans, kidney beans, split peas, chickpeas etc.), seeds (pumpkin, chia, hemp etc.) and nuts (walnuts, almonds, hazelnuts, etc.) do not contain all of the essential amino acids. By combining varied foods, however, it is possible to provide a supply of plant proteins of nutritional quality to reach your requirements.

***Under-nutrition/malnutrition:**

Occurs due to an imbalance caused by insufficient nutrient intake (e.g. energy and/or protein) and the body's nutritional needs which are often increased due to the disease. The immediate consequence is an involuntary weight loss which may sometimes seem minimal, but the consequences are often significant.

IT SHOULD BE NOTED THAT MALNUTRITION AFFECTS AN AVERAGE OF 40% OF PATIENTS TREATED FOR CANCER¹.



1. Fight against undernutrition, Under-nutrition in figures. [Internet]. 2016. Issued by: <https://www.luttecontreladenutrition.fr/la-denutrition-en-chiffres/>

A word on physical activity

To help you maintain muscle mass, it is important to have sufficient food intake and as far as possible, to be physically active. However, do speak to your healthcare professionals about the level of exercise that is right for you. Physical activity helps to reduce fatigue due to cancer and its treatment, and to improve quality of life, supporting you to maintain your abilities and better cope with the treatment.

THE FOLLOWING WILL HELP YOU:

- Speak with the healthcare professionals (e.g. medical team, physiotherapist) who take care of you in the hospital.
- Physical activity is not sport. It is not about competition, but about exercising the muscles.
- If you have never done any physical activity, your doctor and/or physiotherapist may recommend an adapted physical activity plan.
- It is never too late to start. But you should start gradually and sensibly according to your own abilities and in line with advice from your healthcare professional.

THE IMPORTANCE
OF PHYSICAL
ACTIVITY



02 ADAPTING MY DIET TO MY NEEDS DURING TREATMENT



01 ADAPTING MY DIET TO MY NEEDS DURING TREATMENT

How to enrich my diet

THE AIM OF FORTIFICATION IS TO INCREASE PROTEIN AND ENERGY INTAKE, WITHOUT HAVING TO EAT MORE.

- Eat foods naturally rich in animal protein (fish, meat, eggs, cheese and other dairy products), especially during the first part of the day (breakfast, morning snack and lunch).
- For vegetarians, don't forget to add and combine animal proteins (fish, eggs, cheese and other dairy products) and vegetable proteins (cereals, pulses legumes).
- Use fats, such as butter or cream, in sauces, soups, blended foods, vegetable purées and omelettes.
- Add minced meat, grated cheese, beaten eggs and/or milk powder to soups or purées, or add milk powder.
- Don't avoid sources of sugar that provide energy (jam, honey etc.). Sugars can be a useful source of extra energy to help meet your nutritional needs.
- On the other hand, after the disease, a balanced and varied diet may help to prevent a relapse of certain cancers.



Oral Nutritional Supplements: what are they?

WHAT IS AN ORAL NUTRITIONAL SUPPLEMENT?

*ONS (Oral Nutritional Supplements) are designed to provide protein, energy, vitamins and minerals in quantities adapted to the needs of those who are unable to meet their nutritional requirements through regular intake alone. ONS are most often prescribed by doctors and are available in pharmacies. They are to be used under medical supervision.

WHAT ARE THEY GOOD FOR?

ONS are designed to help optimise your nutritional intake and/or manage unintentional weight loss. ONS can help to supplement the diet to meet daily requirements. They should be taken in addition to meals and snacks. ONS should not replace the usual diet but should complement it.

IS THERE MORE THAN ONE ONS?

There are a wide variety of ONS available. With different flavours and textures, they can be adapted to the tastes and eating habits of each individual. During treatment, taste and food preferences can change. Similarly, a variety of ONS means that you can always try something new if you start to go off a flavour or type that you previously enjoyed. The different kinds of ONS available to suit your needs and preferences include; milk-type drinks or juices, dessert-style or powders. ONS are also available in a variety of different flavours.

To address some of the issues of taste changes that may occur during disease and treatment, there are also ONS that are neutral in taste or that provide a cool or warm sensation in the mouth.

The energy and protein composition varies from one ONS to another. This is why it is very important to follow your doctor and/or dietitian's advice and prescription. This is adapted to your individual nutritional needs and food intake.



Oral nutritional supplements: how to take them

HOW SHOULD I TAKE THEM?

ONS can be taken at any stage of the day, between meals. They should not replace meals. They can be divided into several doses during the day (once opened, follow the storage instructions on the product). ONS can be consumed warmed, chilled or iced. Some can also be easily integrated into recipes: a neutral milky ONS in a purée or soup, a milky ONS mixed with ice cream and fresh fruit, a juice-type ONS in a sorbet, a dessert-style ONS in a glass jar with biscuit and whipped cream etc.

HOW LONG AND HOW MANY TIMES A DAY SHOULD I TAKE THEM?

ONS can be prescribed after a nutritional assessment, which includes, among other things, an assessment of your food intake, eating capacity and nutritional needs. ONS prescribed for you are an integral part of your nutritional care.

Your healthcare professional can organise for you to taste samples of the different types of ONS before you get your prescription.

At the end of the first month, you should consult your doctor or dietitian again to reassess your needs. Depending on your nutritional status, your prescription can be adapted as needed. Always follow your doctor/nurse/dietitian's advice on ONS.



04 ADAPTING MY DIET TO MY NEEDS DURING TREATMENT

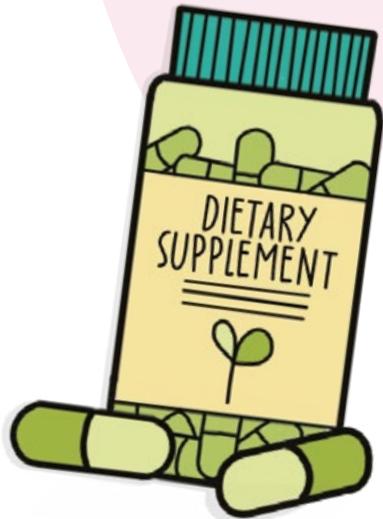
Oral Nutritional Supplements and food supplements, are they the same?

NO
THEY ARE NOT THE SAME.

Food supplements can be found in the form of powders, capsules, tablets, drinking solutions etc. and are concentrated sources of plant extracts, vitamins, trace elements, minerals, amino acids, probiotics etc. They are intended for the general population, as opposed to people with specific medical conditions.

The molecules or constituents of these food supplements may have a local action on the digestive tract or be absorbed and diffused throughout the body. Interactions with your treatments and in particular with anti-cancer treatments are possible. In addition, they may also have undesirable effects.

It is not advisable to take food supplements during treatment, unless they have been recommended by your medical team and/or dietitian. **If you do take them, however, important inform your doctor, oncologist and dietitian, even if they do not ask.**



05 ADAPTING MY DIET TO MY NEEDS DURING TREATMENT

I am vegetarian / vegan

VEGETARIAN: *I don't eat meat, fish, shellfish, gelatin containing sweets... and I continue to eat eggs, dairy products and/or honey.*

Vegetarian sources of quality protein include eggs and dairy products. Cereals and pulses can also complement each other to provide a balanced intake.

During the disease, protein requirements are increased. Any limitation in the choice of intake could lead to a deficiency and therefore to under-nutrition.

Pay attention to the choice and quantity of protein-containing foods you eat.

Do not hesitate to talk to your doctor, dietitian or your nurse for further advice.

VEGETARIAN / VEGAN: *I do not eat any foods from animals, whether meat, fish, shellfish or eggs, nor do I eat any dairy products (yoghurt, cheese, butter, ice cream, cream, etc.) or honey.*

As a vegan diet excludes many high-quality protein* foods, it can be more difficult to meet protein and energy requirements. The risk of under-nutrition is increased, so you may need additional advice from a dietitian to ensure your nutritional needs are being met at this time.

If you practice this type of diet, it is recommended that you inform your referring physician and be monitored by a dietitian from the beginning of the treatment.



* which contain all the essential amino acids.

03 DAILY ACTIVITIES TO FEEL BETTER

HOW CAN I ADAPT MY FOOD AND COOKING CHOICES TO HELP MANAGE THE SIDE EFFECTS OF TREATMENT?



TWO-THIRDS OF PATIENTS REPORT EATING LESS DURING TREATMENT.

- Make the most of times when your appetite is good. For many people, breakfast can be the meal for which they often have the greatest appetite.
- Take a “little and often” approach, eating smaller meals more frequently. Split up your food intake into 6–8 small portions a day.
- There is no need to load up your plates. Bigger portions can be off-putting at times when your appetite is poor.
- Include small snacks throughout the day.
- Take your time when eating.
- Consider sweet and savoury dishes.
- Opt for nourishing drinks and snacks. Examples include; whole milk, smoothies made on yoghurt or whole milk, milky coffees, yoghurts, custard, rice pudding, flapjacks, cereal bars, scones, banana bread, crackers with cheese/hummus, nut butters on toast, etc.
- Before eating, rinse your mouth with a citrus drink (lemon juice, pineapple, orange) or drink a small glass to help you salivate and to stimulate the appetite.
- Take regular exercise, at a level appropriate for you, to help stimulate your appetite. Fresh air can help too.
- Try to eat in the company of others if that is helpful for you.
- Constipation, nausea, pain, fatigue and other side effects, as well as anxiety may also impact appetite. Speak to your doctor and/or nurse if you are experiencing any of the above symptoms.



60% TO 100% OF PATIENTS EXPERIENCE FATIGUE DURING THEIR TREATMENT

SOME DAYS, YOU MAY FEEL TOO TIRED OR FATIGUED TO COOK AND MIGHT EVEN FIND EATING ITSELF TIRING



HERE'S SOME TIPS FOR MANAGING YOUR NUTRITION WHEN YOU'VE GOT LESS ENERGY:

- Don't be afraid to ask family or friends for help with shopping, preparing and cooking meals.
- Prepare meals in advance, at times when you have more energy. Cook in bulk and freeze extra portions for use on days when energy levels are lower.
- Frozen meals and tinned foods are handy to have in the house for days when you don't feel up to cooking.
- Nourishing drinks and foods that require little to no chewing require less energy to eat and might be more manageable on days when your energy levels are lower – for example, yoghurts, custards, rice pudding, omelettes, scrambled eggs, mashed potatoes, cream soups, milkshakes, etc.
- Organise an easily accessible cupboard in your kitchen with the utensils you use most (blender, kettle, vegetable peeler, cheese grater, cutlery, salad bowls etc.).
- Place a chair or stool in your kitchen to cook while seated.
- Select lightweight, easy-to-handle and easy-to-clean kitchen utensils to cook quickly.

TO HELP PREVENT FATIGUE:

- Keeping relatively active can help minimise fatigue. Find the balance between enough rest and regular exercise. Short naps during the day may help. Take some gentle exercise (e.g. light walk), if possible.

In case of emotional fatigue, turn to your family and health care professional. Don't keep it to yourself!



IN CASE OF DRY MOUTH:

- Take regular sips of fluid throughout the day. Rinse your mouth often.
- Give preference to sparkling water in case of dry mouth.
- Sucking on ice pops, frozen fruit (e.g. pineapple), boiled sweets or ice cubes might be helpful.
- Rinse your mouth with a citrus drink (lemon juice, pineapple, orange) or drink a small glass to help you salivate.
- Keep your lips moist with a lip balm.
- Special mouthwashes and gels are available to help manage dry mouth. Speak to your doctor or pharmacist about this.

IN CASE OF MOUTH ULCERS, MUCOSITIS, PAIN IN THE MOUTH:

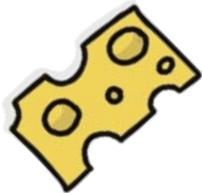
- Gently chew your food.
- Chop, soften or blend foods to make them less painful to chew. Make food smoother by adding cream, milk, butter, béchamel sauce.
- Give preference to cold food and drinks, to help sooth your mouth.
- Avoid eating foods that can dry out the mouth such as: nuts, currants, bananas, tomatoes, grapes, apples, figs, hard cheese (Emmental, Comté), shellfish, chocolate, biscuits, bread, rice, potatoes.
- Avoid strong spices and foods that are too salty or too sweet.

- Suck on ice cubes during the chemotherapy infusion session to reduce the sensitivity of the mucous membranes to inflammation.
- Microwave acidic foods (vinegar, lemon, tomato) or pungent foods (garlic) for a few seconds to reduce their strength.
- Cook acidic fruits or combine them with dairy products.
- Make food smooth by adding cream, milk, butter, béchamel sauce.
- Take a spoonful of crème fraîche, mayonnaise or a piece of butter at the beginning of your meal to grease your mouth and help you swallow. Or moisten your mouth with sauces/gravies before eating.
- Drink from a reusable straw.
- Avoid acidic mouthwashes or those that contain alcohol. Speak to your doctor about mouthwashes, gels and medications that might help with your sore mouth.

MAKE THE MOST OF NOURISHING DRINKS AND FOODS THAT REQUIRE LITTLE TO NO CHEWING. AVOID ROUGH FOODS (E.G. CRISPY BREADS) WHICH MAY BE PAINFUL TO EAT.

IN CASE OF CHANGES IN TASTE AND/OR SMELL:

- Eat foods that appeal to you and smell good. The foods which taste/smell good may change throughout your cancer journey.
- Maintain good oral hygiene.
- Avoid eating foods that no longer appeal to you. Try them again at a later stage, as you may find you begin to enjoy these foods again.
- Before eating, try rinsing your mouth with tea, saltwater or baking soda to help clear your taste buds.
- If you are experiencing a metallic taste, trial plastic cutlery and limit intake of canned foods.
- Try chewing fresh or tinned pineapple before meals to get rid of bad tastes.



FOR MANY PEOPLE, NORMAL TASTE COMES BACK AFTER TREATMENT. FOR OTHERS, CHANGES TO TASTE AND SMELL CAN PERSIST FOR LONGER.

IN CASE OF A BAD TASTE IN YOUR MOUTH:

- Suck on a mint.
- Cook with foods that develop little flavour: pasta, rice, potatoes.
- If you choose “ready-to-use” products, choose those with little salt (less than 0.3g of salt per 100 g) and without sodium glutamate, as these two flavour enhancers may amplify the bad taste in your mouth.
- Try cold foods/meals.
- Cook red meats with hard cheese (such as Emmental), either in pieces or grated, to mask the metallic flavour and choose white meats, fish or eggs.
- Brush your teeth or rinse your mouth regularly but not too close to meals.
- Try rinsing your mouth with vinegar water throughout the day.

IF FOOD SEEMS TOO SALTY OR TOO SWEET:

- Choose “natural” products, without added sugar or sweeteners (yoghurts, sorbets, etc.).
- If you're feeling up to it, prepare homemade dishes so you can add salt and sugar yourself.



IN CASE OF LOSS OF TASTE SENSITIVITY:

- Enhance the seasoning of dishes with spices, herbs, tomato coulis, lemon juice.
- Marinate meat, chicken or fish to help enhance the flavour.
- Avoid extreme temperatures which reduce the flavour of food.
- Cook your vegetables and starches in a small amount of water to concentrate their taste.
- Combine sweet and savoury flavours (meat with grapes, prunes, honey etc.).
- Chew slowly to salivate.
- Eat salty foods such as ham or cheese.

THE SENSE OF SMELL MAY BE IMPAIRED BY CERTAIN TREATMENTS AND ALTER THE PLEASURE OF EATING.

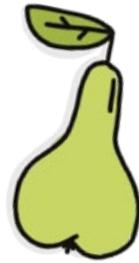
TO ENHANCE SMELL:

- Chew your food well to enhance the perception of flavours.
- Breathe in air through your mouth before putting food in your mouth or while chewing.
- If you need to soften the texture of the food, mix them separately to get a better sense of their individual flavours.
- In the kitchen, use fenugreek, fresh or powdered basil. Their flavour helps to stimulate the sense of smell.
- Eat hot food: the smell of the food will be more intense. Strong smells may bother others. Opt for cold foods if smells bother you. “Baking bags” for the oven allow foods to be roasted without odour.
- If you are sensitive to the smell of cooking, try to avoid the kitchen while food cooks (or ask for help with cooking). Ready meals might also be a good idea in this case.



EVEN IF YOU HAVE THESE SYMPTOMS, IT IS IMPORTANT TO TRY TO KEEP EATING.

- Try to keep eating (even in small amounts) because the more weight the stomach has, the less likely it is to reject food.
- Eat before you start feeling hungry, as hunger can make nausea worse.
- Eat cold foods that develop less nausea-inducing odours.
- Relax after you have eaten.
- Use ginger and peppermint in yoghurt, sauces or cooking.
- Take small, slow, regular sips of clear fluid throughout the day.
- Choose small portions to be eaten at any time and foods that are neutral in taste.
- Try carbonated drinks, which can help reduce vomiting.
- Some people find relaxation or meditation may help manage symptoms of vomiting and/or nausea.
- Contact your doctor if vomiting persists or gets worse.



THE FOLLOWING FOODS MIGHT HELP:

- Dry foods; toast, crackers, dry cereal
- Cold, bland foods; boiled potatoes, cheese, yoghurt, desserts
- Herbal teas, e.g. mint
- Ginger; ginger nut biscuits, ginger cake, or fresh ginger in hot water

SOME OF THE FOLLOWING FOODS MAY MAKE NAUSEA WORSE:

- Greasy or fried foods
- Heavily spiced foods
- Foods with a very strong smell, such as garlic and onions

ALWAYS SPEAK TO YOUR DOCTOR ABOUT YOUR SYMPTOMS – THEY MAY PRESCRIBE MEDICATION TO HELP.

- Choose high fibre foods, like wholegrain bread/pasta, pulses (peas, beans and lentils), fruit & veg. Adding flaxseed to cereal, yogurt or porridge to add extra fibre.
- Eat fruit whole and as a juice on an empty stomach: grapes, apples, prunes.
- Drink prune juice or fig syrup.
- Drink plenty of fluids. Water, milk, tea, smoothies and soups all contribute to overall fluid intake.
- Don't forget physical activity, which can help to stimulate bowel movements.
- Some medications can cause constipation. Speak to your doctor about managing constipation while on certain medications or if constipation is ongoing. You may be prescribed a laxative to help manage constipation.



EPISODES OF DIARRHOEA MAY OCCUR AS A SIDE EFFECT OF TREATMENT.

During episodes of diarrhoea, you may need to make changes to your diet for a limited period of time.

- Take regular sips of fluids to make up for losses with diarrhoea.
- Avoid raw vegetables and fruits, pulses, cabbage, mushrooms, onions, spinach, green beans and tomatoes during this period.
- Choose low-fibre cereals, e.g. white rice/pasta/bread.
- Avoid foods which can make diarrhoea worse, e.g. fatty, greasy or fried foods, caffeine (e.g. tea/coffee), citrus fruits or fruit juices and alcohol.
- Be mindful that some “sugar-free” chewing gum or sweets may contain sorbitol, which can act as a laxative.



If diarrhoea persists or if you notice your stool (poo) is red in colour or darker than usual, speak with your doctor.

Some people may experience “overflow” diarrhoea. This is when the bowel becomes blocked by hard, impacted faeces (poo), but some liquids manage to leak past the blockage. Keep an eye on changes to your bowel habits and speak to your doctor or nurse about any changes. If you have been very constipated and then develop diarrhoea, talk to your doctor or nurse before taking any medicine for constipation or diarrhoea.

04 TRUE OR FALSE?

CHECK IN ON SOME COMMON NUTRITION MYTHS



01

TRUE or FALSE?

Common questions: let's review!

DOES SUGAR FEED THE TUMOUR?



Sugar is a source of energy for all living organisms. But similar to the tumour, a number of our organs also need sugar to function (immune cells, muscle, brain, liver, heart etc.).

If you cut off the sugar to the tumour, you also cut off sugar to other important organs. This may result in these organs no longer being able to function properly. You risk becoming under-nourished. We know today that under-nutrition has functional consequences, such as increased risk of infection and post-operative complications, and an impact on tolerance to anti-cancer treatments.

We also know that some tumour cells are capable of extremely rapid adaptive processes. If the tumour is deprived of sugar, it can use other energy sources, such as proteins, which it will draw from the muscles, weakening them accordingly.

To date, there is no data that associates "excessive sugar consumption" with tumour growth. Therefore, there are no recommendations at present that prohibit cancer patients from consuming sugar.



02

TRUE or FALSE?

Common questions: let's review!

DO FOOD SUPPLEMENTS AND ESSENTIAL OILS IMPROVE THE BENEFIT OF CHEMOTHERAPY?



Except in special cases, under medical supervision, the consumption of food supplements* and essential oils is not recommended. Their action on the treatment may lead to over-toxicity or reduced effectiveness.

On the other hand, herbs and spices used in cooked dishes do not pose a risk of drug interaction.

If you do take food supplements, it is important to inform your doctor, oncologist and/or dietitian, even if they do not ask.



**A food supplement is not the same as an Oral Nutritional Supplement (ONS).*

03

TRUE or FALSE?

Common questions: let's review!

WHAT ABOUT DAIRY FOODS?

Lots of studies have looked for links between dairy and cancer. However, studies have not shown a clear link between eating/drinking dairy products and an increased risk of cancer. Therefore, experts do not recommend excluding dairy from your diet to reduce the risk of cancer.

Excluding entire food groups, such as dairy foods, from your diet can increase your risk of becoming under-nourished.

Dairy products make for convenient and nourishing snacks, providing calories, protein, calcium other important vitamins and minerals.

Many research studies have looked for a link between diets that are high in dairy products and cancer, especially breast and prostate cancer. But these studies have not shown a clear link. Because of this, cancer experts do not recommend following a dairy-free diet to reduce the risk of cancer. Dairy products are an important source of protein, calcium and some vitamins.



04

TRUE or FALSE?

Common questions: let's review!

AND THE KETOGENIC DIET?

The ketogenic diet consists of reducing carbohydrate intake without restricting total energy intake. The proportion of fats in the diet is therefore greatly increased.

The body then obtains its energy from the breakdown of fats.

This diet greatly disrupts eating habits and excludes many everyday foods, which can lead to a loss of appetite in patients who are already at high risk of under-nutrition.

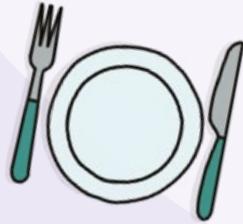


It can also cause digestive problems due to its high fat content (nausea, vomiting, diarrhoea) and constipation due to its low fibre content.

There is ongoing research on the ketogenic diet, however at present it is not currently recommended for people with cancer.



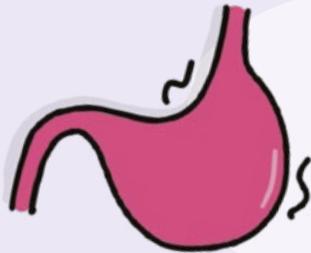
CAN I FAST DURING THE TREATMENT?



Evidence to support intermittent fasting is limited. Therefore fasting, or eating very little for prolonged periods of time, is not recommended during or outside of treatment.

Fasting may reduce your ability to meet nutritional requirements and maintain your weight and strength.

Evidence to support intermittent fasting is limited. Therefore fasting, or eating very little for prolonged periods of time, is not recommended during or outside of treatment.





WWW.NUTRICIA.IE/PATIENTS-CARERS/LIVING-WITH/ONCOLOGY

The logo features the word "NUTRICIA" in a bold, white, sans-serif font. A white arc is positioned above the "N" and "U". To the right of "NUTRICIA" is a vertical white line, followed by the word "ONCOLOGY" in a lighter, white, sans-serif font.