

DEAN CLINIC – HEMATOLOGY & ONCOLOGY

TREATMENT INFORMATION

A treatment plan for your cancer has been recommended by your Oncologist. Your treatment may include chemotherapy (medications that attack cells that divide at a faster rate like cancer cells), immunotherapy (medications that target specific cells or parts of cells to fight the cancer), or both. Treatments may be given intravenously, as an injection or oral medication or in any combination of the three. You may have questions about the medications and potential side effects from the treatment. The following information, along with the Oncology staff will help you understand the treatment and how to manage side effects.

It is important your questions and concerns get addressed. Bring a list of questions to your appointments and/or have someone with you who can take notes. Ask to have information repeated or written down for you if you do not understand.

Department Hours and Phone Numbers

Hours:

Telephone hours: Monday through Friday 8:00 a.m. to 5:00 p.m.

Treatment hours: Monday, Tuesday, Thursday, Friday 8:30 a.m. to 4:00 p.m.
Wednesday 10:00 a.m. to 4:00 p.m.

Phone Number:

(608) 410-2700 Option #1 Appointments
Option #2 Prescription Refills
Option #3 Triage Nurse

CONTACTING THE DEPARTMENT AFTER HOURS:

An Oncologist is available for problems and emergencies after the department is closed and on weekends. To reach this physician, call one of the numbers below. The physician will be notified and return your call. *(If your call is not returned within 20 minutes, please call again)*

608-410-2700 Or 608-252-8000

SYMPTOMS YOU NEED TO REPORT

Written information on the drugs that you will receive and their potential side effects will be given to you. The physicians and nurses are familiar with these side effects and will help you manage them should they occur. It is important to contact the Oncology department if you have concerns so that minor problems do not get worse.

Occasionally patients may have symptoms from chemotherapy that can be serious. If you are experiencing any of the following:

- **Fever** (101⁰ or higher)
- **Shaking chills**
- **Acute (new/different) shortness of breath, wheezing, dizziness or extreme fatigue**

Call the Oncology department immediately: (608-410-2700).

After 5:00 pm or a weekend, contact the Oncologist on-call immediately: (410-2700 or 608-252-8000).

The following symptoms should be reported to the Oncology department during clinic hours. It is important that you report these so they don't become serious.

- Bleeding gums, blood in the stool, blood in the urine, a bloody nose that lasts more than 5 minutes or tiny red or purple spots on your arms or legs.
- Mouth sores, sore throat or blisters on the lips
- Headache, dizziness, confusion or changes in vision
- Diarrhea with cramping or pain or more than 5 stools in one day.
- Constipation – two or more days without a bowel movement
- Nausea that prevents you from eating or drinking for more than 24 hours
- Vomiting more than twice in one day
- Problems urinating, pain, burning or urgency with urination
- Injection or venous access device(PICC line, Groshong, implanted port) site that is tender, red, swollen or has increased warmth.
- Rash, hives, blisters or severe itching
- Feeling so tired that it gets in the way of daily activities
- New pain or pain that is not controlled with present pain medication

EMMI

Dean Hematology and Oncology has partnered with St. Mary's Hospital to provide an on-line educational tool, EMMI, to learn about your treatment and other health topics. This on-line program may be accessed as many times as you like and is available to patients and family members. There are multiple programs to view, including one on chemotherapy and radiation therapy. If you would like to view a program not currently on our list, it can be added. To get started, just give the nursing staff your email address. You will then receive an email with instructions for logging on to EMMI.

SUGGESTIONS FOR HELPING YOU TOLERATE TREATMENT

- **Drink plenty of fluids** to keep hydrated, especially on days when you don't feel like eating. Some treatments require increased fluid intake to reduce kidney or bladder irritation, your nurse or physician will inform you of this.
- Eat well-balanced meals. Eat small meals every two or three hours rather than large meals. Focus on high calorie foods that are high in protein.
- Keep something in your stomach all the time; it may help to prevent nausea.
- Budget your energy and rest when you need to. Save some energy for having fun.
- Talk with your physician before taking aspirin or ibuprofen. You may take Tylenol (Acetaminophen) if needed for minor pain. Read labels, many over-the-counter medications contain aspirin or ibuprofen.
- Tell your physician **all** of the medications you are taking, even herbal products and over-the-counter medications
- Do not drink alcoholic beverages.
- Check with your physician or nurse before having any dental work done, routine cleaning can introduce bacteria into your body and cause an infection.
- Get some exercise daily; a short walk for example.
- Prescriptions sent in the mail can take 4-5 days. Call for a refill before your prescription runs out or ask for a refill at your appointment.
- To help balance the emotional ups & downs you may experience, take advantage of support groups or the psychiatric and social service resources offered in the clinic.
- If you or your family is interested in information on Advanced Directives, Health Care Power of Attorney or Do Not Resuscitate Bracelets, ask to meet with the department Social Worker.

CANCER TREATMENT WITH ORAL MEDICATION

Some treatments for cancer may be given using oral medications or a combination of intravenous and oral medication. Oral medicines come in the form of capsules, tablets or liquid.

How to take the drug:

- Limit contact with the medication; wash your hands before and after handling.
- Some oral medications must be taken with food. Others need to be taken without food or a specific time before or after a meal. Instructions when to take your medication will be provided.
- Swallow each tablet or capsule whole; do not chew or crush them.
- If a dose is missed, take it as soon as possible. If it is almost time for your next dose, skip the missed dose and go back to your regular dosing schedule. Do not double the dose.
- Difficulty taking medication, intolerable side effects or the inability to swallow the medication should be reported as soon as they occur. Changes in your treatment plan may need to be made before your next appointment.
- Dissolving medications in liquid should be done using disposable cups. The used cups should be placed in a biohazard bag that will be provided. Return the bag to the clinic for proper disposal.
- It is important to take the drug on schedule at about same time every day. Oral treatment doses are scheduled so that a constant level of the medication is in your body to attack cancer cells.
- Nausea or vomiting which keep you from taking your medication should be reported. Anti-nausea medication may need to be taken along with the oral medication. Storage:
- Keep medication in the original container, stored in a safe place, away from other family medications. Do not combine your treatment medication in a pill box with other medications.
- Most oral treatment medications are stored at room temperature. Keep them away from excessive heat and moisture. Do not store them in the bathroom. Instructions for medication that requires special storage or handling will be provided.
- Return empty containers and unused medications to your pharmacy for proper disposal.

Body wastes:

- Flush the toilet twice after using and continue to do so for at least 48 hours after the last medication dose.
- Caregivers should wear gloves when handling body waste (urine, vomit, or stool).

BLOOD COUNTS AND TREATMENT

Blood cells are produced inside the bone, in the spongy tissue called **bone marrow**. Bone marrow may be affected by treatment because the blood cells are not able to mature; as a result blood counts decrease.

This decrease is an expected side effect of some drugs and usually occurs 7 to 10 days after treatment. Bone marrow generally recovers within 10 to 14 days and blood counts begin to increase. If counts do not increase enough before the next scheduled treatment, your physician may recommend treatment be delayed, the dose decreased or add a medication that stimulates the bone marrow.

Your physician may order a blood test to measure your blood counts before your treatment and occasionally between treatments. This blood test reports the amounts of three different blood cells.

WHITE BLOOD CELLS are infection fighting cells. When your WBC count is low it is called neutropenia. If the number of white blood cells decreases significantly after a treatment, you may be at a higher risk for developing an infection. Infections can be serious and come on quickly if your white blood count is very low. One sign of an infection may be a fever. Shaking chills may occur before the temperature increases. If your temperature is 101⁰ or higher any time between treatments, call the Oncology department immediately. It is not necessary to take your temperature every day, however if you are not feeling well, it is important to monitor your temperature and report any fever of 101⁰ or higher.

RED BLOOD CELLS are the cells in your body that carry oxygen to the organs and tissues and carry the carbon dioxide away. When the red blood cell count is low, it is called anemia. Anemia is measured by the hemoglobin, which is the part of the red blood cell that carries the oxygen and contains the iron and by the hematocrit which is the percentage of the blood made up of red blood cells. When there are too few red blood cells, body tissues do not get enough oxygen to do their work. It may make you feel short of breath, weak and tired. Anemia can be mild or severe. In cases of severe anemia, a blood transfusion may be required. Symptoms of severe anemia are extreme fatigue, shortness of breath, headache, dizziness or feeling as though your heart is pounding. Call the Oncology department if you have any of these symptoms. You may need to have a blood test to evaluate the need for a transfusion.

PLATELETS are the “sticky” cells that help your blood clot. Platelets can also be affected by cancer treatments. You may bleed or bruise easily, even without an injury. If you notice bleeding gums, have a nose bleed, blood in your urine or stool, excessive bruising or tiny red or purple dots on your arms or legs, contact the Oncology Department.

PAIN MANAGEMENT

Patients with cancer may sometimes experience pain. It may be a result of medical tests, tumor pain caused by pressure on the tissues, nerves, bones or spinal cord or from surgery, treatment or radiation. Helping you achieve good pain control is an important part of your Oncology treatment.

One or more of the following methods may be used to control pain; medication, acupuncture, biofeedback, distraction techniques, heat and/or cold, imagery, meditation, relaxation exercises, and massage among others.

If you have pain or if your pain is not controlled with the medication(s) you are presently taking, your medications may need to be evaluated, increased or changed to give you better control. Pain is rated on a 0-10 scale, 0 being no pain at all, 10 being the worst pain imaginable. Proper pain management would have your pain rated no higher than a "1 or 2".

Pain Management Diary

It may be helpful to keep a pain management diary (included in your patient packet). This will help document when pain occurs, location, intensity, what medications or other actions are used to control the pain, if they are effective and if so how long it took for the pain to be controlled. This can be helpful when adjusting or increasing pain medications or determining a trend in your pain.

Medication Pain Control

Often, over the counter medications like Tylenol (acetaminophen) will control pain. Do not use Ibuprofen or Aspirin if you are receiving treatment unless you discuss it with your physician first. Both can increase the risk of bleeding.

If Tylenol is not an effective pain reliever, your Oncologist may prescribe a narcotic such as; hydrocodone/APAP(Vicodin), oxycodone/APAP(Percocet), Tylenol with Codeine(Tylenol #3) or hydromorphone (Dilaudid). These medications are usually taken every 4-6 hours and work better when they are taken on a schedule. You may also use these medications to supplement long acting pain medication for break through pain.

If your pain is not controlled using the medications above on a schedule, you may be prescribed an extended release pain medication such as Morphine ER, Methadone or Oxycodone ER which is most often taken every 12 hours. A patch, Fentanyl is another long acting pain medication that works for 72 hours. You may be told to continue the short acting pain medication above for break through pain.

Constipation can be a side effect of many narcotic pain medications. Review the information on constipation in this packet to prevent and/or manage constipation.

Prescriptions

In most cases, pain medications require a written prescription. Plan ahead so you will not run out of medication, especially on weekends and holidays. Request a prescription when you meet with your physician. If you will be out of medication before your next appointment, call Dean Clinic Hematology and Oncology (608-410-2700) Monday-Friday 8:00 am – 5:00 pm to arrange for a refill. The written prescription may be:

- mailed to you
- mailed directly to your pharmacy (please allow 4 or 5 business days for the written prescription to reach you or your pharmacy)
- picked up at the clinic (please call in advance so it will be ready)

Non Medication Pain Control

(From National Cancer Institute Support for People with Cancer – Pain Control)

Available in the Oncology resource area

Acupuncture is a form of Chinese medicine. It involves inserting very thin metal needles into the skin at certain points of the body to change the body's energy flow so it can heal itself.

Biofeedback uses machines to teach you how to control certain body functions. Controlling your heart rate, breathing and muscle tension may help you relax and cope with pain.

Distraction is focusing on something other than the pain. It may be used alone or with medications or while waiting for pain medications to take effect.

Heat and cold can both be used to treat pain. Heat may relieve sore muscles and cold may numb the pain. Either should not be used for more than 10 minutes at a time.

Hypnosis is using a trance-like state of relaxed and focused attention. Hypnosis can be used to block the awareness of pain or to help you change the sensation of pain to a more pleasant one.

Imagery is using your mind to create images to help you relax, feel less anxious or sleep. Thinking of a place or activity that made you happy in the past and concentrating on that may help reduce your pain.

Massage may help with pain, anxiety, fatigue and stress. It is rubbing and kneading parts of the body with hands or special tools.

Meditation and Relaxation are both methods of relaxing the body and quieting the mind. Meditation is focusing attention of something like a word or phrase, an object or breathing. Relaxation reduces pain or keeps it from getting worse by removing tension in the muscles.

Other Methods include physical therapy, Reiki, Tai Chi and Yoga. More information is available on these methods in the NCI Pain Control booklet.

FATIGUE

Fatigue is the most frequently reported symptom of cancer and cancer treatment. Fatigue is a feeling of profound tiredness that does not go away with 8-10 hours of sleep. This type of fatigue is different from the fatigue of everyday life. It is caused by many factors: treatments, loss of appetite, lack of exercise, physical problems, mental stress, pain or other problems of daily life. It may make you feel weary or exhausted, physically or emotionally, make it hard to concentrate, think clearly or remember things. Planning ahead for activities and light exercise may help cope with fatigue and manage symptoms

- Rest - Rest and sleep are important, however too much rest can decrease your energy level and actually make you feel more tired.
- Activity – Be as active as you can. Regular exercise such as walking several times each week may help. It may help to exercise early in the day.
- Conserve energy – Spread other activities throughout the day and take breaks. Do not force yourself to do more than you can manage. Listen to your body.
- Budget energy - so you may participate in activities that you enjoy and make you feel good.
- Nutrition – It is important to eat well and drink plenty of fluids to provide your body with the nutrients it needs to repair itself.

Fatigue is generally resolved once your body recovers from treatment.

Tips for managing schedules/fatigue

Bathing:

- Wash hair in the shower
- Use a terry robe instead of drying off.
- Use an organizer over the shower head to avoid leaning and reaching.
- Install a grab rail.
- Use a shower bench or lawn chair to sit while showering and drying off.
- Use a hand held shower attachment while sitting.
- Use moderate temperature water, rather than hot.
- Use a long handled sponge or brush to reach feet and back.

Grooming/hygiene:

- Sit.
- Rest elbows on counter or dressing table.
- Use long handled brushes or combs to avoid holding arms overhead.
- Use elevated commode seat.

Dressing:

- Loose fitting clothing allows you to breathe easily.
- Organize and lay out clothes before dressing to avoid extra steps.
- Use a long handled shoe horn and sock aid or wear slip on shoes
- Fasten bra in front then turn to back.
- Wear button front shirts rather than pullovers.
- Use a reacher and/or a dressing stick.

Mobility:

- Wear low heel shoes with a shock absorbent sole or insole.
- Use a wheelchair for long trips
- Use cruise control whenever possible.
- Install hand rails and ramps.
- Place chairs strategically to allow rest stops (i.e. along a long hallway).
- Disconnect automatic door closing mechanisms.

Housekeeping:

- Spread tasks throughout the week and do a little each day.
- Hire household help if possible or delegate heavy work.
- Use a wheeled cart or carpenter's apron to carry supplies.
- Do as many tasks as possible while sitting.
- Use long handled dusters, mops and dust pans.

Shopping:

- Make a list organized by store aisle.
- Use the grocery cart for support or use a power scooter if the store has one.
- Request store assistance with shopping and getting to the car.
- Order groceries on line and have delivered.
- Shop at less busy times.
- Shop with a friend or ask someone to shop for you.

Meal preparation:

- Assemble all ingredients before you start.
- Use mixes or pre-packaged foods.
- Use cookware you can serve from.
- Use small appliances such as mixer, toaster oven, microwave, can opener or electric knife.
- Buy ergonomically designed utensils.
- Transport items on a rolling cart.
- Store frequently used items at chest level to avoid bending and stretching.
- Line ovens and burner drip pans with aluminum foil.
- Sit while preparing food.
- Let dishes soak rather than scrubbing and let dishes air dry, use a dishwasher or delegate dishwashing.
- Use mitten pot holders to take advantage of the entire hand to lift.
- Prepare double portions and freeze half for later.
- Leave heavy containers where they can be accessed without lifting (On the counter etc.)
- Drag garbage bags instead of lifting (or use a wheeled can).
- Use a jar opener.

Laundry

- Use a laundry cart on wheels.
- Sit to transfer clothes to the dryer
- Wash bras and socks in a lingerie bag to avoid tangling.
- Drain hand washables and press the water out instead of wringing.
- Use a lightweight iron and sit to iron.
- Hang clothes on the doorknob instead of the top of the door.

Childcare

- Plan activities around a table or in the living room to allow you to sit.
- Delegate childcare responsibilities if possible.
- Teach smaller children to climb up on lap instead of being lifted.
- Teach children to make a game of some of the household chores.

Workplace

- Plan workload around your best times of the day.
- Arrange workspace ergonomically.
- Take periodic rest breaks.

Leisure

- Use adaptive equipment, a wheelchair or golf cart.
- Select less strenuous activities.
- Go with a friend who can help.

SEXUALITY AND CANCER

Cancer affects an individual's total being, including physical, emotional, spiritual and sexual wellness. Sexuality is an important part of everyday life. Intimacy may be altered due to fatigue, pain, physical or psychological factors, treatments and medications. Keep in mind that a kiss, hugging, sitting together and holding hands between you and your partner is possible, regardless of the effects of cancer treatment. There are many myths about cancer and sexuality. Keep in mind that the most important part of sexuality is good communication and that cancer is not contagious, sexuality does not make cancer grow and abstinence cannot cure cancer. Talking to someone about your concerns may be helpful. If you would like, your physician or the nursing staff can facilitate an appointment to meet with one of our counseling staff.

FERTILITY PRESERVATION

When facing cancer, survival is most important. Some cancers and treatments used to fight cancer can cause infertility which may affect your ability to have children. Making decisions about your fertility may need to be made before you start treatments.

There are several options for both men and women to preserve fertility. These options should be discussed with your Oncologist. You can then be referred to a fertility specialist to find out what is available for your particular situation.

The organization fertileHope is a resource on fertility for cancer patients. There is a pamphlet available in the reception area which may answer some of your questions. Additional information is available on their website at www.fertilehope.org or you can call them at 1-866-965-7205.

NAUSEA

Nausea and/or vomiting may be side effects of some treatment drugs. It is caused by the destruction of rapidly dividing cells lining the gastrointestinal tract. Most nausea occurs within the first 24 – 48 hours after treatment. Not all medication causes nausea. If the drugs you receive may cause nausea, you will be given anti-nausea medication. Nausea is easier to prevent than it is to get rid of, take anti-nausea medications on a schedule. Continuing to drink plenty of fluids; eating slowly; small, frequent meals and avoiding alcohol may decrease the symptoms of nausea.

Anticipatory Nausea – Sometimes nausea can occur even before a treatment or appointment. Your brain remembers how you felt after previous sessions and anticipates feeling that way again. To prevent this from happening or decreasing the amount of nausea:

- Try to distract yourself during the activities you associate with your treatment.
- Practice relaxation or meditation techniques.
- Change something in the environment or routine.
- Ask to speak with our counseling staff for assistance and ideas.

Anti-Nausea Medications:

If your physician prescribes a treatment that may cause nausea or vomiting, in addition to anti nausea medication before treatment, you will be a prescription for an anti-nausea medication to take at home. The most common medications for nausea are:

- **Compazine (prochlorperazine) oral or also available as a suppository**
- **Lorazepam(Ativan)**
- **Ondansetron(Zofran)**
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****Do not** take more than one anti-nausea medication at the same time, **unless** you check with your physician or nurse.

Remember:

If you have **nausea or vomiting** that is persistent and prevents you from eating or drinking, or lasts for more than 24 hours, call the Oncology department. Changing medication or adding other anti-nausea drugs may be helpful.

Other suggestions for controlling nausea and vomiting are:

- Eat small, frequent meals and eat and drink slowly.
- Taking a walk after a meal.
- Drink fewer liquids with meals to avoid a full, bloated feeling.
- Drink ginger ale (make sure it is real ginger and not artificial), ginger tea or take ginger in other forms. Half a teaspoon of ground ginger a day can significantly reduce nausea associated with cancer treatment when used in combination with standard anti-nausea drugs.

- Suck on ice chips or popsicles.
- If possible, let someone else do the cooking, or do not be in the area where food is being prepared.
- Take anti-nausea medication and eat some crackers or dry toast before getting out of bed in the morning.

If you are vomiting:

- Begin a clear liquid only diet; clear soups, flavored gelatin, popsicles, ice chips or carbonated liquids.
- Avoid dairy products.
- Avoid extreme temperatures of beverages.
- Continue to drink fluids to avoid dehydration. If necessary, take only one to two tablespoons of liquid every 10 to 15 minutes and then increase slowly as tolerated.
- Sip liquids slowly through a straw.
- Continue anti-nausea medications: if you cannot keep anti-nausea medications down, you may need to switch to an anti-nausea suppository (call the Oncology department to get a prescription).
- Maintain good mouth care to remove the taste and sensation of vomiting

HYDRATION

If nausea, vomiting or diarrhea occurs, the loss of valuable body fluids can cause dehydration. It is important to drink fluids throughout the day. This can be in the form of water, juice, coffee, tea, milk, gelatin, broth, popsicles or soda.

To increase your fluid intake:

- Keep fluids handy - by your chair or bedside.
- Eat foods that contain fluid such as broth, gelatin, and popsicles.
- Eat fruits and vegetables - they are 95% water. Fruits such as grapes, watermelon, canned peaches, pears, and fruit cocktail will help you stay hydrated.
- Sip some fluid every 15 minutes - the amount will add up throughout the day.
- Maintain good mouth care - liquids will taste better.
- Beverages such as Gatorade or Pedialyte replace fluids and electrolytes which are often lost during diarrhea and vomiting, however soda or sugar-containing drinks should be used in moderation.

MOUTH AND THROAT PROBLEMS

Mouth problems may occur with some treatments. Keeping your mouth in good condition may minimize problems.

Inspect your mouth daily.

- Consult your dentist about any dental problems **before** the start of chemotherapy.
- Keep your mouth clean. Brush your teeth after meals and at bedtime using a soft-bristled toothbrush. Do not damage the soft tissue of your mouth by brushing too hard.
- Floss gently every day.
- Cleanse dentures or bridge thoroughly. Rinse mouth while dentures/bridge is out.
- Avoid irritants: (e.g. alcohol, tobacco, spices, acidic foods, extreme temperatures of foods/fluids, and scratchy foods).
- Keep mouth, throat, and lips moist. Sip liquids every few minutes and apply lip lubricant frequently to prevent dry lips or cracks at the corners of the mouth. Chapstick®, Vaseline® or lanolin are good choices.
- **The best mouth wash to use is salt water (1 teaspoon salt in 1 cup of warm water)** Commercial mouthwashes should be avoided since they contain alcohol and may dry or irritate your mouth
- Rinse mouth frequently (at least 4 times per day).
- Use a straw to drink fluids
- Eat foods that are cool or room temperature.

If your mouth becomes red, tender or swollen, or you experience a burning sensation, become more diligent in your mouth care.

- Do gentle mouth cleaning with soft toothbrush every two hours.
- Increase sips of water throughout the day.
- Salt water rinses may help relieve thick saliva or crusts in your mouth. Mix 1 teaspoon of salt in one cup warm water, swish and spit 4-8 times/day

If your mouth/throat becomes painful:

- If you see red sores or white patches (like cottage cheese) it may be an infection that must be treated with medication. Call the Oncology department and continue careful mouth care.
- Continue drinking fluid to maintain hydration. If mouth pain is keeping you from drinking or eating, a medication can be prescribed to numb your mouth and make you more comfortable.

- Certain foods will irritate an already tender mouth and make chewing more difficult. It may be necessary to temporarily stop foods or liquids that can irritate your mouth such as citrus fruits (oranges, grapefruit, lemons, etc), tomato sauces or juice, spicy or salty foods, raw vegetables, granola or foods that are rough.
- Make foods easier to swallow by using a blender.
- Suck on ice chips
- Use butter, margarine, gravy, sauces or broth on foods
- Soften and moisten food by dunking it in a beverage
- Eat soft foods that are easy to chew and swallow and increase calories such as:
 - Milkshakes
 - Bananas, applesauce, watermelon and other soft fruits
 - Mashed potatoes or noodles – add gravy, cheese, broth or sauces for calories
 - Yogurt, custard, cottage cheese
 - Eggs (scrambled, poached, soft boiled)
 - Pudding, popsicles, gelatin
 - Oatmeal or other cooked cereals
 - Pureed or mashed vegetables, meats or baby food

Dry Mouth

Dry mouth may occur after treatment which may make it difficult to chew and swallow.

- Sip water or other beverages through a straw throughout the day to make it easier for you to talk and swallow
- Thick drinks such as fruit nectars should be at room temperature or cold
- Avoid salty foods
- Eat and drink tart foods and beverages, such as lemonade (in small amounts) which may help your mouth produce more saliva.
- Suck on ice chips/cubes, hard candies, popsicles or chew sugar free gum
- Use a cool mist humidifier to moisten the air in your home

NUTRITION

Nutritional recommendations for cancer patients are designed to build strength to withstand the effects of cancer and treatment. **Now is not the time to diet.** Recommendations focus on higher calorie foods that emphasize protein and may include eating or drinking more milk, cream, cheese and cooked eggs. Increasing the use of sauces and gravies or changing cooking methods to include more butter, margarine or oil may be recommended. Good nutrition starts with basic nutritional principles. Eat foods from all food groups; grains (breads and cereals), fruits, vegetables, milk/dairy products, and meats/protein. Fats and oils are technically not considered a food group, but depending on your situation, may play a large role in your nutrition plan. Extra nutrients are needed to repair tissue and maintain weight so your body does not break down tissue to obtain the calories it needs.

It may help to speak with a Dean Clinic Registered Dietitian if you have questions about special diets (adding calories, increasing protein, or decreasing fat or fiber). An appointment can be arranged by our reception staff. Registered Dietitians are available at Dean Clinic West, East, Sun Prairie, Fish Hatchery and Riverview Clinics. Additional information is also available at www.cancerRD.com.

On the day of treatment, eat a light meal. After treatment eat bland foods, avoid high fat, spicy, fried or greasy foods for the first 24-48 hours. Maintaining hydration with water and other fluids is also essential!

Loss of appetite

Loss of appetite may be caused by stress, depression, nausea, vomiting, sore mouth, difficulty swallowing, or the cancer itself. When your appetite no longer motivates you to eat:

- Eat 5-6 small meals/snacks a day instead of three large meals.
- Take advantage of when you feel well by eating well and fixing food to store in small portions for later use and keep healthy snacks handy for nibbling (carrots, celery, raisins, cheese, raisins, yogurt, crackers)
- Eat most of your protein and calories early in the day.
- Use liquid or powdered nutritional supplements.
- Light exercise ½ hour before meals may help stimulate your appetite.
- Make use of timesavers - frozen dinners served with milk, fruit and bread can be a very nutritious meal or use canned soups, sauces and gravies.
- Take a few bites of food and sips of liquid every hour which may help you get more protein and calories throughout the day.

Even if you don't feel like eating solid foods, continue to consume liquids. Juice, soup and other fluids can give you important calories and nutrients. Sports drinks, broth, tea, water, popsicles, fruit ices, honey, ice cream, pudding, applesauce and gelatin are also recommended.

Weight Gain

Some cancer patients may actually gain weight during treatment. Because of this, many recommendations for breast cancer patients do emphasize a lower fat diet. Making an appointment with a registered dietitian may be helpful to educate you regarding a low-fat diet or get you back on track to a healthier weight.

Altered sense of taste and smell can be a side effect of chemotherapy.

- In addition to the suggestions below, maintaining good mouth care is essential. Brushing your teeth several times a day and rinsing your mouth may help control taste alterations.

For sweet taste alteration:

- Use coffee or a sour fruit juice to mask the sweetness
- Vegetables may be more appealing than fruits
- Avoid concentrated sweets

If food tastes bitter:

- Add honey or sugar to foods or beverages
- Eat bland foods like chicken, fish, eggs, tofu or dairy products
- Eat meats cold or at room temperature or substitute eggs and dairy products

If foods taste metallic:

- Do not eat foods from a can, use fresh or frozen meats, vegetables and fruit
- Do not use metal pans to prepare food
- Use plastic utensils when eating

If foods taste unusual:

- Use stronger spices/seasonings; basil, garlic, oregano, rosemary or mint or add bacon bits, sliced almonds, ham strips or onions for added flavor
- Eat salty food
- Eat starchy foods such as bread, potatoes, rice or plain noodles
- Add a dietary supplement. Some examples are Ensure, Boost or Carnation Instant Breakfast.
- Use of lemon, lime, orange juice, lemonade or vinegar may enhance flavors.
- Marinate meat in fruit juice, use Italian dressing or sweet/sour sauce to alter the taste

DIARRHEA

Diarrhea is any change in your usual bowel movements including an increase in the number of stools, or stools that are more loose, soft or watery. It can result from many causes, including cancer treatment, radiation therapy, some medications, infection or emotional upset. When you have diarrhea, food passes through the intestine more quickly and important nutrients are not absorbed. You also lose important fluids which are necessary to maintain body function. If you have diarrhea you should drink at least 8-10 (8 oz) glasses of fluid a day to prevent dehydration.

At the first sign of diarrhea:

Take the over-the-counter anti-diarrhea medication **Imodium AD®**. Take as directed below instead of the directions on the package.

Imodium AD® Instructions

First Dose: Take 2 caplets at the first sign of diarrhea

During the Day: Take 1 caplet every 2 hours

Bedtime and at night: Take 2 caplets at bedtime and every 4 hours until morning

Stop taking Imodium AD when you have not had diarrhea for at least 12 hours

- If diarrhea persists after taking Imodium AD® or becomes watery or frequent (more than 5 bowel movements a day) call the Oncology department. A prescription anti-diarrhea medication may be added.
- Continue drinking fluids, to avoid dehydration.
- Avoid fatty foods, caffeine, nuts, beans, milk and dairy products.
- Decrease your intake of foods that are high in roughage (i.e. - grains, fresh fruit and vegetables).
- Try to eat non-spiced applesauce, bananas, rice, and dry toast.
- Call if stools are black or have blood in them.
- Avoid or discontinue using laxatives and stool softeners.
- Use creams or ointments (such as A&D ointment) to protect the anal area.
- Use hemorrhoid treatment as needed.
- Take warm baths to decrease discomfort caused by diarrhea.
- Avoid sugar-free candies and gum containing sorbitol (has a mild laxative effect).
- Avoid caffeine
- Drink liquids at room temperature.

CONSTIPATION

Constipation can be a problem at any time during your treatment. It may be caused by a diet without enough fluid or fiber, drugs, pain medications or treatment. You should only be concerned if you notice a difference from your normal routine. Stool softeners such as Colace® or Surfak® are very helpful. Constipation may also decrease your appetite. Increasing fluid intake and exercise may assist with constipation. If it has been 48-72 hours without a bowel movement, call the Oncology department for assistance.

Everyday:

- Drink prune or other fruit juices to assist with constipation relief.
- Eat foods high in fiber such as bran, whole grain cereals, fresh raw vegetables and fruits, potatoes with skins, prunes carrots, oranges and berries, fresh fruit, beans, grains, figs, raisins, apples, pudding and popcorn can keep you regular.
- Exercise each day, a short walk for example.
- Take a stool softener daily. Choose one of these:
 - 1) Colace (Doxinate, Dioctyl), 1 capsule, twice a day, increase to 6 capsules a day as needed.
 - 2) Surfak (Docusate calcium), 1 tablet, once or twice a day.

If you go even one day without a bowel movement, take a laxative:

- Dulcolax® (bisacodyl), 1 or 2 tablets, one to three times a day.
- Milk of magnesia, 2 or 3 tablespoons, once or twice a day.
- Senokot®, 1 or 2 tablets, one to four times a day.

If you go a second day without a bowel movement, take another laxative:

- Magnesium citrate, drink half the bottle and wait for 1 hour. If no results, drink the second half.
- Call the office with results.
- Dulcolax or glycerin suppository.
- Fleets enema.

In general, if one type of laxative does not work, add a second or third type without stopping the first. Since constipation associated with pain medication and treatment can be more difficult to treat, you should follow the above directions and not the directions on the laxative packages.

HAIR CARE

Hair loss may be a side effect of cancer treatment and can lead to a loss of self-esteem and self-confidence. Some drugs cause hair thinning to varying degrees; others are likely to cause near total hair loss. Hair loss/thinning typically start 2-3 weeks after your first treatment. It can occur on all parts of the body, including the head, face, arms, legs, underarms, pubic area, eyebrows and eyelashes. Hair usually grows back after the treatments are completed

Some suggestions to minimize hair loss:

- Avoid excessive shampooing. Use mild shampoo and conditioner or baby shampoo.
- Blot hair gently with a towel.
- Avoid electric hair dryers. If necessary use low heat.
- Comb your hair gently.
- Avoid hair spray, dye and permanent waves.
- Do not use electric curlers, curling irons, hair clips, bobby pins, elastic bands.
- Use a satin pillow case to reduce tangles.
- Consult your hairdresser for suggestions on styles that make your hair look thicker.

When you are getting drugs where near total hair loss is expected:

- Wear a hair net to minimize shedding hair on bed or clothing.
- Have your hairdresser cut your hair very short.
- Use accessories that conceal hair loss, such as bandanas, scarves and hats.
- You may want to get a wig. You may want to look for a wig before you lose your hair, so you can select one to match your hair color and style.

Visit these websites for more information:

www.paulayoung.com

www.chemosavvy.com

www.tlcdirect.org

SKIN CHANGES

Some drugs may cause skin changes. A mild to moderate rash on the face, neck or trunk of the body can be a common side effect from these drugs. The rash might look like acne, it is not. Acne medications are not recommended due to their potential to dry skin. The rash may come and go and usually clears up once treatment is completed. Tell your physician or nurse about any skin changes. Additional written information is available.

Recommendations for skin changes:

- Discuss any skin conditions you have with your physician prior to beginning treatment.
- Tell your Oncologist about any over the counter medications you are taking.
- Take short, lukewarm baths and showers and avoid scrubbing,
- Oral or topical antihistamines (Benadryl, hydrocortisone cream) may help relieve itching
- Pat your skin dry instead of rubbing.
- Avoid hot tubs, steam baths or saunas.
- Relieve or reduce dryness with non-irritating (free of perfumes and dyes) moisturizers.
- Avoid detergents and household cleaning products or skin care products that contain alcohol or other harsh additives.
- Wash clothes in a mild detergent and double rinse to remove any soap residue.

NAIL CHANGES

Treatments may cause finger and toenail changes. Red, swollen or tender nails are more likely to develop 4-8 weeks after treatment. Tell your physician or nurse about any changes. Additional written information is available

- Keep your fingernails cut short.
- Moisturize well and wear soft mittens on your hands and socks on your feet, especially at night.
- Do not use artificial nails because of the risk of trapping bacteria and fungus
- Avoid biting fingernails.
- Avoid wearing tight shoes as they can exacerbate toenail changes.
- Liquid bandages may be beneficial for nail fissures.
- Oral or topical antibiotics may be necessary if bacterial infections occur.

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