

- Unless you are told otherwise, don't worry about a balanced diet for the patient. Concentrate on variety, deliciousness and small but more frequent meals.
- Don't worry about conventional foods for each time of day. It's never too late for breakfast or too early for pudding if that is what the ill person feels like.
- Do accept offers of help with food from friends and extended family. It is a wonderful treat for a carer to eat a meal, or even have a cup of tea, when someone else has prepared it.
- Don't deny yourself the pleasure of eating with friends. Ask them over, either bringing a prepared meal or the ingredients to cook together.
- When people say, "Can I help?" suggest that they bring food, such as prepared food for the fridge or freezer, fresh fruit or treats, or take-away food such as sandwiches, fish and chips, Asian takeaway etc. Busy friends who are on their way from work will welcome these suggestions.

If the patient is very ill

Sometimes there is little role for solid food. Present tiny amounts of any desired foods or special treats, and whatever drinks are wanted. Express your care by keeping the ill person's mouth and lips moist, rather than by trying to feed a person who does not want food. Do not give food or drink to someone who finds it difficult to swallow. Ice chips, a wet flannel to suck, or artificial saliva can help the person's feeling of a dry mouth. Lanoline or

peppermint lip cream will help their lips to stay moist. Ask the palliative care nurse to show you how to clean and hydrate the mouth with swabs.

Remember, food is about caring, sharing and enjoying. In palliative care especially, food is about comfort.

Palliative Care

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about

Nutrition in Palliative Care

Information and Advice for Carers

Food is not just essential for life, but is a major source of pleasure and an important part of the way in which we show care, share celebrations and strengthen the bonds of family, friendship and society. Carers often worry about how to meet the ill person's nutritional needs. It is important to focus on food as a source of pleasure, a way of showing care and a way of sharing daily life, rather than just as nourishment for the body.

If the person you are caring for is anorexic (loses his or her appetite) make sure that the palliative care (pc) team knows so that any treatable causes (constipation, nausea, mouth sores etc.) can be managed. Ask for an explanation of the probable causes of decreasing appetite, and make sure that you understand the role of nutrition in the ill person's care.

Carers need to understand the ill person's particular and changing needs. It can be distressing for the ill person to be urged to eat more than he or she wants and distressing for the carer to prepare a nourishing meal that is rejected because of the patient's anorexia or intolerance of certain foods. Remember to blame the patient's illness rather than ingratitude or any defect in the food. Try to accept the idea that the patient may not be able to eat much and may be somewhat fastidious.

On the other hand the ill person may need extra nutrition, or food with high nutrition for the amount of effort involved in chewing, swallowing or digesting it. Discuss your attitudes to food with team members until you feel that you see the patient's needs clearly. If you have continuing worries or feelings of frustration or rejection around food issues, ask for referral to a dietitian.

Check whether or not the patient needs nutritional supplements such as Ensure® Sustagen® etc. These are available from pharmacies and some supermarkets. Some veterans may be eligible for subsidy, or you may ask your pharmacist to consider reducing the price if cost is a problem.

The Carer's needs

Caring for an ill person is physically and emotionally demanding, and the carer's need for a balanced, varied and nutritious diet may actually increase during the period of care giving. At times of acute stress, such as receiving bad news, you can eat what you like, with an emphasis on varied drinks and soup, comfort foods and those that are easy to prepare and digest. Unbalancing your diet for a day or two will not harm you. At all other times you need to eat as well as you possibly can.

For the patient with limited appetite

Encourage the ill person eat in as normal a situation as possible. Walking to and from the dining table can be good exercise. A glass of wine (with the doctor's permission) can both stimulate appetite and increase enjoyment.

Try to plan meals so that they can be shared with the patient. For example, prepare a full hearty first course for yourself, followed by a delicate, shared, dessert. Or share soup or sandwich with the patient, but have both yourself. Breakfast is an easy meal to share, because both carer and patient can have toast or cereal, stewed fruit yoghurt etc, the only difference being in quantity. If it is not practical for the patient to share meal times you may want to make morning or afternoon tea into a time of sharing.

The rituals of taking food and drink satisfy emotional as well as bodily needs.

Adding nutrition to easily prepared and eaten meals

Fortify milk-based drinks with powdered milk, silken or soft tofu (soy protein) etc. Fruit added and blended makes a smoothie. Cooked sweet potato, pumpkin or squash can be used the same way. Add olive oil, canola oil or butter to cooked vegetables and other dishes. Add wheat germ to tomato or mixed vegetable juice, to make instant soup.

Cook vegetables in chicken stock (read the label to ensure quality, or make your own).

Use mashed avocado as well as the usual spread on sandwiches. Include nuts such as almond meal in baked foods. Make use of sesame seeds (halva and tahini) hazel nut spread etc.

For more information contact the Cancer Council of Victoria Helpline on 13 11 20.

Some practical points

- Use the microwave. Microwaves generate fewer cooking smells.
- Explore the supermarket's stock of single portion frozen meals both for yourself and for the patient. Read the labels and pass up those that have additives you don't want.
- There is room for fun foods, treats, sweets & chocolate in the ill person's diet. Foods are a source of pleasure not just because of smell, taste & texture, but also for their meaning and the memories evoked.