

Your diet and lifestyle

Living with and beyond bowel cancer



About this booklet

This booklet is for you if you have been diagnosed with bowel (colorectal) cancer and you want to find out more about how a healthy diet and lifestyle can help you.

The booklet describes how diet and physical activity can help you cope with the symptoms of bowel cancer and the side effects of treatment. It includes a food and symptoms diary for you to fill in to help you find out how different foods affect you.

Not all of the information will be relevant to everyone with bowel cancer so you may want to just read the sections that you're interested in.

Contact details for useful organisations are listed at the end of the booklet. Please speak to your healthcare team if you have any questions about how the information in this booklet affects you.

Contents

A healthy lifestyle

- Page 4 What is a balanced diet?
- Page 9 How can fibre help?
- Page 12 Physical activity after bowel cancer

Diet after a bowel cancer diagnosis

- Page 14 Eating and drinking during treatment
- Page 15 Eating and drinking with a stoma
- Page 19 Eating with a low appetite
- Page 21 Managing cancer-related fatigue
- Page 23 Gaining weight safely
- Page 25 Losing weight safely
- Page 27 Eating and drinking with advanced bowel cancer
- Page 28 Can diet help to prevent bowel cancer coming back?
- Page 29 When to get professional advice

Coping with bowel problems

- Page 30 Managing your diet if you have diarrhoea
- Page 34 Managing your diet if you have constipation
- Page 37 Coping with wind

More information

- Page 40 Food and symptoms diary
- Page 41 Acknowledgements
- Page 42 Other useful organisations
- Page 44 About Bowel Cancer UK

A healthy lifestyle

What is a balanced diet?

Having a balanced diet means eating the right amounts of a wide variety of foods to help you feel well.

Your balanced diet will be individual to you. It will depend on your age, your body weight, your gender and how active you are. The foods you can eat may vary during and after your cancer treatment and you may find you can't eat the same foods as you did before bowel cancer. Overall, you should have plenty of fruit, vegetables and carbohydrates every day, with some dairy products and meat or fish. Limit your intake of fats and sugars.

The NHS Choices website has information on the Eatwell Guide, which shows how much of each food type to include in your diet. Remember that this information is for the general population, so you may need to adapt it to meet your needs during and after cancer treatment.

The following pages suggest how you can include the important food groups in your diet when you're recovering from bowel cancer. If you have recently been diagnosed with cancer or if you're having treatment for cancer, speak to your healthcare team or dietitian for advice.

Fruit and vegetables

Aim for at least five portions of fruit and vegetables each day, including a range of different colours and types. One portion is 80g – this is about the same as one apple or three heaped tablespoons of vegetables.

Fruit and vegetables are a good source of fibre, which helps to keep your digestive system working well. You can read more about fibre on page 9.

You may need to follow a low fibre diet during and after treatment. Your healthcare team will give you information on how to include enough fruit and vegetables in your diet. They may refer you to a dietitian if you need more help with your diet.

Some people find they're not able to cope with eating some types of fruit or vegetable. For example, some vegetables, like broccoli, cauliflower and Brussels sprouts can cause bowel problems, such as wind. The food and symptoms diary on page 40 can help you find out which foods are causing your bowel symptoms.

Examples of portion sizes



One apple



Two kiwis



One to two handfuls of raspberries



Three heaped teaspoons of vegetables



One red pepper

Starchy carbohydrates

Starchy carbohydrates, sometimes called complex carbohydrates, are a good source of energy. You should eat some carbohydrate every day. Sources of starchy carbohydrate include bread, pasta, potatoes, oats, cereals, rice and grains.

Unless your healthcare team has advised you to follow a low fibre diet, limit the amount of white bread, pasta, rice and skinless potatoes that you eat. Instead, choose wholegrain varieties and leave the skin on potatoes. Wholegrain foods often contain more nutrients, like fibre, and help you feel full for longer. You can read more about fibre on page 9.



Protein

Protein is important for cell growth and repair. Good sources of protein include chicken, fish, eggs, nuts and seeds. Nuts and seeds contain high levels of fat so eat them in moderation. They are also high in fibre, so don't eat too many if your healthcare team has advised you to follow a low fibre diet.

Beans, peas and pulses are also a good source of protein but you may not be able to eat these if you have diarrhoea or wind – see pages 30 and 37.

Meat is another good source of protein but eating a lot of red and processed meat may increase the risk of bowel cancer. Red meat includes beef, pork, lamb and goat. Limit the amount you eat to less than 500g of cooked meat and try to have some meat-free days. Try to eat smaller portions – about the size of a deck of playing cards – and choose lean varieties.

Avoid processed meat, like bacon, ham and sausages. Processed meat is preserved by smoking, curing, salting or adding preservatives. Hamburgers and minced meats only count as processed meat if they have been preserved with salt and chemical additives.



Dairy

Dairy foods are important sources of protein, calcium and vitamins. Examples include milk, cheese, yoghurt and butter. Eat some dairy foods each day and choose lower sugar varieties.

Fat

Our bodies need some fat for energy and as a source of vitamins, but we only need small amounts in our diet.

Unsaturated fats are healthier and are found in:

- Nuts and nut oils, like walnut oil
- Seeds and seed oils, like sesame oil
- Olives and olive oil
- Low fat spreads

Saturated fats are believed to be less healthy. Check food labels and choose foods with 1.5g saturates or less per 100g where possible, which are sometimes colour-coded green. Foods containing saturated fat include fatty or processed meat, cheese, butter, cream, cakes, biscuits and chocolate.

Should I take supplements?

You can get all the vitamins and minerals you need from a healthy, balanced diet. But you may need some extra help if there are some foods you can't eat. Ask your healthcare team about seeing a dietitian, who can make sure you're getting all the vitamins and minerals you need.

Don't take any vitamins or food supplements unless they've been recommended by your doctor, dietician or other qualified healthcare professional.

How can fibre help?

Fibre helps to keep everything moving smoothly through the bowel by absorbing water and carrying waste out of the body. Eating high fibre foods can help you feel full for longer and so help you control your weight and appetite.

Your body may react differently to fibre after bowel cancer treatment and you may find you can no longer eat high fibre foods. Some people find that this changes over time so it's worth trying to introduce fibre into your diet again in the future. Your healthcare team or dietitian can give you advice on eating a healthy diet.



"I can't digest beans and most pulses and I was very concerned that I needed fibre as part of a healthy diet. But I came to realise that you can get fibre from other sources such as fruit and vegetables and that you have to listen to what your body is telling you."

Soluble and insoluble fibre

Fibre can be soluble or insoluble. A healthy balanced diet includes both kinds of fibre. Most foods contain both soluble and insoluble fibre, but some foods contain more of one type of fibre.

Soluble fibre dissolves in water, forming a sticky gel that helps to soften your bowel movements (poo), making it easier to pass. Fruit, vegetables and grains are high in soluble fibre. Examples include:

- Grains – oats, barley, rye
- Fruit – apples, apricots, bananas, berries
- Beans and pulses – peas, baked beans, lentils, chickpeas
- Root vegetables – carrots, potatoes

Insoluble fibre isn't digested by the body but it adds bulk to poo and helps waste pass through the digestive system. Examples of insoluble fibre include:

- Wholemeal breakfast cereals – muesli, wheat biscuits, bran cereal
- Wholemeal or granary bread
- Brown rice
- Wholemeal pasta
- Skin, pith and pips of fruit and vegetables
- Beans, peas and pulses

Adding fibre to your diet

If you're increasing the amount of fibre in your diet, do so gradually to avoid wind, bloating and stomach cramps. Fibre attracts water, making it easier for poo to pass through the bowel, so it's very important to make sure you drink enough liquid. Drink six to eight glasses of liquids like water, low fat milk or herbal teas every day to prevent dehydration. Avoid sugary drinks like sports drinks, fizzy drinks, juice or squash with added sugar.

How much fibre?

Healthy adults should eat at least 30g of fibre a day. Your healthcare team will explain how much fibre you need to include in your diet, depending on which treatment you've had. For example, you may need to follow a low-fibre diet for a few weeks after bowel surgery. **If you find that you can't cope with high fibre foods, speak to your dietitian or healthcare team.**

You may be worried about how you can eat enough fruit and vegetables if you are following a low-fibre diet. You could try:

- Tinned fruit in juice (rather than syrup) with no skin, pith or seeds
- Frozen berries that have been defrosted and sieved
- Fruit juices – only have one serving each day
- Fleshy parts of vegetables, without skin or seeds
- Tomato sauces and sieved tomatoes



50g bowl of porridge – 5g fibre



One apple or banana – 2g fibre



Two slices wholemeal bread – 6g fibre



Baked potato with skin – 2.6g fibre



80g baked beans – 3g fibre

Physical activity after bowel cancer

You may not feel like exercising when you are having treatment but regular physical activity can help you stay at a healthy body weight and improve your quality of life.

Always check with your physiotherapist or healthcare team before starting any type of exercise.

The benefits of keeping active include:

- Reducing some side effects, such as extreme tiredness (fatigue)
- Reducing anxiety and depression
- Improving your mood
- Strengthening your muscles, joints and bones
- Reducing the risk of other health problems, such as heart problems and type 2 diabetes
- Helping with digestion

How much exercise should I do?

Start off gently and, when you are ready, build up the amount of activity you do each day. You might start off with a walk around the house and then move on to a short walk outside. As you get your strength and energy back, you'll be able to do more.

When you're able to, build up to 30 minutes or more of moderate activity, such as fast walking, five days a week. This is about the same as 15 minutes a day of vigorous activity, like running, cycling or swimming. You can make this easier by breaking it down into shorter sessions lasting at least ten minutes each. Try to do exercises that strengthen your muscles, like yoga, dancing or cycling, at least twice a week.

Keep motivated by inviting a friend to join you or by using a fitness tracker or mobile app. But don't worry if you can't manage this amount of exercise. During and after treatment you may not have the energy to do as much but being as active as possible will still be good for your body.

Keep the time you spend sitting down to a minimum. If you do need to sit for long periods, get up and move around every hour.



Getting help and advice

Be careful not to lift anything heavy while you are recovering from treatment. Ask your GP or healthcare team to refer you to a physiotherapist, who can give you advice on when you can start exercising and what exercises would be best for you. They may recommend gentle forms of pilates, yoga or tai chi, which can help build strength in your tummy (abdomen).

You can find a list of physiotherapists on the Chartered Society of Physiotherapy website at csp.org.uk. You may also like to read Macmillan Cancer Support's booklet, Physical activity and cancer treatment.

Diet after a bowel cancer diagnosis

Eating and drinking during treatment

Cancer treatment can affect your appetite and your ability to eat and drink. It can affect your senses of taste and smell. If you feel sick or are being sick (vomiting) you may not feel like eating. Treatment can also cause other side effects, like extreme tiredness and changes in bowel habits, which affect how much you eat and drink. You may feel full after eating small amounts.

Tips for eating during treatment

- If you have a small appetite, try eating smaller meals more often during the day
- If you're not getting enough nutrients from your food, try high calorie or 'build up' drinks. You can buy these from the chemist or your dietitian may give you a prescription for them
- Speak to your GP or healthcare team if you're still not eating or drinking enough. They may refer you to a dietitian or give you treatment to help you get the nutrients you need

If you'd like ideas for meals to eat during and after treatment, read Macmillan Cancer Support's booklet, Recipes for people affected by cancer.

"I worked out a list of simple, easy to prepare and nourishing snacks and stocked up on these before each chemotherapy cycle. I had things like cheese on crackers, banana on toast, avocado on toast, peanut butter and warm stewed apple."

Eating and drinking with a stoma

A stoma is where a section of bowel is brought out through an opening on your tummy (abdomen). Your poo (output) is collected in a pouch or bag attached to the skin around your stoma. There are two types of stoma – a colostomy is formed from the large bowel and an ileostomy is formed from the small bowel.

When you leave hospital, your healthcare team should give you information on diet. Try to eat a balanced, healthy diet and drink six to eight glasses of liquid a day.

For the first two months after surgery, your bowel will be swollen and you will need to chew your food well. You may find it helps to eat five or six smaller meals a day instead of three larger ones.

Through trial and error, you will find which types of food you can and can't eat. The food and symptoms diary on page 40 can help you with this.

If you have your stoma reversed, you may get constipation or loose, runny poo (diarrhoea) – see pages 30 and 34.

Colostomy

Many people with a colostomy are able to eat a healthy, balanced diet. But if you had constipation or diarrhoea before having a colostomy, you may find that you continue to have these symptoms.

You may find that some types of food give you bowel problems like wind, smelly wind or loose output. Cutting back on these types of food can help with symptoms.

To prevent constipation, drink six to eight glasses of liquid a day. Water is best but you can also have tea, coffee or sugar-free squash. Limit fruit juice to one glass a day. Make sure you're eating enough fibre and have at least five portions of fruit and vegetables each day. For the first few days after surgery, make sure vegetables are well cooked. You may cope better with cooked, rather than raw, fruit.

If you have constipation, make sure you're eating regular meals to keep your stoma working. Food that is spicy or high in fibre can help to relieve constipation. If you want to eat more fibre, introduce it to your diet gradually and make sure you're drinking enough liquid. Read pages 34 and 9 for more information on constipation and fibre.

If you have diarrhoea, see your GP or stoma nurse. They may give you medicine to slow the movement of food through your bowel and thicken the output. You can read more about diarrhoea on page 30. Foods that may thicken output include very ripe bananas, boiled rice, porridge, smooth peanut butter, white bread, pasta and foods containing gelatine, like jelly or some sweets.

Ileostomy

When you first have an ileostomy, you may find that some types of food are harder to digest. For the first eight weeks, chew your food well and introduce fibre gradually. Avoid fruit straight after surgery, except for bananas which thicken the output from your stoma. Gradually introduce cooked fruit, like stewed apple.

After six to eight weeks, you should be able to start eating more types of food. You can eat fruit and vegetables as part of a healthy, balanced diet, but chew them well to reduce the risk of blockages. If you have problems eating these foods, you could try taking off the skin and removing the seeds or eating tinned fruit and vegetables in natural juice or water.

A blockage can cause pain in your tummy and bloating. You may feel sick and your stoma may stop working. These symptoms should settle if you stop eating for 24 hours but carry on drinking liquids. Get medical help from your stoma care nurse or hospital emergency department if you start being sick (vomiting) or if the pain doesn't get better.

If you have a blockage:

- Keep drinking liquid
- Stop eating solid food
- Don't use laxatives
- Cut the opening of your stoma appliance slightly larger as your stoma may swell
- Massage your tummy and the area around the stoma
- Try a warm bath to ease pain in your tummy

The output from your stoma may change throughout the day. Some people say their output is thicker in the morning or after meals.

To prevent dehydration, drink about eight glasses of non-caffeinated liquids a day.

Your healthcare team may also advise you to include slightly more salt in your diet, unless you already eat a lot of salty food.

Eating lots of small, hard foods like raisins, nuts and sweetcorn can irritate the stoma site if they get stuck. Some people find they can't eat these types of food long-term.

You may sometimes get an increased output. This can be due to a number of reasons, such as a stomach bug, stress, antibiotics, spicy food, beer or lager.

Carry on drinking water as usual to replace the extra liquid you're losing. Eat salty foods to replace the salts lost in the output and avoid foods that increase output, like fruit, vegetables, fried foods, fruit juice, caffeine and alcohol.

To thicken the output, eat bread, rice, potatoes, pasta, biscuits, sponge cake and crackers.

If you have an increased output over a long period of time, speak to your stoma nurse or healthcare team. They will give you information on which foods to eat and may give you medicines to replace salt and to prevent diarrhoea.

Eating with a low appetite

Bowel cancer and its treatment can affect how much you are able to eat and drink.

Speak to your GP, specialist nurse or dietitian if you are having problems with eating enough. They can give you emotional support and practical help to eat a balanced diet. If you are a family member or carer and you're worried about someone who has lost their appetite, you can speak to a healthcare professional on their behalf.

Common problems that affect eating and drinking

Many things can cause you to lose your appetite. For example, the side effects of cancer and its treatment can affect your appetite and your ability to eat, you may not have enough help with food shopping or preparing meals or, if you live alone, you may not feel like going to the trouble of cooking for one person.

"During chemotherapy, I had a horrible taste in my mouth and couldn't eat or drink anything cold. So I always had a packet of mints in the house and a jug of water at room temperature."

Tips for boosting appetite

Try some of these suggestions for increasing your appetite.

- Fresh air and exercise before meals can help you feel hungry. Even a short, gentle walk can make a difference
- Eat at similar times each day. Your appetite will start to adjust to these planned meal times, which can help you look forward to meals
- If food smells make you feel sick, try to stay away from the kitchen and ask friends or family to cook. Or eat cold foods that don't need cooking
- Use herbs, spices, pickles and sauces to add flavour to food
- Pre-prepared foods that can be chilled or frozen can be useful if you don't have time to cook or if you aren't able to cook for yourself. Make sure they are reheated properly before eating
- Make large meals that you can eat in smaller portions, such as soup, shepherd's pie or lasagne. This allows you to go back for more if you want to
- If you find that you get full quickly, don't drink anything for half an hour before a meal. Only have small sips during your meal, unless you need liquid to help you swallow. Drink more between meals
- Go with your cravings. You will feel like eating more if you go for what you really want rather than what you think you should have
- Have your meals in a room where you feel relaxed and without distractions

"I tried not to plan my meals too far in advance but instead ate whatever I fancied each day. I didn't always know in advance what foods I would crave or what foods I wouldn't want."

Managing cancer-related fatigue

Bowel cancer and its treatment can cause fatigue. This is extreme tiredness that can affect you physically, emotionally and mentally. If you are worried about fatigue, speak to your GP or hospital team. You can also ask them to refer you to a dietitian or physiotherapist for help with diet and exercise.

What is fatigue?

Cancer-related fatigue is unlike any other kind of tiredness you may have experienced before. It affects your everyday life and isn't relieved by rest, sleep or caffeine. It isn't related to how active you are. It is common and, in some people, can continue for several months or years after cancer treatment.

Preparing meals can be challenging when you have cancer-related fatigue. Try choosing healthier ready meals or pre-prepared salads. You could cook large dishes when you feel able to, then freeze them in meal-size portions. Ask someone to help you with food shopping or order your groceries online.



Tips for coping with fatigue

- Eat and drink a wide variety of fresh food and liquids to make sure you get all the nutrients you need
- Keep portion sizes small and eat five to six smaller meals or snacks a day. This will help to keep your energy levels steady and stop you feeling hungry
- Boost your iron intake. Good sources of iron include dried apricots, green vegetables, beans, breakfast cereals with added iron and wholegrains. Red meat also contains iron but you should limit how much you eat. Read page 7 for more information
- Balance periods of activity with periods of rest. Avoid getting over-tired or stressed
- Keep to a regular bedtime routine
- Eat a light snack and have a milky or herbal drink that doesn't contain caffeine before bed to avoid waking up hungry or thirsty in the night
- Take any prescribed painkillers just before going to sleep if you find that you tend to wake in the night with pain

Gaining weight safely

Speak to your GP or healthcare team if you have lost a lot of weight or if you're losing weight quickly. It is important to find out what is causing your weight loss and you may need treatment. If you're finding it hard to put on weight, ask your GP or healthcare team to refer you to a dietitian.

What causes weight loss?

There may be several possible reasons for your weight loss. The cancer itself can affect your appetite. Bowel cancer treatment can cause bowel problems, like constipation and diarrhoea, which can affect your appetite. Other side effects, like fatigue, a change in smell and taste, feeling and being sick and emotional stress can also lead to problems with eating. Getting medical advice and treatment for these symptoms may help you to eat more and put on weight.

You may be eating normally but still losing weight. The cancer may affect how your body absorbs and uses the nutrients in your food.

Losing weight can affect the way you see yourself. Some people are upset at their changing body size. Those who were overweight before their cancer may feel better about their body after losing weight.

How can I put on weight?

To gain weight safely, you need to eat more calories and keep active.

Eating four to six small meals a day can help you to eat more calories and can help you to digest your food more easily. You could also try high calorie or 'build up' drinks with added vitamins and minerals. You can buy these over the counter from the chemist or your dietitian may give you a prescription for them.

Regular gentle exercise can help to build up your muscle strength and help you to feel better about yourself. Ask your GP or healthcare team if you can be referred to a physiotherapist, who can help you to find activities that are safe to do during and after cancer treatment.

Macmillan Cancer Support gives more information about coping with weight loss and meal ideas in their booklet, The building up diet.



Regular gentle exercise can help to build up your muscle strength



Eating four to six small meals a day can help you to eat more calories and can help you to digest your food more easily



Try high calorie or 'build up' drinks with added vitamins and minerals

Losing weight safely

Speak to your healthcare team before trying to lose weight. They can give you information on which types of food you should eat, depending on the treatment you've had and the side effects you're having. For example, some people can't eat high fibre vegetables unless they cook them very well or make them into soups or smoothies.

Ask your GP to refer you to a dietitian or a weight management programme if you feel you need help to lose weight.

What causes weight gain?

There are several possible reasons why you may have put on weight. You may have felt too tired to exercise during treatment, you may have taken comfort in eating or you may have felt low and found it hard to eat healthily.

How can I lose weight?

Following a healthy, balanced diet and doing regular exercise can help you to lose weight. Aim for at least 30 minutes of physical activity, five days a week, and avoid sitting for long periods of time. Build up the amount of activity you do gradually and ask for help from your GP or healthcare team if you need it. You can find out more about a healthy diet on page 4 and keeping active on page 12.

You don't need to cut out fatty food completely – cut down on how much and how often you eat these types of food.

To help you lose weight:

- Start the day with a healthy breakfast like porridge, wholegrain cereals or bread, eggs, lower fat milk and a portion of fruit
- Choose lower fat options where available but remember that many low or non-fat foods contain more sugar
- Watch your portion sizes and cut down on snacks high in fat and/or sugar. You can check portion sizes printed on food and drink labels
- Keep active and eat healthily most days, including weekends and holidays
- When you're exercising, drink water instead of sugary or sports drinks or fruit juice
- Even healthy food, like olive oil and nuts, can make you put on weight if you eat too much
- Cut back on creamy, fatty or sugary food and drinks – have fruit, vegetables and water instead
- Replace refined starchy foods like white bread, white rice and white pasta, with wholegrain products
- Remember that alcohol contains calories. Don't drink more than 14 units a week and try to have some alcohol-free days

Some people find it helpful to keep a record of their progress. You could weigh yourself once a week or note down how much you eat and drink and how much physical activity you do.

Macmillan Cancer Support has more information in their booklet, *Managing weight gain after cancer treatment*.

Eating and drinking with advanced bowel cancer

Bowel cancer that has spread to other parts of the body is known as advanced, secondary or metastatic disease. Bowel cancer most commonly spreads to the liver or lungs but it can also spread to other parts of the body.

A healthy diet can improve your quality of life and help you to feel better about yourself when you have advanced bowel cancer.

Some people with advanced bowel cancer lose a lot of weight and find it hard to put it back on. There is information on gaining weight safely on page 23. If you are having problems eating and drinking normally, speak to your GP or healthcare team. They can refer you to a doctor who specialises in problems with the digestive system (gastroenterologist), who will work with a dietitian to help you manage your diet.



Can diet help to prevent bowel cancer coming back?

We don't yet know how to stop cancer coming back after treatment. There is some suggestion that eating a healthy diet (see page 4), doing regular exercise (page 12) and keeping to a healthy weight may help to reduce your risk of cancer coming back after treatment but we need more evidence before we can say this for sure. Making healthy lifestyle choices is good for your overall health and can prevent or reduce other health problems, like diabetes and heart disease.

To reduce the risk of cancer coming back people with cancer should:

- Be a healthy weight
- Be physically active for at least 30 minutes each day, and sit less
- Avoid high calorie food and sugary drinks
- Follow a plant-based diet and eat more whole grains, vegetables, fruit and beans
- Limit red meat and avoid processed meat
- Eat less salt

There isn't enough evidence to show whether alcohol affects the risk of cancer coming back, but we do know that it increases the risk of bowel cancer in the general population.

When to get professional advice

Speak to your GP or healthcare team if you have any worries about your diet or your ability to keep physically active. They may refer you to another health professional, such as a dietitian or physiotherapist.

Do I need to see a specialist?

Ask to see a dietitian or other qualified nutrition professional if you have:

- Type 1 diabetes
- A long-term health condition that affects what you can eat, like type 2 diabetes, high cholesterol, high blood pressure, low blood pressure, gall stones, diverticulitis or inflammatory bowel disease
- Food allergies or sensitivities
- Unintended weight loss
- Side effects of treatment that affect your ability to eat, like sickness, diarrhoea, fatigue or mouth sores

A physiotherapist can help if you have extreme tiredness (fatigue) or a physically demanding job. Physiotherapists can also help with other problems caused by bowel cancer and its treatment. For example, if surgery has caused you to lose full control of your bowel, they can teach you pelvic floor exercises that may help.

Health and Wellbeing events

Some hospitals offer Health and Wellbeing events where you can get information on managing your health and wellbeing after cancer treatment. This may include information on diet and lifestyle. You may also have the chance to meet other people in a similar position to you. Some hospitals also offer 'holistic needs assessments', which aim to find out what practical or physical needs you have. Your specialist nurse can tell you if these events or assessments are available at your hospital.

Coping with bowel problems

Managing your diet if you have diarrhoea

Diarrhoea is loose, runny poo that you pass more often than normal. You may need to rush to the toilet several times a day.

What causes diarrhoea?

Bowel cancer treatments, such as surgery, radiotherapy and chemotherapy, can cause diarrhoea. Other possible causes include medicines, like antibiotics, and infections.

Some people may have symptoms of diarrhoea when they have constipation. This may seem confusing and you may wonder why your doctor is treating your diarrhoea with laxatives. But if your poo is blocking your bowel, runny poo can leak through and can look like diarrhoea. Your doctor will work with you to find out what is causing your diarrhoea so you can get the right treatment. You can read more about constipation on page 34.

Avoiding dehydration

When you have diarrhoea, you need to drink enough liquid to avoid getting dehydrated. Take regular small sips and aim for at least six to eight glasses of liquid a day. Avoid sugary or fizzy drinks and drinks that contain caffeine, like tea and coffee, as these can irritate the bowel and make diarrhoea worse.

“Having a sports bottle handy with room temperature water, topped up occasionally, helped me sip throughout the day and keep hydrated.”

As well as losing water, you will be losing salts and other important nutrients. To replace these, try eating fresh or tinned soups and broths. You could also have Marmite on toast or plain crackers.

If you feel too sick to eat, or if you become very dehydrated, your GP may suggest you use oral rehydration salts. These contain a balance of salts and sugars to help your body re-absorb them quickly. You can buy them from chemists and supermarkets.

What should I eat?

Light, bland and easily digested foods can help with diarrhoea after bowel cancer treatment. Try cutting back on foods high in insoluble fibre, like wholemeal bread, bran-based cereals and brown rice, especially in the first few weeks and months after surgery and radiotherapy. You can read more about fibre on page 9.

Try to eat small amounts regularly throughout the day and eat slowly to avoid bloating and wind. Tell your healthcare team if you're having trouble eating or if eating plain food doesn't improve your symptoms. If you're not able to get enough nutrients from your food, your healthcare team may refer you to a dietitian.

Food and drink to try	Food and drink to avoid
<ul style="list-style-type: none">• Water• Bananas• White rice• Pasta• Noodles• White bread or toast• Crackers• Low fibre cereals like puffed rice or cornflakes• Skinned chicken• White fish• Hard boiled eggs	<ul style="list-style-type: none">• Drinks containing caffeine• Alcohol• Milk and other dairy products• Fatty foods• Raw fruit and vegetables• Beans• Spicy food• High fibre cereals like porridge oat and bran• An artificial sweetener called sorbitol, found in sugar-free sweets and drinks

“When I was having radiotherapy, I managed to control the diarrhoea almost completely through diet – but I did eat a lot of potato (no skins) and tinned tuna and salmon.”

It may take you a while to find out which foods make your symptoms better or worse. You may find that your body reacts differently to foods that you couldn't eat in the past. It's always worth trying these foods again to see how you react to them. You can keep a record of how you react to different types of food on page 40.

Probiotics may help to reduce the length and frequency of diarrhoea caused by infection. There is also some evidence that probiotics may help with diarrhoea caused by radiotherapy or chemotherapy but more evidence is needed. You may not be able to take probiotics during chemotherapy or if you have low levels of white blood cells because they can increase the risk of infection. Always speak to your healthcare team before taking probiotics.

Diarrhoea medicines

Tell your doctor about any medicines and any nutritional supplements you're already taking. They may suggest you stop taking any medicines that may be making your diarrhoea worse.

Always speak to your doctor before taking any medicines for diarrhoea. They will need to find out what is causing your symptoms before deciding on the best treatment for you.



Your doctor may offer you medicines that slow down the movement of the large bowel, such as loperamide or codeine phosphate. He or she will give you information on how and when to take these drugs.

If your bowel cancer treatment is likely to cause diarrhoea, your doctor may give you diarrhoea medicine to keep at home in case you need it. If you're having chemotherapy or chemoradiotherapy, your doctor may give you a medicine called octreotide to treat diarrhoea caused by your cancer treatment.

Where can I get more help?

Your healthcare team and GP can tell you about products and local services that can help you cope with diarrhoea.

You can also contact the Bladder and Bowel Community for information on products to help you cope at home and when you go out. The Pelvic Radiation Disease Association provides information on diarrhoea and other bowel problems caused by pelvic radiation disease. You can find their contact details on page 43.

Managing your diet if you have constipation

Constipation is when your poo is hard, dry and difficult to pass. You may find it painful when you go to the toilet or you may feel like your bowel isn't completely empty. There is no rule for how often you should be having a poo – some people go more than once a day and others go every three to four days. Both of these are normal but if you are going to the toilet less often than you normally do, you may have constipation.

Speak to your GP or healthcare team if you think you have constipation.

Get medical advice straight away if you haven't had a poo for more than a few days and you have pain, feel sick or have been sick (vomited).

What causes constipation?

Many things can cause constipation, including:

- Bowel surgery
- Medicines, like opioid painkillers
- Other illnesses, like diabetes, thyroid problems or depression
- Not eating enough fibre
- Not drinking enough liquid
- Lack of exercise
- Fatigue

What should I eat and drink?

Always speak to your GP or healthcare team before making big changes to your diet. If you've had constipation for a long time, you may need medical treatment before you change your diet. Eat at least three meals each day. Try not to skip meals.

- Unless you can't tolerate fibre, increase the amount of soluble and insoluble fibre in your diet, especially wholegrains. Do this gradually and in small portions to avoid wind and bloating. It can take up to four weeks for you to see any change in your bowel habit
- Choose more raw fruits and vegetables and eat the skin, if you can
- Drink plenty of liquid, including water, regularly during the day

High fibre foods need to be soft, well-cooked and well-chewed. If you're increasing the amount of fibre in your diet, make sure you also drink more liquid. If you have a stoma, you can find out more about fibre and diet on page 15.

There is more information about eating a balanced diet and fibre on pages 4 and 9.

Foods that may help

- Wholegrain breakfast cereals
- Fresh, tinned or dried fruit that is high in a natural laxative called sorbitol eg prunes, raisins, plums, grapes, peaches, raspberries, strawberries, apricots, apples, pears
- Fruit juices high in sorbitol, such as prune juice
- Porridge oats
- Pearl barley
- Ground flaxseeds/golden linseeds
- Root vegetables, like carrots, beetroot, parsnips. Don't worry if your urine or poo look red after eating beetroot, this is normal
- Dark green, leafy vegetables

Other things that can help

- Avoiding sitting down for long periods of time
- Regular gentle exercise for at least 30 minutes, five days a week
- Making sure you have enough time and somewhere private to go to the toilet, if possible
- Sitting in a squatting position on the toilet, with your knees bent and your feet on a stool. This can help you use the right muscles to empty your bowel
- Going to the toilet first thing in the morning or half an hour after eating
- Not putting off going to the toilet
- Firmly massaging your tummy in a clockwise movement can help get your bowel moving and can ease bloating and wind

Where can I get more help?

Your GP or healthcare team can give you medicine to help with constipation. They may give you stool softeners for hard poo that is difficult to pass or laxatives for a slow bowel habit. Only take these under medical guidance.

“When I had my stoma reversed I had severe constipation. My GP gave me several creams and suppositories to try. I now take Fybogel every day before bed, which helps.”

Coping with wind

Everyone passes wind. Although this can be embarrassing, it is normal. You may pass wind through your mouth (belching) or through your back passage (flatulence). Speak to your GP or healthcare team if you are having a lot of wind or pain in your tummy.

What causes wind?

Bacteria are present in everyone’s large bowel. They produce wind as they break down the food you eat. But sometimes, you may have too much wind or trapped wind. This can make you feel bloated, full, sick or uncomfortable. You may get shooting pains in your tummy or pains that come and go (colic). If you have a stoma, you won’t be able to control when you pass wind into your stoma bag.

You may also get wind and other bowel problems after bowel cancer treatment, such as radiotherapy, surgery or chemotherapy.

Swallowing air when you eat or drink can cause wind. You may swallow too much air if you eat quickly or talk while you eat. Some people swallow air as a nervous habit or if they have a problem with stomach acid.

If you have constipation, food can sit in your large bowel for longer, which can cause wind. You can find out more about constipation on page 34.

You may find that some types of food and drink cause more wind. You can use the food and symptoms diary on page 40 to help you find out what is causing the problem.

If you think you know what food is causing your wind, you could try eating less of it, to see if that helps. Or you could change the way you eat it. For example, if raw vegetables are causing wind, you could try eating them cooked instead. Don’t cut out whole groups of food or make big changes to your diet without speaking to a dietitian.

Food and drinks that can cause wind in some people include:

- Beans and pulses, like lentils and peas
- Some vegetables, including broccoli, cabbage, cauliflower, brussel sprouts, onions, asparagus, cucumbers, garlic, leeks, mushrooms, sweetcorn
- Fructose, found naturally in fruit and also in some processed foods
- Sorbitol and mannitol, which are artificial sweeteners found in sugar-free sweets, chewing gum and some chocolate
- Fatty foods
- Fruit juices, if you drink more than one glass a day
- Sparkling water and fizzy drinks
- Wine and beer

The types of food that cause smelly wind vary from person to person, but may include fish, onions, garlic, eggs, cheese, asparagus and baked beans.

How can diet help?

- Avoid missing meals. Have a snack and drink if there's a long gap between meals
- Sit up straight when you're eating and try to avoid lying down during the day
- Take your time when you're eating and drinking to avoid swallowing too much air
- Make sure you're drinking enough fluid, but avoid fizzy drinks
- Avoid chewing gum and sucking on boiled sweets, as these make you swallow more than usual
- If you are trying to eat more fibre, add it to your diet gradually. Eating too much in one go can cause wind
- Eating oats and linseeds (also called flaxseeds) can help with wind and bloating. Try oat-based breakfast cereals or porridge. Add up to one tablespoon of ground or milled linseeds (not linseed oil, which doesn't contain fibre) to your meals each day. You will need to add more liquid to your meal when you use linseeds
- Probiotic supplements may help with wind and bloating. Take the dose recommended by the manufacturer and take them for at least four weeks to see if they are helping. If you eat probiotic yoghurts, check that they don't contain artificial sweeteners as these can cause wind. Always check with your healthcare team before taking probiotics and don't take them during cancer treatment

What else can I do to reduce wind?

Keep active. Regular, gentle exercise can help prevent constipation and reduce wind. Avoid using drinking straws and don't smoke as these make you swallow more air than usual.

"My colorectal nurse told me to lie on my left side with my legs slightly bent to relieve wind."

More information

Food and symptoms diary

Keeping a diary of food and symptoms can help you find out which foods you react to. Include the amount of food you eat as well as how long any reactions last. You may get symptoms up to a day after you eat the food. You can download more copies of this diary from bowelcanceruk.org.uk

Date	Time	Food/drink/medicines taken	How much	What was the symptom/reaction?	How long did it last?

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Other useful organisations

Bladder and Bowel Community **bladderandbowelfoundation.org**

Helpline 0845 345 0165
UK charity for people with bladder and bowel control problems.

British Dietetic Association **bda.uk.com**

Provide information on healthy eating and how to find a dietitian.

Cancer Research UK **cancerresearchuk.org**

0808 800 4040
Mon–Fri (9am–5pm)
Information for people affected by cancer.

Chartered Society of Physiotherapy **csp.org.uk**

For information on what physiotherapy is and a searchable list of qualified physiotherapists.

Colostomy Association **colostomyassociation.org.uk**

24 hour helpline 0800 328 4257
Provide support, reassurance and practical information to anyone who has or is about to have a colostomy.

IA (Ileostomy and Internal Pouch Support Group) **iasupport.org**

0800 0184 724
A support group run by and for people with ileostomies and internal pouches.

Macmillan Cancer Support **macmillan.org.uk**

Freephone 0808 808 0000
Mon–Fri (9am–8pm)
Provide support and information on cancer, money, benefits and work.

NHS Choices **nhs.uk**

The UK's biggest health website. For information on the Eatwell guide.

NHS Direct Wales **nhsdirect.wales.nhs.uk**

Health information for people living in Wales.

NHS Inform **nhsinform.scot**

Health information for people living in Scotland.

nidirect **nidirect.gov.uk**

Government website for people living in Northern Ireland. Includes information on help with health costs.

Pelvic Radiation Disease Association **prda.org.uk**

Information and support for people with pelvic radiation disease.

Penny Brohn Cancer Care **pennybrohncancercare.org**

Helpline 0845 123 23 10
Help people live well with cancer by offering a range of services, including information on healthy eating.

World Cancer Research Fund **wcrf-uk.org**

Promote scientific research on cancer prevention and survival through diet, weight and physical activity to help people make informed lifestyle choices.

Bowel Cancer UK is the UK's leading bowel cancer research charity. We are determined to save lives and improve the quality of life for all those affected by bowel cancer.

We support and enable research, educate patients, public and professionals about bowel cancer and campaign for early diagnosis and best treatment and care for all those affected.

Find out more at bowelcanceruk.org.uk



/charitybcuk



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To find out more about this booklet or tell us what you think email feedback@bowelcanceruk.org.uk

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