



**Rehabilitation & Support** 



A guide for patients and carers

## Contents

Swallowing	1
Swallowing problems	1
Who can help?	2
General advice to help you with eating and drinking	2
Examples of texture E foods	4
High risk foods to avoid	6
Tips if you have a small appetite	7
Tips for getting the best nutrition possible	8
Contact details	9



## Swallowing

Usually you eat, drink and swallow without thinking about it. The normal swallowing process is controlled by nerves and muscles, which ensure that the food in your mouth goes safely into your stomach and not into your lungs. When these nerves, muscles and the lining of your mouth and throat are affected by surgery, chemotherapy and/or radiotherapy food and fluids can go down the wrong way, that is – into your lungs. This increases the risk of getting a chest infection and may even lead to pneumonia. The medical term for food or fluid going into your lungs is ASPIRATION.

## Swallowing problems

People who have swallowing problems may experience one or more of the following:

- It takes much longer to eat and drink
- Difficulty chewing
- The lips and/or tongue may not move as well as before
- Food feels as if it is sticking in the throat
- Food or drink may feel as if it is going down the wrong way causing coughing and/or choking
- Drooling, and food or fluid leaking from the mouth
- A gurgly voice after swallowing
- Weight loss
- Repeated chest infections

## Who can help?

**Speech & Language Therapists (SLT)** assess, diagnose and treat patients who have swallowing difficulties. They carry out an assessment of swallowing ability and can provide exercises, strategies and/or provide advice on the best consistency for your food and drink to help you swallow safely.

**Dietitians** educate patients and their carers on appropriate food choices and fluid intake to ensure the patient meets their nutritional needs when on a modified diet. They also assess the need for food fortification / supplements.

**Occupational Therapists** advise on appropriate aids/ adaptations, such as seating and cutlery, to promote a positive environment and independence for the patient.

# General advice to help you with eating and drinking

#### Mouth care

- Follow the mouth care guidance supplied by your Specialist Nurse
- Clean your mouth and take appropriate pain relief before eating
- Check your mouth after each meal to remove any leftover particles
- You may need to clean your teeth and use your mouthwash more often if you are taking thickened drinks between meals

#### **Eating Safely**

- Be careful not to put too much in your mouth at once
- Clear your mouth before taking any more food
- Take your time over eating and drinking so that you can concentrate on chewing and swallowing
- Your Speech & Language Therapist may give you additional advice on the best way to eat and drink

#### Positioning

- Choose a chair that lets you sit in an upright position
- To help your food go down safely try to stay in an upright position for at least 20 minutes after eating

Try not to worry if it takes a long time to eat - this is common. To avoid feeling pressured to finish your meal, try starting before your family. If eating is tiring have small meals with puddings and snacks in-between.

### You have been advised to have: DIET TEXTURE E – FORK MASHABLE

#### Texture E - Fork mashable means

- The food can be mashed with a fork
- The food is soft, tender and moist but needs some chewing
- It usually requires a thick, smooth sauce, gravy or custard
- Any sauce, gravy or custard in or on the food is thick (a light disposable teaspoon would stand upright if it's head was covered with the liquid)
- There should be no hard, tough, chewy, fibrous, stringy, dry, crispy, crunchy or crumbly items
- There should be no skin, bone or gristle
- There should be no bread, unless advised by your Speech and Language Therapist
- There should be no sticky foods e.g. cheese chunks, marshmallows
- There should be no 'floppy' foods e.g. lettuce or cucumber
- There should be no juicy food where juice separates off in the mouth e.g. water melon



4

#### **Examples of texture E foods**

ALL food should be mashed with a fork before serving.

Meat	<ul> <li>Minced and tender meat in a casserole, gravy or sauce</li> <li>Corned beef hash</li> </ul>
Fish	• Tinned and freshly cooked fish (no bones) served in a thick, smooth sauce
Eggs	<ul><li>Scrambled egg</li><li>Omelette with soft cheese</li></ul>
Vegetarian	<ul> <li>Smooth hummus</li> <li>Crumbled tofu</li> <li>Soft pulses</li> <li>Macaroni or cauliflower cheese</li> <li>Soft or grated cheese such as camembert, ricotta, creamed cheese or cottage cheese</li> <li>Tinned spaghetti</li> </ul>
Fruit	• Stewed fruit, soft tinned fruit, soft fresh fruit with skin removed e.g. banana, melon, peaches or apricots
Vegetables	<ul> <li>Well-cooked carrots, turnips, sweet potato, broccoli or cauliflower</li> <li>Baked potato (no skin) with butter, cheese or tuna mayonnaise</li> <li>Mashed or soft boiled potatoes</li> </ul>

Cereals/grains	<ul> <li>No bread unless advised by your Speech and Language Therapist</li> <li>Soft, well cooked pasta or rice with a sauce</li> <li>Cereals that soften in milk</li> </ul>
Desserts	<ul> <li>Smooth mousse, instant whip, fromage frais or yoghurt</li> <li>Biscuits – dipped in a warm drink</li> <li>Soft sponge cake with custard or cream</li> <li>Milk Puddings</li> <li>Fruit crumble with custard</li> <li>Trifle</li> </ul>

## High risk foods to avoid

- Stringy, fibrous textures such as pineapple, runner beans, celery, lettuce, oranges
- Stringy and chewy meats such as bacon, or meats with fat
- Thick slices of meat
- Vegetable and fruit skins such as beans, apple, grapes and tomatoes
- Mixed consistency foods such as cereals which do not blend with milk (e.g. muesli), mince with thin gravy, and soup with lumps



- Crunchy foods such as toast, flaky pastry, dry biscuits and crisps
- Crispy pastries which are crumbly
- Hard biscuits, boiled and chewy sweets, nuts and seeds
- Husks such as sweet corn and granary bread

## Tips if you have a small appetite

- Some fresh air before your meal can help to stimulate your appetite
- On the days when your appetite is better, make the most of it and eat well
- If you are feeling nauseous, ginger drinks (thickened if necessary) may help e.g. ginger beer, ginger and lemon tea
- Try not to worry too much if you can't face 'normal' sized meals. Try to eat or drink something nourishing every couple of hours, even if it's a small portion
- Have a pudding once or twice a day. It may help to have it as a snack in between meals rather than straight after your meal if you are likely to be full

7

## Tips for getting the best nutrition possible

When you are unable to eat as much as usual there are some things you can try to make your diet as nutritious as possible:

- Eat little and often e.g. 3 small meals per day, as well as 2-3 small snacks or milky drinks
- Drink at least 8-10 cups of fluid per day (thickened if necessary) including two milk based nourishing drinks e.g. milkshake, hot chocolate or milky coffee. Try to have at least 1 pint of **full fat milk daily**
- Have drinks after, or between, meals so they do not fill you up and stop you from eating your meal
- Try to include at least two protein servings daily i.e. meat, fish, eggs, cheese, beans or lentils
- Choose brands that are full fat. Avoid any that are labelled fat free, light, diet, reduced fat or low sugar

Ready-made meals and desserts are available to purchase from Wiltshire Farm Foods. These specialised meals have their texture modified to a thick puree / texture C consistency and are suitable for you to have. A brochure is available by telephone: **0800 773773** or via their website: **www.wiltshirefarmfoods.com**.

Alternatively the 'Meals on Wheels' service provides modified diets. For more information, speak to your social worker or, if you do not currently have a social worker, your local central advice and duty team.



## **Contact details**

#### The Clatterbridge Cancer Centre NHS Foundation Trust,

Clatterbridge Road, Bebington, Wirral, CH63 4JY.

Your Speech & Language Therapist is:

**Telephone:** 

Your Dietitian is:

**Telephone:** 

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