

Health Facts for you

Diet After Esophagectomy

After surgery you will need to follow a strict diet because all or part of the esophagus is removed. The stomach is made into a tube and is pulled up into the chest to replace the part of the esophagus that was removed. The new tube-shaped stomach is then reattached to allow food to move from the mouth to the rest of the digestive tract. After surgery your stomach acts as a passageway for food to travel through rather than storing the food you eat. Because of this, you will need to eat smaller, more frequent meals. Your diet will slowly change as you heal. The diet is to help make you more comfortable as you to eat.

Note: Each person tolerates food in a different way. Based on how you are doing after surgery, your doctor may change your diet plan more slowly.

Feeding Tube

Nutrition is very important after surgery. Calories provide the building blocks you need to heal. Most patients who have this surgery will have a feeding tube put in. This will help you get extra nutrition until you can go back to your regular diet. This tube is called a jejunostomy tube or J-tube. The tube is put in through the belly and into a part of your small intestine. Your doctor can give you liquid nutrition (tube feedings) through the J-tube until you can eat enough food by mouth.

You will start tube feedings in the hospital a few days after surgery. We often start tube feedings at a low, continuous rate. If you tolerate the feeds, with no severe cramping, nausea, and vomiting, we increases the rate to provide more calories.

As the rate increases, we will change you to cycled tube feedings. This means for some of the day the feedings will be shut off. Cycled feedings most often run from 3 pm to 9 am (18 hours), giving you 6 hours during the day that you don't need to be attached to the feeding pump. We may decrease the tube feeding rate to a 12 hour cycled feeding (9 pm to 9 am) later on. You will follow this feeding plan until your doctor believes you can eat enough nutrition to maintain your weight and heal. You will likely still have tube feedings when you go home after discharge. Depending on your progress, the J-tube may be removed in the clinic at your first post-op visit (about 2 weeks).

Expect some cramping when the tube feedings start. The cramping is often brief and stop within a few days. There may also be some loose stools. This is due to the change in the shape of your stomach from surgery and from the tube feedings. If you are having a lot of, or uncomfortable, loose stools, we may change the type or rate of your tube feeding to help.

Common Eating Problems After Surgery

Feeling Full After Eating

- After surgery you will have a smaller stomach. Eat 6 to 8 small meals per day.
- Take small bites and chew your food fully.
- Limit fluids to ½ cup (4 ounces) with meals and 1 cup (8 ounces) with snacks. This will help with fullness and dumping/diarrhea.

Reflux

- Avoid caffeine, carbonated drinks, alcohol, citrus, and tomato products.
- Avoid highly seasoned, spicy, or fried foods.
- Do not drink through a straw, chew gum or chew tobacco. This will decrease the amount of air that you swallow and help with gas.
- **Do not** eat for at least 2 hours before going to bed.

Discomfort when Swallowing

- Eat soft, moist foods because they are easier to digest and swallow.
- Avoid gummy foods such as bananas and doughy breads. If you feel like food is "sticking" in your throat or you have pain behind the breast bone, try sipping a small amount of fluid when eating solid foods. If these symptoms get worse, tell your surgeon.
- Sit straight up when you eat. Gravity can help move food down. Keep sitting up 30 to 60 minutes after you eat. This will help with acid reflux also.

Dumping

Dumping syndrome is when the food in the stomach empties too quickly into the small intestine. Dumping can cause diarrhea, cramps, nausea, dizziness, bloating, and light headedness.

- Limit fluids to ½ cup (4 ounces) with meals and 1 cup (8 ounces) with snacks. This will help with fullness and dumping.
- Limit sweets to the end of the meal. Sweets are digested more quickly than other foods. Eating sweets first can lead to low blood sugar.
- Avoid very cold or very hot foods

What types of diets will I have?

Each person tolerates food in different ways and heals at different rates. Your doctor will change your diet based on your progress.

The 3 diets that you will be on:

- 1. Esophageal Clear Liquid Diet
- 2. Esophageal Full Liquid Diet
- 3. Esophageal Soft Diet

1. Esophageal Clear Liquid Diet

This will be your first diet after surgery. To be a clear liquid, you must be able to see through it (no pulp or cloudiness). You may have:

- Clear juice (apple, cranberry, no citrus)
- Clear broth (chicken, beef and vegetable)
- Gelatin (such as Jell-O[®])
- Tea (decaf to avoid reflux)

Carbonated drinks are **not** allowed because they may cause gas.

2. Esophageal Full Liquid Diet

Along with the liquids in a clear liquid diet you may also have:

- Yogurt (without pieces of fruit or seeds)
- Cream of wheat or cream of rice hot cereal
- Ice cream
- Milk
- Pudding
- Liquid nutritional supplements like Ensure[®], Carnation Instant Breakfast[®] or Boost[®].

Note: With dairy products you may, at first, have intolerance to lactose (not able to digest milk sugar). Add small amounts of milk to your diet to see if you can tolerate dairy or try lactose free milk-Lactaid[®].

How do I know if a food falls under a Full Liquid Diet?

If you can imagine the food item going through a kitchen strainer, then it would be a full liquid food item.

Examples of Full Liquid Diet:

Breakfast

Apple juice (4 ounces)
Cream of wheat cereal made with milk or
Lactaid®

Snack

Carnation Instant Breakfast® Drink (4 ounces)

Lunch

Creamed soup (strained), not tomato or broccoli Cranberry juice

Snack

Boost® nutritional supplement (4 ounces)

Dinner

Creamed soup (strained) not tomato or broccoli Vanilla pudding

Snack

Sherbet

3. Esophageal Soft Diet

This diet should consist of bland, soft foods. We suggest cutting up tough meats into tiny pieces and adding sauces or gravies to foods.

Food Group	Choose	Avoid Soft breads, rolls, bagels, bread, bread products that contain nuts, seeds, fresh or dried fruit or are highly seasoned such as garlic Sweet rolls, coffee cake, and doughnuts	
Breads/Grains	French toast Crackers Toasted bread		
Cereals	Unsweetened dry cerealCooked cereals	 Coarse cereals such as Grape Nuts® and granola Any cereals with fresh or dried fruit, sees, or nuts 	
Drinks	 Regular milk as tolerated De-caffeinated tea Powdered drink mixes Non-citrus juices such as apple, cranberry, grape, and blends 	 Chocolate milk Soda (carbonated drinks) Alcoholic drinks Citrus juices such as orange juice, grapefruit juice, lemon and lime Drinks that contain herbal ingredients such as St John's Wort or ginseng Drinks with caffeine: coffee, tea, decaf coffee 	

Meat and Alternatives	 Finely ground lean beef, lamb, pork, veal, fish, and poultry (not fried) Eggs prepared any way except fried Cottage and ricotta cheese Mild cheeses such as American, Brick, baby Swiss, or Mozzarella Plain or flavored yogurt Tofu and soy products Smooth peanut butter Casseroles prepared with allowed ingredients 	 Tough meat with gristle Highly seasoned, smoked, or fatty meats/fish/poultry such as hot dogs, lunch meats/cold cuts, sausage, bacon, spareribs, goose, duck, beef brisket Chili and other spicy foods Strong flavored cheeses such as sharp cheddar and cheese that contains peppers or other seasonings Crunchy peanut butter Yogurt that contains nuts or seeds 	
Potato and Starches	 Peeled white or sweet potatoes White Rice and barley Pasta such as enriched noodles, spaghetti, and 	Fried potatoes, potato skinsFried, brown, or wild ricePopcorn	
Fruits	 macaroni. Canned fruit Cooked fruit (no skins) Fruit juice, except citrus 	 Fresh or dried fruit Citrus fruits and juices (orange, grapefruit, lemon, lime) 	
Vegetables	Cooked vegetables without seeds or skins, such as asparagus tips, baby peas, carrots, green beans, and winter squash.	 Raw vegetables Tomatoes, tomato juice, tomato sauce or puree Gas-producing vegetables such as broccoli, Brussels sprouts, cabbage, cauliflower, corn, cucumbers, green peppers, onion, radishes, sauerkraut, and turnips Dried beans, peas, and lentils 	
Soups	 Mildly flavored meat stock Creamed soups made with allowed ingredients 	Highly seasoned soups and tomato- based soups	

Desserts	 Plain cakes, cookies, puddings, custard, ice cream, ice milk, frozen yogurt, and sherbet. Gelatins, popsicles 	Desserts that contain chocolate, coconut, nuts, seeds, fresh or dried fruit, peppermint, or spearmint
Sweets Eat small amounts and with a meal. Note: If you have dumping, you may need to avoid these.	 Sugar, syrup, honey, jelly, and seedless jam. Unfilled hard candies and plain candies made with allowed ingredients. Molasses Plain cake, cookies, pudding, custard, ice cream, ice milk, frozen yogurt, sherbet, fruit ice, and popsicles. 	 Jam and marmalade, preserves made with seeds or fruit Chocolate sweets/candy Desserts that contain chocolate, nuts, coconut, seeds, peppermint, or spearmint Dried or fresh fruit

Example Meal Plan for Esophageal Soft Diet:

Breakfast

Canned fruit Cold/hot cereal (½ cup) 1 slice toast Margarine (1tsp) Milk (1/2 cup)

Midmorning snack

Blended yogurt (1/2 cup)

Lunch

Meatloaf Mashed potatoes (1/2 cup) Low fat gravy Canned peaches (1/2 cup) Milk (1/2 cup)

Afternoon snack

Turkey (2 ounces) 4-6 saltine crackers Fruit juice (1/2 cup)

Dinner

Roast chicken (ground) 3 ounces Baked potato (small) Margarine (2-3 tsp) Cooked carrots (1/2 cup) Canned pears (½ cup) Milk (1/2 cup)

Bedtime snack

Cottage cheese (1/2 cup) Canned peaches (1/2 cup) Fruit juice (1/2 cup)

Returning to "Normal Diet"

There are no set rules as to when you will be able to return to eating the foods you ate prior to your surgery. Each person's situation is unique. In most cases, once the doctor says that you may go back to a normal diet, you will want to add one new food item each day and see how you tolerate the food before adding another food.

Teach Back

What is the most important thing you learned from this handout?

What changes will you make in your diet/lifestyle, based on what you learned today?

If you are a UW Health patient and have more questions, please contact UW Health at one of the phone numbers listed below. You can also visit our website at www.uwhealth.org/nutrition

Nutrition clinics for UW Hospital and Clinics (UWHC) and American Family Children's Hospital (AFCH) can be reached at: (608) 890-5500.

Nutrition clinics for UW Medical Foundation (UWMF) can be reached at: (608) 287-2770.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 6/2019 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#368

Calorie Count Sheet

Please record the foods and amount you are eating when you get home. Bring this back with you when you return for clinic visit.

Amount of food	Weight	Date
	Amount of food	Amount of food Weight