

Choose nourishing drinks such as full fat milk, milkshakes, hot milky or yoghurt drinks in preference to water, squash, tea or coffee. Choose soft foods that are easy to swallow, chew your food well and lubricate all food with gravy, sauce or custard

Q Should I eat and drink together?

It is a good idea to drink between meals so that you do not feel too full to eat

Q How often should I eat?

The amount of food your stomach can hold is less than normal so it is important to eat regular snacks in addition to your smaller meals. This will help to stop you feeling dizzy or irritable from hunger.

Q Why do I get acid/food reflux and how can I stop it?

There is no muscle at the top of your stomach, so food and acid can travel up into your mouth. To prevent this:

Sit upright during and after eating

Do not bend over or lie down after eating

Eat your last meal or snack a few hours before bed

Try sleeping with extra pillows to raise your head or raise the head of your bed on bricks/wood.

Plan activities between mealtimes, so that food has gone down first. This is particularly important if you need to bend down or raise your arms

Take an inflatable pillow on long journeys

Talk to the medical team as medication may have a role in improving your symptoms

Q Why do I sometimes feel weak, sweaty or lightheaded after eating?

If you experience these symptoms soon after eating, it may be caused by the quicker movement of food into your small intestine. These symptoms can be avoided by restricting sweet or sugary foods. This problem is not very common so you should not avoid sweet things unless you notice these symptoms. If you feel weak, faint, cold or sweaty about two hours after a meal eat a small carbohydrate snack, such as a banana.

Q Why is it difficult to talk during or after eating?

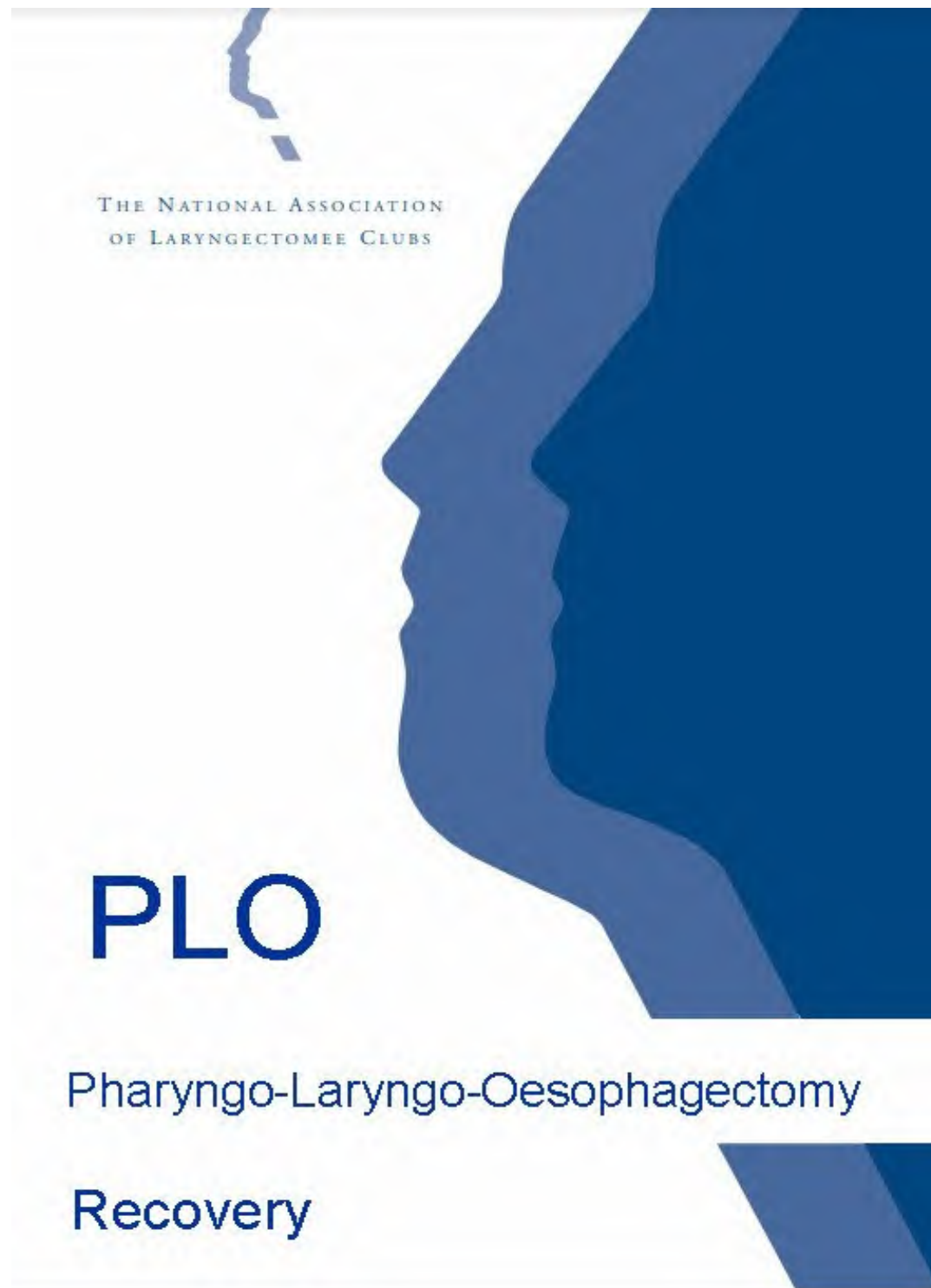
When you start to speak, the pressure in the chest is raised to allow air to be pushed out.

You could:

Make telephone calls before eating

Get an answerphone and return calls when it suits you

Plan your meals and drink around what you have to do and what you want to achieve



Speech After PLO

Q What are my options for communication?

Surgical voice restoration	Electrolarynx
Oesophageal speech	Mouthing

Q Many laryngectomees seem to have surgical voice restoration offered at the time of their operation. Can I have a voice prosthesis?

PLO operation is more extensive than a laryngectomy, and most surgeons prefer to wait until the new gullet has healed well before placing a voice prosthesis. Surgical voice restoration works well for only a small number of PLO patients because the prosthesis lies in the new, reconstructed gullet rather than the throat tissue, often preserved in laryngectomees, giving a quite wet whispered voice quality. The effort of producing the new 'voice' may also add to reflux problems. Your Surgeon and Speech and Language Therapist will be able to tell you if a voice prosthesis will help you.

Q When can I be considered for a voice prosthesis?

This will be determined by how quickly your body heals, and whether you need radiotherapy. This may be about six months after your treatment

Q How can I reduce the reflux from my stomach when I talk?

Try to relax and reduce the effort you put into your speech, whichever method you are using. Greater effort will no longer give you a louder volume. Instead use lower breathing and mouth clearly. Speaking after meals will need particular care, with upright posture, and a gentle effort.

Q The air rushing out of my stoma as I talk is distracting, and embarrassing. What can I do to reduce it?

Keep developing a relaxed gentle approach to breathing, aiming to develop a pattern that reduces the natural tendency to force the air, seeking a louder volume. The volume of your voice cannot be made louder by stronger breath.

Q Can I develop oesophageal speech (ES)?

The sound of oesophageal speech is made from the pharyngeal tissue vibrating in laryngectomees. The upper gullet, which now forms part of your throat, will be

involved in making the sound. This gives a wetter and softer sound than a laryngectomy but it is still possible to develop ES. The effort of producing this type of speech can add to reflux problems though.

Eating and Drinking

Q What should I eat

It is important to eat a balanced diet to give you all the nutrients your body needs. Try to eat the following every day:

Starchy foods, such as, cereals, pasta and rice.

Protein sources, such as, tender meat, fish, eggs, milk and cheese.

Dairy products, such as, milk, cheese, yoghurts and cream.

Fruit and vegetables.

Food containing fats and sugar

If you include sugar, remember to clean your teeth regularly to prevent tooth decay. This is particularly important if you have had or are going to have radiotherapy treatment.

Q Will I need to eat different sorts of food?

Keep to soft foods for about two weeks after you start to eat, then gradually introduce other foods such as tender meat in casseroles, fish in sauce, cauliflower cheese and cooked vegetables. The dietitian will give you further advice and ideas about foods to try.

Q Why might I lose weight?

You lose weight when you eat fewer calories than your body needs. You now have less space in your stomach, so are not able to store the same amount of food. This means you cannot eat as much as you used to and you will feel full very quickly after a meal. You may also have difficulty swallowing initially and occasionally some people have long term difficulties.

Q How can I prevent weight loss?

You need to increase the amount of calories you are eating or drinking by:

Eating small, frequent meals and snacks. Enrich your food/drinks by adding milk powder, grated cheese, mayonnaise, cream, butter, olive oil, powdered nuts, full fat milk and yoghurt