Guidelines following insertion of your Oesophageal Stent

Information for Patients & their carers
INTRODUCTION

You have been advised to have a tube called a stent put into your gullet in order to make swallowing food easier. You may be feeling very anxious about this and have many questions.

This information booklet has been written to help you, your family and friends understand what a stent is and how it is placed into the gullet. The booklet will also give you helpful tips and advice on living with your stent, and what to do if problems occur.

This leaflet is also available in large print and can be translated into other languages on request. Please contact the Quality Manager
Tel: 01752 245136
A stent is a flexible tube made of a wire mesh. When it is placed into your gullet it expands so that food and drink can pass from your mouth to your stomach (see picture over page).

Stents can come in various lengths and are not always permanent.

The procedure can be carried out in the Endoscopy Unit or cardio-thoracic theatres at Derriford hospital. The stent is put in while you are under a general anaesthetic so you will not be aware of the process. Once in position the diameter achieved is in region of 2cm (just under an inch)

Depending on the type of stent used expansion can either be immediate or will carry on expanding over the next 24 hours.

When you return to the ward you may have an intravenous infusion of fluids (a drip) to stop you feeling thirsty. Any discomfort or pain can usually be relieved by antacids. However painkillers are available if required.

When given permission by the doctors, you will be allowed to start with sips of fluid and will quickly build up to eating solid food again. See dietary guidelines on page 5.
A DIAGRAM SHOWING A STENT IN THE GULLET
GUIDELINES FOLLOWING INSERTION OF YOUR STENT

- **Medicines:** You will go home from hospital with an acid reducing tablet such as Omeprazole, Lansoprazole or Rabeprazole. **You should take this tablet regularly at home.** You will also go home with an antacid liquid medicine eg. Algicon. You should take 20mls regularly after each meal and before going to bed. If prescribed Metoclopramide (an anti-sickness drug) take it ½ hr before meals as this increases the food emptying from the stomach.

- **Tips when eating:** Chew food well. As a guide chew each mouthful for twice as long as usual. Wear dentures if needed.

- Eat slowly and try to relax!

- Sit upright to eat, allowing gravity to help food pass down the tube into your stomach.

- Keep sitting upright for at least ½ hr after eating.

- **Sip drinks during your meals.** Fizzy drinks or warm drinks are recommended. This is important to help keep the stent clear.

- Avoid eating up to 1 hr before going to bed.

- Bend your knees when picking anything up from the floor, rather than bending from the hips, this will stop acid reflux.
**DIETARY GUIDELINES FOLLOWING INSERTION OF YOUR STENT**

**Day 1 - Day of Stent Insertion**
When given permission by the doctors, start with sips of fluid and build up quantity as you feel more confident.

**Day 2** - Foods can now be introduced. It is best to start with foods which are runny and smooth, e.g. Soups, porridge, custard, smooth yoghurt, milk pudding.

**Day 3** - You can now progress to a soft or semi-soft diet. Foods should be moist with lots of added gravy. Gradually increase the texture of your food and discover the types and textures of food you can manage best.

- **Meals should be small and frequent.** You may find having 5-6 smaller meals, snacks and nourishing drinks per day easier to manage than 3 large meals. This is especially important if your appetite is poor and you suffer from indigestion/reflux.

- **Have plenty of sauces, gravy or custard with your meals.** It will make your food moist and easier to swallow.

- **Avoid eating up to one hour before going to bed.**
Eat foods from all the different food groups. This will ensure you receive all the nutrients your body needs to function.

Meat, fish and poultry
Dairy products
Potatoes & Starchy Foods

Fatty and sugary foods
Fruit and vegetables
Fluid

Additional comments: Foods such as bread and toast may cause your stent to block. This is why they have not been included in the suggested meal plan. However, you may find you are able to manage them. It is best to ask your dietitian about Any foods you would like to try that are not listed.
GUIDANCE ON FOOD CONSISTENCY

<table>
<thead>
<tr>
<th>Food</th>
<th>Suitable Consistency</th>
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</table>
| Meat            | ✓ Tender cuts of meat, cooked slowly to tenderise  
|                 | ✓ Minced or liquidised meats  
|                 | ✓ Have with gravy or sauce  
| Fish            | ✓ Flaked or mashed fish with sauce  
|                 | ✓ Remove all bones  
|                 | ✓ Poached, steamed and boil in the bag fish with sauce  
| Eggs            | ✓ Scrambled, poached, boiled and mashed  
|                 | ✓ Omelette  
|                 | ✓ Soufflé, egg custard  
| Cheese          | ✓ Grated cheese or in a sauce  
|                 | ✓ Cottage cheese  
|                 | ✓ Cream cheese/spread  
| Breakfast Cereals | ✓ Porridge/oat based cereals  
|                 | ✓ Weetabix, Rice Krispies  
|                 | ✓ Cornflakes with plenty of milk to make them soft  
| Potatoes & Starchy Foods | ✓ Mashed with added milk, cream, butter or grated cheese  
|                 | ✓ Inside of a fluffy jacket potato, do not eat skins  
|                 | ✓ Tinned spaghetti or baked beans in sauce  
|                 | ✓ Soft cooked rice and pasta with sauce  
| Vegetable       | ✓ Soft well cooked  
|                 | ✓ Mashed if needed  
| Fruit           | ✓ Soft peeled fruits  
|                 | ✓ Tinned and stewed fruits  
|                 | ✓ Pureed fruits and fruit juice  

| Desserts | ✓ Milk puddings and yoghurts  
|          | ✓ Jelly, custards and mousse  
|          | ✓ Biscuits dipped in drinks |

### Unsuitable Consistency

- Lumpy, chewy meat  
- Tough, gristly meats  
- Hard, crispy meat  
- Fish with bones  
- Dry fish without sauce  
- Battered or crumbed fish e.g. fish fingers  
- Hard boiled eggs unless well mashed  
- Fried eggs  
- Raw or undercooked egg (risk of food poisoning)  
- Lumps of hard cheese  
- Cereal with added nuts and dried fruit  
- Coarse cereals such as muesli, puffed wheat, shredded wheat  
- Hard chips  
- Roast potatoes  
- Crisps and crackers  
- Potato skins  
- Raw or stringy vegetables such as green beans or celery  
- Sweetcorn  
- Salad  
- Fruit skins or fruit pith (orange/grapefruit)  
- Dried fruit or fruit peel  
- Hard fruits  
- Desserts with dried fruit and nuts  
- Dry cakes and biscuits
MEAL SUGGESTIONS

Breakfast

Porridge or instant hot oat cereal made with full cream milk
Weetabix softened with full cream milk
Other cereals (without nuts and dried fruit) soaked in full cream milk
Scrambled or poached eggs made with full cream milk and butter/margarine
Soft fruit (e.g. banana, stewed apple or pear) with creamy yoghurt
Glass of fruit juice

Main Meals

Tender meat with gravy
Shepherds pie/cottage pie
Chicken/beef stew (tender cuts, cooked slowly)
Minced meat and gravy (beef, lamb, pork, chicken, turkey)
Poached/boil in the bag/steamed fish with sauce
Pasta dishes such as spaghetti bolognaise
Corned beef hash

Served with:

Mashed potato made with full cream milk and butter/margarine or the flesh of a jacket potato with butter/margarine
&
Soft, well cooked vegetables such as carrots, cauliflower, mashed swede, broccoli, parsnips, tinned tomatoes (no skins), courgette or mushy peas with melted butter/margarine on the top
Light Meals

Soup - homemade or bought, with added grated cheese/cream
Macaroni/cauliflower cheese
Omelette with grated cheese and tinned tomatoes (no skins)
Tinned spaghetti/baked beans
Jacket potato (inside only) and filling, e.g. butter, grated cheese, tuna and mayonnaise, baked beans

Desserts

Milky puddings
Mousse/blancmange/whips
Creamy yoghurts and fromage frais
Crème caramel/tiramisu
Jelly and ice cream
Sponge and custard (without dried fruit and nuts)
Stewed fruit/soft fruit and cream

Snacks

Biscuits dipped in tea or coffee
Creamy yoghurt/mousse
Banana/peeled pear/peach
Cakes (without nuts and dried fruit)

Drinks

Fruit juice (at least once per day)
Milky drinks - milkshake, hot chocolate, coffee
Tea
Fizzy drinks and squashes
It is possible to increase your intake of calories and protein with only a few small changes to the food you use.

<table>
<thead>
<tr>
<th>Food</th>
<th>Suggestions</th>
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<tbody>
<tr>
<td>Milk &amp; Milky Drinks</td>
<td>Make “enriched milk” by adding 2-4 tablespoons of dried milk powder to 1 pint of full fat milk. Use instead of ordinary milk in drinks, sauces, puddings.</td>
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<tr>
<td>Dairy Products</td>
<td>Always use full fat dairy products - especially milk and yoghurts (better still, use “enriched milk”). Try to include cream, Greek yoghurt, evaporated, condensed or breakfast milk.</td>
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<tr>
<td>Breakfast Cereals</td>
<td>Add sugar, cream, honey, syrup or enriched milk (see above).</td>
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<td>Soups</td>
<td>Add cream, dried milk powder, milk or enriched milk or finely grated cheese.</td>
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<td>Meat, fish, poultry (make sure it is a suitable consistency)</td>
<td>Use plenty of oil, butter or margarine in cooking. Serve with creamy sauce (see below).</td>
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<td>Sauces</td>
<td>Use enriched milk. Add butter, margarine, finely grated cheese, cream, full fat yoghurt, evaporated milk or dried milk powder.</td>
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<td>Mashed potatoes</td>
<td>Serve with milk or enriched milk, butter, margarine, gravy, sauce or grated cheese.</td>
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<td>Vegetables (soft cooked or mashed)</td>
<td>Add extra butter or margarine or serve in a sauce e.g. white or cheese sauce.</td>
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<tr>
<td>Milk puddings &amp; Custards</td>
<td>Make using enriched milk or part cream, condensed or evaporated milk. Try serving with a spoonful of jam, honey or stewed fruit.</td>
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Your dietitian may recommend nutritional supplement drinks to you. Examples include:

- Milkshake powder e.g. Build-up (available at chemists and larger supermarkets in all flavours) made with full cream milk
- Soups e.g. Build-up/Complan made with boiling water and/or hot milk (available at chemists/supermarkets)
- Other products e.g. Ensure Plus, Enlive Plus, Fortisip (available from your GP in a variety of flavours)

Please contact your dietitian if you would like further information and advice.
Once you go home you will not need to be seen again by your surgeon unless you have problems. Please use the contact numbers on page 15 of this booklet if you have any concerns. Problems may include:

**ACID REFLUX**

Acid reflux will occur, as in most cases the stent is positioned across the stomach/gullet opening. To make sure you are comfortable at night, place a number of extra pillows, blankets or something similar at the head of the bed, preferably between the mattress and the bed base to a height of 8 to 10 inches. The doctors may decide to raise the head of your bed 3-4”. If they do a member of the Occupational staff will contact you to arrange this. Please continue to take your antacid tablets regularly at home. If however you continue to get central chest pain through to your back, please talk to your GP or use the contact numbers on page 15.

**PAIN/DISCOMFORT**

Most pain and discomfort should fade after 72hrs. However please contact your GP, Macmillan Nurse, or Hospital Specialist Nurse (see page 15 for details) if you continue to experience pain despite taking antacids and painkillers.
BLEEDING:

Very occasionally stents can cause some bleeding. Please contact your GP if:
1. You cough up blood stained sputum (phlegm)
2. You vomit blood
3. If you pass black tarry stools

SWALLOWING PROBLEMS

These can occur because the stent has either got blocked, or because the stent has moved from its position. If food or liquids will not go down, try leaving it for an hour or so, also try walking around if you are able to. Then try to have a fizzy drink or a warm drink. Sometimes this process needs to be repeated and it can take several hours for the blockage to be relieved.

However if after 24 hours you are still not able to swallow foods or liquids then contact your GP, Macmillan Nurse or your Hospital Specialist Nurse (See page 15 for details). You will be admitted to hospital to have an urgent Endoscopy examination that same day, in order to relieve your swallowing difficulties.
WHERE CAN I FIND FURTHER HELP OR INFORMATION?

Oesophageal Patients Association----------(0121) 7049860

Mustard Tree: Cancer Support centre--------(01752) 763672

Cancerbacup-------------------------- www.cancerbacup.org.uk
                                     (0808 800 1234)

Cancer care society-----www.cancercaresoc.demon.co.uk
                          (01794 830300)

Cancerlink-----------------------------------www.cancerlink.org
                                            (0808 808 0000)

Macmillan Cancer Relief-------------------www.Macmillan.org.uk
                                           (0845601 6161)

This booklet and other local information can be found on
www.plymouthhospitals.nhs.uk

LOCAL CONTACT DETAILS

Dietitian: ------------------------------------------(01752) 792266

Marilyn Bolter:
UGI Oncology specialist nurse---------(01752) 517905