

Speech Pathology  
Royal North Shore and Ryde Hospitals

## Swallowing During Radiotherapy / Chemotherapy

Radiotherapy and chemotherapy can affect your mouth and throat. This can make it hard to eat and drink which can lead to:

- Poor nutrition
- Weight loss
- Feeling tired all the time

You may start to feel these side effects after the first 2-3 weeks of treatment. A side effect is an unwanted symptom of treatment. Side effects will start to improve when you finish your treatment. Some side effects will get better after a few months others can take up to 1 year. Some side effects such as scarring (fibrosis) may develop over time and make it hard to swallow years later. If you are worried about side effects from your treatment it is important to speak to your doctor.

Using a feeding tube can help stop weight loss during treatment. There are two types of feeding tubes.

1. A RIG (radiologically inserted gastrostomy)
2. or a PEG (percutaneous endoscopic gastrostomy)

A feeding tube helps your body to get the nutrition it needs when eating or drinking is hard. A “meal-replacement liquid” is put into the tube. The tube sends the liquid to your stomach. You can still eat and drink if you have a feeding tube.

Reasons why people may find it hard to eat or drink during treatment are:

- pain (odynophagia)
- loss of taste (ageusia/dysgeusia)
- dry mouth (xerostomia)
- thick, sticky saliva
- swelling and/or thickening of swallowing muscles and parts of the mouth and throat. This can make it hard to swallow safely. For example, food or drink may go down the wrong way, or it can feel like food is sticking in the throat after swallowing. Any swallowing problem like this is called ‘dysphagia’
- not feeling hungry or not wanting to eat

It is likely that eating and drinking will become hard during your treatment.

Research and our clinical experience suggests that maintaining eating and drinking through treatment will help you return to optimal eating and drinking following treatment.

**It is important to address any problems that affect your ability to eat and drink straight away. It is best to try to prevent problems as much as possible. If you notice any problems with eating and drinking talk to your speech pathologist.**

## Pain

- Treatment can cause people to feel pain in their head and throat. There are lots of things you can do to make the pain less like taking medication. This is called pain management. It is important to manage your pain during treatment as it can stop you from eating and drinking. Managing your pain means that you can feel comfortable at rest and swallow more easily. As soon as you feel pain you should start taking Panadol (1-2 every 4-6 hrs) and talk to your doctor or nurse consultant.
- It is important to follow your pain management plan. Taking pain medication is OK. It is an important part of your treatment and recovery.
- You can also use numbing gels to help manage your pain. These can make your mouth and throat more comfortable and help you to eat. You can use these up to 15 minutes before eating or drinking to dull some of the pain.
- Thrush is candida bacteria that can grow in your mouth or throat and is common during chemo/radiotherapy. It can be painful and looks like white patches on the gums or tongue. Talk to your treating medical team if you notice any changes. Your medical team will talk to you about the best way to treat thrush and help you feel better.

## Loss of taste

Some people's sense of taste changes during treatment. Changes to taste usually only last for a short amount of time. Most people's sense of taste comes back once treatment is finished. For some people their sense of taste can take longer to come back. Here are some things you can do if you have changes to your sense of taste during treatment.

- Try different flavours in food including those you would not normally enjoy, e.g. try a range of sweet, salty, sour or bitter.
- Changing the temperature of food can also help, e.g. warm food with a good smell can be more appetising.
- Avoid using metal cutlery at meals times to avoid metallic tastes

## Dry mouth

It is normal for your mouth and throat to feel dry during treatment. It is important to keep your mouth clean and as moist as possible.

- Follow any dental advice (reduction in saliva is directly related to tooth decay) – aim to brush teeth 2-3x/day. Running your toothbrush under warm water for 60 seconds before use can soften it and make brushing less painful. Alternatively children's toothbrushes are soft and can be ideal for use during treatment.
- Drink lots of water. Sip regularly throughout the day and drink water with your meals.

- Don't drink alcohol. Alcohol can make your mouth and throat feel drier and it can make treatment less effective.
- XyliMelts (oral adhering discs) may help make your mouth feel less dry mouth. You can use them during the night while sleeping when your mouth can feel very dry. Ask us for advice on how to use them.
- Use sodium bicarb mouthwash at least 4x/day, especially after meals and from the beginning of treatment. This will stop mouth ulcers by keeping your mouth clean. Mouthwash is also good to use when teeth cleaning is painful
- Try drinking fizzy or bubbly drinks like soda water. Bubbly drinks can help break up thick saliva/phlegm (gargle/ rinse-spit/swallow). This may be more effective after radiotherapy has finished.
- Using a nebuliser or putting your head over a bowl of steaming water can help loosen thick saliva/phlegm and make them easier to bring up
- Use AquaSpray (available at the nurses' station) or other dry mouth products especially at night
- Chewing gum/sucking sugar free lollies can make more saliva in the mouth(\*please note, chewing gum can stop you feeling hungry)

### Swallowing difficulties (i.e. "dysphagia")

You may find it hard to chew food or swallow food and drink. Sometimes people describe this feeling as food or drink "going down the wrong way". This is called aspiration. Signs of aspiration can be lots of coughing, a wet/gurgly voice and may result in pneumonia.

It can also feel like food or drink gets stuck in your throat after swallowing. This happens to a lot of people. A person might need to swallow 2-3 times to clear their throat. They might also need to drink some water to wash food down their throat.

If you find it hard to swallow it is important that you speak with the speech pathologist immediately. The speech pathologist can help by:

- Finding out what the problem is
- Giving you a list of types of food and drink to try that are easier and safe to swallow
- Giving you instructions and exercises to help you swallow safely and more easily

### Loss of appetite

During treatment you may not feel hungry. Some reasons may be:

- RIG/PEG feeds – speak with the dietitian about using bolus rather than pump feeds through the
- RIG/PEG. Always eat first at meals, and then “top up” with RIG/PEG feeding if you have not eaten enough or you find mealtimes very slow
- Slow eating – try eating soft, moist foods with lots of sauce or gravy to make chewing and swallowing easier. You can also try having smaller meals more often, so you do not get overly tired. Always have a drink with your meals
- Loss of taste – Try different tastes or flavours

### Further information

The following link involves a collection of videos that provide you with information and advice on common side effects of cancer treatment such as taste changes, fatigue and loss of appetite:

- <https://www.nslhd.health.nsw.gov.au/HealthInformation/nutritiontalks/Pages/default.aspx>

“Beyond Five” is a website that gives information and support on cancer diagnoses, treatments, health and wellbeing, and general information for caregivers, family and friends and health professionals:

- <https://www.beyondfive.org.au/>

**If you have any concerns or questions, please contact the Speech Pathology Department:**

**RNSH – 02 9463 1622**

**Ryde – 02 9858 7812**