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Dietetic Department



Palliative Care Dietary approach



Eating and drinking are vital for life, apart from providing nutrition, food could be used to show "love" and "care" to the beloved ones. However, palliative patients may reduce oral intake due to changes of health condition and emotions, as well as side effects of medication. Therefore, general healthy eating guidelines is inappropriate for them.

Physical
Palliative dietary approach other than focusing on nutrition adequacy; physical, mental, social and spiritual aspects are also essential. We hope that patients could improve quality of life, live comfortably and peacefully in the last journey of lifetime.

Spiritual

Dietary target of palliative care

OS Palliative treatment in the earliest stage

Target: Improving quality of life and symptoms control

Suggestion: To improve patient's strength by encouraging intake of nutrient-dense food and drinks



S Palliative treatment in the later stage

Target: Focusing on the comfort of patient

Suggestion: To provide food and drinks that patient prefers, for food enjoyment

*** Avoid forcing patients to eat if their appetite is poor, as this would create unnecessary pressure on them.

Changes of general condition



With reference to some research, palliative patients may not have any desire of hunger and thirst, and their nutrition requirement will be changed according to their health condition, for example:

- Prolonged limited oral intake -> slows down metabolism -> reduces nutrition requirement
- Long-term bedbound or minimal physical activity -> reduces nutrition requirement and appetite
- Declined gastrointestinal digestion -> lessen sense of hunger and satiety -> reduces tolerance of food

Palliative patients might present symptoms that could affect food intake, for example:

Pain, nausea, vomiting, shortness of breath, poor appetite, insomnia, constipation, diarrhea, oedema, dry mouth, abdominal bloating, ascites, skin itchiness, swallowing difficulty and confusion.

***Appetite may be better if these symptoms are improved.

The last journey

- When health condition deteriorates, avoid hassling patients for food intake, as this would build physical and psychological burden on them.
- When approaching the end of life, patients' will should be respected if they refuse food intake. Family could walk along the journey's end with patient in a peaceful and harmonious way.



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