

Ernæring ved senfølger til kræftbehandling

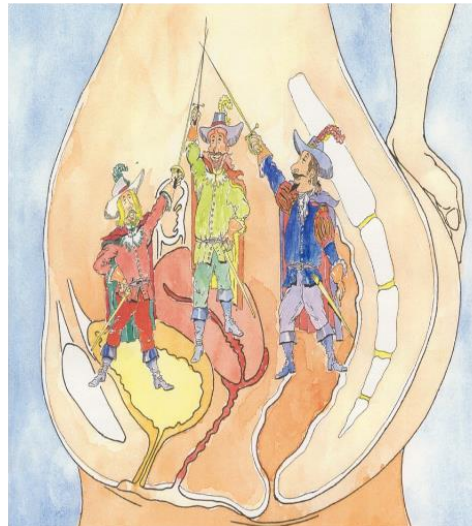
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Medicinsk senfølgeklinik

- Hvor stor en andel af tidl. kræftpatienter får gastrointestinale senfølgesymptomer?
 - 10% blå seddel op
 - 25% gul seddel op



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Prostate Cancer

The Choice Between a Therapy-Induced Long-Term Symptom and Shortened Survival Due to Prostate Cancer

Thomas Hopfgarten ^{a, c}, Jan Adolfsson ^d, Lars Henningsohn ^{a, b}, Erik Onelöv ^a, Gunnar Steineck ^{a, e, f, g}

and 78% for restricted diet. Thirty-seven percent of the men in the study were willing to accept fecal leakage if there was only the slightest chance to gain survival.

Bakteriel overvækst i tyndtarmen

- Hvad har vi og andre fundet
- Hvordan behandler vi

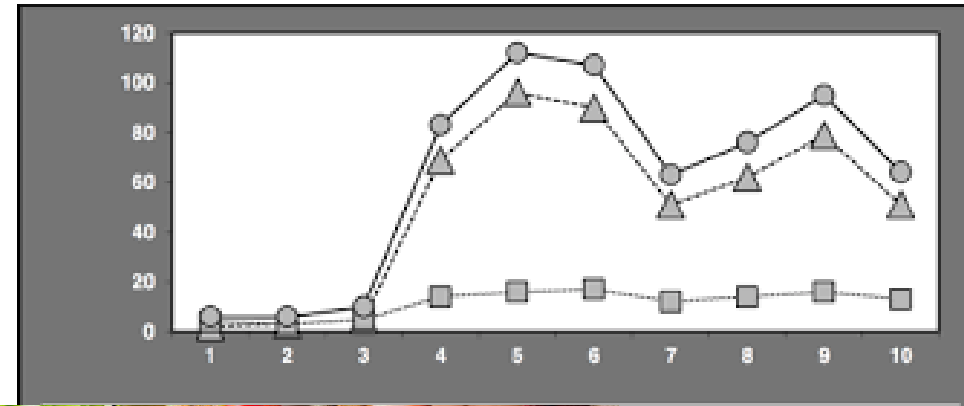
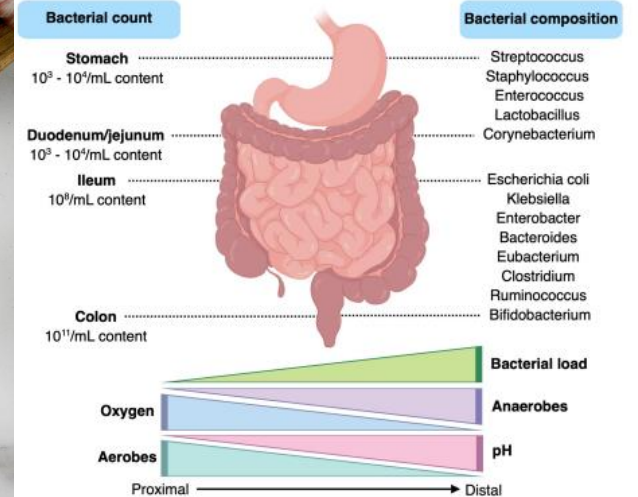


Table 3. The most prevalent new gastrointestinal and nutritional diagnoses made in the GIANT clinic.

Diagnosis	Prevalence, n (%)
(n = 325)	
Small intestinal bacterial overgrowth	151 (46)
Vitamin D deficiency	124 (38)
Bile acid malabsorption	90 (28)
Gastritis	72 (22)
Radiation-induced telangiectasia resulting in rectal bleeding	65 (20)
Vitamin B12 deficiency	55 (17)



Galdesyremalabsorption (BAM)

- Hvilke kræftbehandlinger kan medføre BAM?
 - – stråler, resektion, kemoterapi
- Reduktion af fedtindtag svt 20% af totale energibehov, E

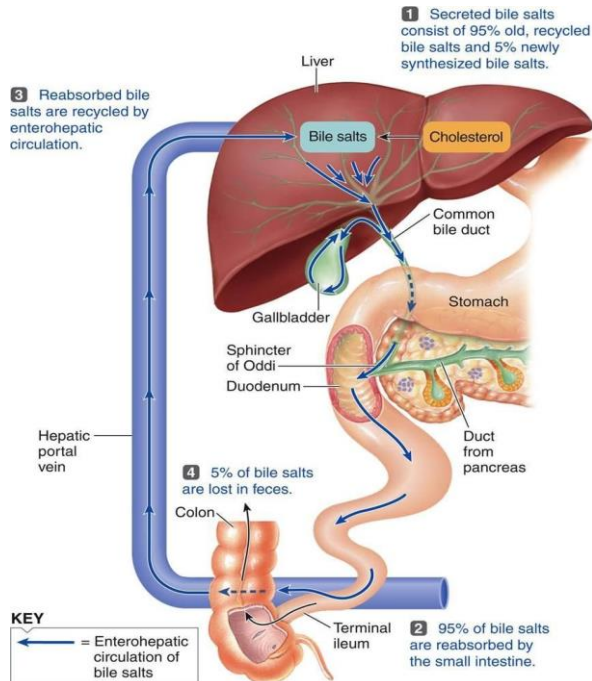


Table 2 Response of gastrointestinal symptoms, as recorded in patient questionnaires, after treatment in a study of patients with suspected bile acid malabsorption after cancer therapy

	Change in symptom score [n (%)]				Wilcoxon test	
	Improvement	No change	Worse	Did not have symptom	Z score	Asymptomatically significant (two-tailed) p value
BAM cohort—all patients with a positive SeHCAT (n=143)						
Overall GSRS score	100 (70)	11 (8)	32 (22)	0 (0)		
Urgency	97 (68)	30 (21)	13 (9)	3 (2)	-7.000	0.000
Faecal incontinence	79 (55)	24 (17)	16 (11)	24 (17)	-6.506	0.000
Wind	62 (43)	53 (37)	24 (17)	4 (3)	-4.233	0.000
Nocturnal defaecation	62 (43)	24 (17)	15 (10)	42 (29)	-5.570	0.000
Tiredness	58 (41)	58 (41)	19 (13)	8 (6)	-4.137	0.000
Abdominal pain	57 (40)	50 (35)	17 (12)	19 (13)	-4.994	0.000
Bloating	47 (33)	45 (31)	25 (17)	26 (18)	-4.598	0.000
Steatorrhoea	45 (31)	21 (20)	21 (15)	49 (34)	-3.328	0.001
Pure BAM cohort—no other GI diagnoses (n=53)						
Overall GSRS score	41 (77)	4 (8)	8 (15)	0 (0)		
Urgency	32 (60)	12 (23)	6 (11)	3 (6)	-3.137	0.002
Faecal incontinence	31 (58)	11 (21)	3 (6)	8 (15)	-4.657	0.000
Nocturnal defaecation	26 (49)	7 (13)	2 (4)	18 (34)	-4.337	0.000
Abdominal pain	23 (43)	14 (26)	5 (9)	11 (21)	-3.524	0.000
Bloating	20 (38)	15 (28)	7 (13)	11 (21)	-2.467	0.140
Wind	20 (38)	19 (36)	12 (23)	2 (4)	-1.816	0.069
Tiredness	19 (36)	19 (36)	9 (17)	6 (11)	-1.958	0.050
Steatorrhoea	17 (32)	7 (13)	6 (11)	22 (42)	-2.683	0.007



Effekt diætintervention

- 89 SF patienter henvist til diætist
- Intervention baseret på kendt patofysiologi og en 7-dages kostdagbog
 - fedt-reduceret diæt, 44 patienter (49 %)
 - low FODMAP diæt, 19 patienter (21%)
 - modificering af fiberindhold, 19 patienter (21%)
 - gluten-fri diæt, 1 patient (1%)
 - andre kostråd, 6 patienter (7%)
- Tværsnitsstudie, 1.239 tidl. colon cancer patienter, respons rate 80.4%, 53% mænd
 - 24% husker at have fået kostvejledning
- 44 sundhedsprofessionelle specialister i colon cancer udfyldte et spørgeskema om, hvordan de rådgiver patienter
 - 93% angiver at give kostvejledning

