

An Introduction to Home Care for Esophageal Cancer

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Abstract: Esophageal cancer is a common tumor of the digestive tract and is a malignant tumor which affect one's health and is potentially life threatening. The incidence and mortality rate of esophageal cancer in China is relatively high, with the incidence rate being the sixth highest and the mortality rate being the fourth highest among all malignant tumors. The lesion often occurs in the middle segment of the epithelium of the esophagus, often showing a family tendency, and is more likely to occur in middle-aged and elderly men. The typical symptom of esophageal cancer is progressive dysphagia, first with dry food, then with semi-liquid food, and finally with water and saliva. Treatment is divided into surgical treatment, radiotherapy, chemotherapy, and combination therapy. Apart from malnutrition and pain, the treatment can also cause great psychological stress to patients with esophageal cancer. Therefore, diet, pain, and psychological care for patients with esophageal cancer are crucial. Therefore, it more care is given to the patients by medical and nursing staff during hospitalization. However, not much have been discussed about home care for patients with esophageal cancer. In this article, we will talk about the home care of esophageal cancer patients from the following aspects: dietary, pain management, and psychological care.

Keywords: Esophageal cancer; Home care

Online publication: September 5, 2022

1. Dietary care

In general, patients with esophageal cancer should be given a light, easy-to-digest soft diet that is high in protein, vitamins, and low fat, and avoid rough and hard foods ^[1-3]. Family dietary guidelines:

- (1) A balanced diet with protein-rich foods, such as eggs, milk, lean meat, and soya products.
- (2) Eat more vegetables and fruits rich in vitamin A and vitamin C, such as eggplant, pumpkin, carrot, persimmon, leek, spinach, orange, grapefruit, red dates, and hawthorn, kiwi, etc.
- (3) Focus on a varied diet to increase the patient's appetite.
- (4) Choose soft, light, easy-to-chew foods such as soft rice, thin rice, yogurt, bread, steamed buns, buns, eggs, chicken, potatoes, bananas, and many more. For those who have difficulty swallowing, food can be chopped, boiled, or pureed.
- (5) Eat small amounts of food in small portions and do not overeat.
- (6) Do not eat moldy rice, noodles, peanuts, and other foods containing aflatoxin, and avoid harsh condiments, tobacco, and alcohol.
- (7) Consume foods that help boost the immune system, such as fungus, mushrooms, carrots, tomatoes, soybeans, citrus, lemons, and hawthorn.

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- (8) Patients with constipation should drink more water, consume more fresh vegetables, fruits, mixed grains, yogurt, and increase
- (9) If there is a drop in white blood cells, they should be supplemented with high protein foods such as lean meat, milk, fish, animal liver, dates, cinnamon, mushrooms, walnuts, etc ^[4-6].

2. Pain management

Cancer pain is one of the common symptoms of a middle to late-stage tumor. It is a pain directly caused by tumor invasion, compression of surrounding tissues, or causing local necrosis, ulceration, inflammation, etc. The pain of esophageal cancer is characterized by burning pain and dull pain behind the sternum, which is more obvious after consuming overheated or over acidic food. It is difficult to control the pain in the later stage, which is detrimental to the patients' psychological and physiological wellbeing. Therefore, ways of relieving cancer patients' pain has become a major aspect in cancer treatment ^[7-10].

- (1) Patients with pain rest more, avoid fatigue, and should not do backward bending or gyration of the head.
- (2) Analgesic treatment has become the primary humanitarian treatment for patients with advanced cancer, and the accurate and timely use of medication is of paramount importance. Patients should take medication according to the prescription by medical staff, and family members and medical staff should jointly supervise patients to take medication and monitor the condition of the patients after medication. For example, oxycodone hydrochloride extended-release tablets must be swallowed whole and must not be broken, chewed, or ground. If the tablets are broken, chewed, or ground, it will lead to rapid release of oxycodone with a potentially lethal amount of absorption.
- (3) Prevention and care of adverse drug reactions should not be neglected. Nausea, vomiting, and dizziness, usually occurring early in the course of drug administration, should be treated with appropriate antiemetic drugs such as metoclopramide hydrochloride, promethazine hydrochloride, and domperidone tablets if nausea and vomiting are severe. Constipation is also a common adverse reaction. Appropriate laxatives, increased fluid intake and coarse fiber foods should be used to increase gastrointestinal motility and relieve constipation. If the patient experiences any other discomfort, further communication with a healthcare provider is needed ^[11-15].
- (4) Of course, maintaining emotional stability and a positive mindset will increase your tolerance of pain.

3. Psychological care

The psychological state of patients with esophageal cancer varies at each stage, and good psychological care for patients with esophageal cancer plays a particularly important role in prolonging their lives ^[16].

- (1) At the early stage of the disease, patients are mostly in a state of denial and disbelief. At this stage, family members should be understanding and provide care and comfort as well as companionship in order for the patient to gradually accept reality.
- (2) After a period of examination to further clarify the diagnosis, the patient will mostly experience anxiety, fear, impatience, irritability, or even show extreme behavior such as suicide. During this period, family members should talk to the patient more often, talk about topics of interest to the patient, allow patient's subjective initiative in treatment, care for, understand, and help the patient in order to eliminate the patient's fears.
- (3) In the later stages of the disease, as the condition worsens and the physical discomfort intensifies, patients will once again become unstable. At this time, patients need more comfort and care from their families, who should pay attention in listening to patients' words and understanding their thoughts when talking to them. Studies have shown that good psychological care plays an important role in enhancing patients' resistance, boosting their confidence in overcoming the disease, and helping them to actively cooperate with treatment.

In recent years, certain progress has been made in the diagnosis and treatment of esophageal cancer, and more healthcare professionals are paying attention to improving the quality of life of patients with esophageal cancer while treating them. Tumor patients are a whole group of people, and to focus only on the tumor itself and neglect the improvement of the quality of life of tumor patients is not the fundamental aim of tumor treatment. Fortunately, esophageal cancer inpatients are receiving more and more attention in terms of diet, pain, and psychology. The quality of life of patients with esophageal cancer will be further improved and enhanced with the cooperation of home care after discharge and medical care measures during hospitalization ^[17].

4. What are the ways to prevent esophageal cancer?

Esophageal cancer is more common among middle-aged and elderly people, and the incidence of the disease has been increasing in recent years, posing a serious threat to people's health and lives. Many factors can lead to esophageal cancer disease, and poor living and eating habits are the main factors that can lead to esophageal cancer disease. So, what are the ways to prevent esophageal cancer?

- (1) In order prevent esophageal cancer, bad eating habits need to be changed because the mucous membrane in the esophagus is easily damaged. Consumption of foods that are too hot or rough might cause the mucous membrane to bleed and ulcerate for a in a long run, which may trigger the disease. This is why it is important to eat food at a moderate temperature, especially when eating hot pot, and to avoid swallowing broken bones and fish spines, which can easily damage the mucosa of the esophagus.
- (2) Drinking and smoking are known to be harmful to health. Smoking and drinking may also trigger esophageal cancer, so the habit of smoking and drinking should be stopped for a better health. The nicotine in cigarettes and the alcohol in wine can damage the mucous membrane of the esophagus, causing it to be in a state of hematoma for a long time.
- (3) Wasting food is a shameful thing to many. Therefore, some still continue eating their food even when it is mold or spoiled instead of disposing it to avoid wastage. While it is true that thrift is a traditional virtue in China, it should be based on maintaining good health. Frequent consumption of moldy or pickled food, such as salted fish, salted meat, and pickled vegetables, may trigger esophageal cancer.
- (4) In order to prevent esophageal cancer, a balanced intake of nutrients is needed. If there is an imbalance of nutrients and the body lacks fiber, vitamins, and proteins, it will have a greater impact on the immune system. Consumption of fresh vegetables, fruits, and whole grains, and drink some green tea is highly encouraged as it has certain anti-cancer properties ^[18-20].

5. Additional tips

The occurrence of esophageal cancer does not happen overnight. Middle-aged and elderly people who are over 40 years old, especially those who live in areas with a high incidence of esophageal cancer, need to pay more attention to it, and as well as male compatriots. For people who usually like to drink alcohol and eat pickled food, if they often experience pain behind the sternum, difficulty in swallowing, or abnormal body discomfort in recent times, they must pay attention to these symptoms, which are likely to be early signals of esophageal cancer. This will greatly improve the survival rate of the patient and prevent the disease from becoming incurable by the time it is discovered.

Disclosure statement

The authors declare no conflict of interest.

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