

## Helping your child to eat

*If your child is going through, or has recently had brain tumour treatment, such as chemotherapy or radiotherapy, they may experience changes to their appetite. This can be very worrying for you as a parent, particularly when combined with so many other things you have to think about.*

*This fact sheet gives some practical suggestions for helping your child to eat. It is also a good idea to speak to a member of your child's health team, such as their clinical nurse specialist, for further advice.*

### In this fact sheet:

- Appetite changes that your child may experience
- Helping your child to eat
- Answers to some common questions you may have about helping your child to eat

## Appetite changes that your child may experience

It is not uncommon for children undergoing treatment to experience a reduction or temporary loss of appetite. This could be linked to stress and anxiety, or it could be a direct result of treatment itself.

### Changes that your child might experience include:

- Poor appetite – this is a common side-effect of both radiotherapy and chemotherapy.
- A change in taste – if your child has had chemotherapy, they may experience foods as more salty or as having a 'metallic' or bitter taste.
- Sore throat and/or dry mouth – this can be a side-effect of radiotherapy and chemotherapy or due to an opportunistic infection with candida (oral thrush).  
(An opportunistic infection is an infection by a microorganism that normally does not cause disease but does so when lowered resistance to infection is caused by the impairment of the body's immune system).
- Vomiting or feelings of nausea.
- Increased appetite – your child could temporarily have a larger appetite following chemotherapy, particularly if they are also taking steroids.

These changes should fade gradually after treatment finishes. If, however, they persist or you are concerned about any changes to your child's appetite or weight, please speak to a member of their health team.

## Helping your child to eat

Different children will find different things helpful, but here are some suggestions you could try:

### If your child has a reduced appetite:

- Avoid putting your child under too much pressure to eat, which can be distressing. Try not to make mealtimes a battle and, if they become overly upset, accept your child not eating.
- Try giving your child smaller snacks more frequently and letting them eat when they want to, rather than insisting that they stick to three regular meals each day.

- Give your child foods that they enjoy and do not become too focused on the nutritional value of each meal. Food that you may not usually encourage them to eat will have some nutritional value and will be better than not eating or eating very little of what are traditionally considered to be 'healthy foods'.
- Although you may intuitively wish to give your child lots of fruit and vegetables, you may wish to avoid this as they tend to be low in energy and can fill your child up quickly.
- Try to involve your child in what they eat – for example, give them a choice of two or three different meals (but take care not to overwhelm them with too many choices). Perhaps involve them in planning what food the family is going to have that week and plan in treats that they can look forward to in order to make mealtimes more enjoyable.
- Try to take advantage of your child's appetite at times when it is greatest.
- Meal supplement drinks can be a good way to increase your child's nutritional intake. These come in a range of flavours. Before giving any supplements to your child, you should always seek advice from their doctor as some could interfere with treatment. Your doctor will be able to recommend a good brand that they feel will meet your child's needs.
- Avoid allowing your child to fill up on drinks before mealtimes.
- It can be helpful for you to keep a diary of exactly what your child is eating. You may be surprised that they are actually eating more than you had thought and it may help you identify when they seem to be hungriest and serve meals or snacks at these times. Seek guidance from your child's doctor about whether they are eating enough.

### If your child's taste has changed:

- Foods such as pineapple, mints and boiled sweets can leave a sweet and pleasant taste in the mouth, particularly if your child finds that other foods taste bitter.
- Some children find that chewing gum after taking chemotherapy tablets can help reduce the initial after-taste.

- Try adding sauces or herbs to flavour food if your child is not enjoying the taste of foods they usually would. You may find they begin to like stronger flavours than they have in the past as they override the flavour left by medication.
- Some parents find that giving positive attention (praise, hugs or enjoyable conversation) immediately after their child has eaten something however small or has tried a new food, is helpful in encouraging desired eating behaviours.

#### **If your child is experiencing nausea:**

- Foods that are very greasy can worsen nausea, as can some dairy products. It may be useful to keep a food diary of what your child has eaten and how they felt to help identify which foods are best to avoid.
- Some children undergoing treatment may prefer to eat food cold rather than hot, particularly if they are experiencing nausea. In a similar way, some children find ice lollies help with nausea and are a good way keeping hydrated.
- Ginger (for example, gingerbread men or ginger biscuits) can help to settle the stomach.
- Try to give your child snacks to eat 'little and often' rather than trying to get them to eat three 'regular' meals each day.

#### **If your child has a sore throat or dry mouth:**

- Give them soft foods (such as pasta, shepherd's pie, yoghurt and ice cream) and foods with sauces, which are easier to swallow. If they are very uncomfortable you may find soups help or you could try chopping their dinner into much smaller pieces than normal.
- Avoid serving food while it is very hot.
- Avoid salty foods (such as crisps), acidic foods (such as fruit juices) and spicy food (such as curry) as these can cause further irritation to the mouth.
- Supplements (such as nutritious milkshakes) can be helpful. You should always seek advice from your child's doctor before giving them supplements or vitamins as some could interfere with treatment.

#### **If your child's appetite has increased and they are putting on large amounts of weight:**

- Try to get them to fill up on fruit and vegetables.

- Encourage your child to eat filling foods like pasta and bread.
- Try to limit the fat and sugar content of foods.
- Try giving smaller portions at mealtimes and snacks throughout the day to keep them going.

## *I'm concerned that my child only wants to eat 'junk food'*

You may find that your child only wants to eat 'junk food', for example, burgers. As a parent, you may be used to trying to get your child to eat more healthily. It may reassure you to remember, however, that *all* foods have *some* nutritional value and 'unhealthy' foods are often high in energy. As your child's appetite gradually begins to return to normal, try to introduce other, more nutritious, foods.

## *How can a dietician or nutritionist help?*

A dietician or nutritionist can help to assess your child's nutritional requirements and give dietary advice. The NHS describes a dietician as 'an expert in diets and nutrition' who can provide advice on special diets for medical conditions.

A slightly different role is that of a nutritionist, who is qualified to give advice about general healthy eating but not about special diets for medical conditions. You may wish to ask for a referral to one of these specialists if you are finding it difficult to get your child to eat or are concerned about the amount of weight they are losing or gaining.

## *Should I give my child dietary supplements or vitamins?*

As a general rule, it is usually best for us to get the vitamins our bodies need through a balanced diet. Your child's illness, or the treatments they are having, however, may make this difficult.

If this is the case, their doctor may suggest that they take additional supplements or vitamins. Nutritional drinks or shakes can be a good way of helping your child get the nutrients they need, particularly as they tend to come in a wide range of

flavours. Before giving any supplements or vitamins to your child, you should always seek advice from their doctor as some could interfere with treatment.

## *Is it true that my child has an increased risk of food poisoning?*

Being unwell and having treatment, particularly high doses of chemotherapy, can mean that your child has a higher chance of developing food poisoning from the bacteria 'listeria'. One reason for this is that chemotherapy can lower the number of white blood cells, which play a key role in fighting infection. It is, therefore, best to avoid giving your child soft cheeses, eggs with a runny yolk and pâtés.

It is important to take good care to avoid food-borne infections by ensuring that food is cooked thoroughly and is not used past its 'use by' date. It is also good practice to ensure that your child is washing their hands after using the toilet and before eating to limit the chance of infection and you may want to keep a small bottle of hand wash in your bag for when you are out and about.

For more information about preventing food poisoning, see the NHS Choices website page:

[www.nhs.uk/Livewell/homehygiene/Pages/Foodpoisoningtips.aspx](http://www.nhs.uk/Livewell/homehygiene/Pages/Foodpoisoningtips.aspx)

## *What if my child is constipated or has diarrhoea?*

Constipation and diarrhoea can be a temporary side-effect of medication and can put children off eating and make them dehydrated and uncomfortable. It is important that your child keeps up their fluid intake and that you speak to their doctor for medical advice if they experience either of these. If your child is constipated because of their treatment, high fibre foods may not help (as they often would otherwise) and may make your child more uncomfortable and blocked. Your child may be prescribed laxatives to help with constipation or anti-diarrhoea medicines.

[Continued overleaf >](#)

## Where can I go for further advice?

Speak to a member of your child's health team – their clinical nurse specialist or doctor would be a good first port of call. Sometimes, medication can help with issues such as nausea, sore throat, dry mouth and constipation or diarrhoea.

## Resources

While The Brain Tumour Charity can not recommend any specific resources, you may find the following websites and publications helpful:

### Helping your child to eat: A guide for parents, carers and children coping with cancer

This booklet, published by CCLG, is free of charge to download [www.cclg.org.uk/our-publications/parents-and-carers/helping-your-child-to-eat](http://www.cclg.org.uk/our-publications/parents-and-carers/helping-your-child-to-eat)  
[info@cclg.org.uk](mailto:info@cclg.org.uk) / 0116 259 4460

### Betty Crocker Living with cancer cookbook

Crocker, B, 2001. This book contains 130 recipes, including ones that may help when experiencing nausea, dry mouth and lowered immunity. ISBN-10 0764565494

### What to eat during cancer treatment

Besser, J, 2009. The recipes in this book are intended to help with the side-effects of cancer treatment. ISBN-10 1604430052

**Macmillan Cancer Support website** - gives tips to help your child eat.

[www.macmillan.org.uk](http://www.macmillan.org.uk)

**The Great Ormond Street Hospital website** - Contains information about coping with problems your child may have in relation to eating when they are having chemotherapy.

[www.gosh.nhs.uk](http://www.gosh.nhs.uk)

### Disclaimer:

The Brain Tumour Charity provides the details of other organisations for information only. Inclusion in this fact sheet does not constitute a recommendation or endorsement.

## What if I have further questions?

If you require further information, any clarification of information, or wish to discuss any concerns, please contact our Support and Information Team:

Call: 0808 800 0004

(Free from landlines and most mobiles:  
3, O2, Orange, T-Mobile, EE, Virgin and Vodafone)

Email: [support@thebraintumourcharity.org](mailto:support@thebraintumourcharity.org)

Join our online forums at:  
[thebraintumourcharity.org/forums](http://thebraintumourcharity.org/forums)

## About us

The Brain Tumour Charity makes every effort to ensure that we provide accurate, up-to-date and unbiased facts about brain tumours. We hope that these will add to the medical advice you have already been given. Please do continue to talk to your doctor if you are worried about any medical issues.

We are the UK's leading brain tumour charity. We fund scientific and clinical research into brain tumours and offer support and information to those affected, whilst raising awareness and influencing policy.

We rely 100% on charitable donations to fund our vital work. If you would like to make a donation, or want to find out about other ways to support us including fundraising, leaving a gift in your will or giving in memory, please visit us at [thebraintumourcharity.org](http://thebraintumourcharity.org), call us on 01252 749043 or email [fundraising@thebraintumourcharity.org](mailto:fundraising@thebraintumourcharity.org)

## About this fact sheet



This fact sheet has been written and edited by The Brain Tumour Charity's Support and Information Team and is supported by the Children's Cancer and Leukaemia Group (CCLG).

The accuracy of medical information has been verified by health professionals. Our fact sheets have been produced with the assistance of patient and carer representatives and up-to-date, reliable sources of evidence. If you would like a list of references for any of the fact sheets, or would like more information about how we produce them, please contact us.



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Your notes

**Saving lives through research, information, awareness & policy**

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