



Eating and drinking advice now that you have a stent in your oesophagus, stomach or small bowel

Department of Nutrition and Dietetics

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Introduction

The information contained in this leaflet is for adult patients. You have been given this leaflet as you (or your family member) have had a stent inserted. It gives advice about eating and drinking now that you have a stent.

This leaflet is not for patients under International Dysphagia Diet Standard Initiative (IDDSI) staging. This leaflet is not designed to replace IDDSI recommendations for those patients identified by Speech and Language Therapy (SLT) as having an oropharyngeal dysphagia (swallowing difficulties). Please discuss with the SLT team for further information.)

What is a stent?

If you have a narrowing or blockage in your oesophagus (food pipe), pylorus (part of your stomach) or duodenum (part of your small bowel) a stent may be inserted. This is a small and flexible tube which helps open up the area which is narrowed or blocked so eating and drinking is easier for you.

Will I be in pain?

It is not uncommon after the procedure to have some pain or discomfort for a couple of days whilst the stent expands and settles.

It is important that your pain is well controlled during this time. Please tell your nurse if you are in pain.

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk



What can I eat and drink after the stent is inserted?

After the stent has been inserted, you will be advised by your doctor when you can start eating and drinking. Usually, you will not be able to eat or drink for a short period of time after the procedure. You will be advised after this to start with fluids only. For most patients who have had a stent inserted, they will be able to start introducing more variety into their diet after 24 hours.

To help increase your intake, we recommend this is done gradually to help build up your confidence with eating and drinking again. Foods with a thicker consistency will slowly be introduced with the aim that you will be able to manage a varied softer mashed diet.

It is important to remember there are no set rules and that the consistency you can manage will be individual to you and your condition and some people may struggle to reach a softer mashed diet.

There are 3 stages to follow when reintroducing food and fluid

Stage 1: Fluids only

Stage 2: Semi-solid foods

Stage 3: Softer mashed diet (there are foods you should avoid - these are listed later in this leaflet)

Stage 1: Fluids only (nil by mouth for 4 hours after procedure, then fluids only for 24 hours)

Straight after the procedure you will not be able to eat or drink for a short period of time. After this time, your doctor will advise you that you can start to drink clear fluids and then progress onto other fluids such as tea, coffee, milk and soup. You should initially avoid acidic fluids such as fruit juice as these may cause discomfort following the procedure.

Stage 2: Semi-solid foods (after 24 hours up to two days)

After 24 hours, if you have been able to manage drinking fluids you can then move onto stage 2 which is semi-solid foods. Start to include foods such as jelly, smooth yoghurts, mousse, custard, Ready Brek®, smooth soups, milky drinks and any nutritional supplement products (if you are already prescribed these).

You should follow stage 2 and have semi-solid foods for one to two days and if you manage these well you can move onto stage 3.

Stage 3: Softer mashed foods (to continue long term)

This is the final stage. Softer mashed foods should have a soft/tender texture and be able to be squashed/broken apart with a fork.

If you struggle to move to stage 3, please ask your doctor or nurse to refer you to a dietitian who can provide you with further support and advice.

A softer mashed diet should be continued long term.

On the next page you will find some meal ideas for stage 3 when you have been discharged. On the ward, you will be advised to order meals from the level 5 (minced and moist) and level 6 (soft and bitesize) menus.

Foods and drinks can be fresh, frozen, tinned and can be homemade or ready-made.

Breakfast Porridge or Ready Brek® made with plenty of milk • Weetabix®, Oatibix®, Rice Krispies®, cornflakes - all soaked in warm or cold milk Smooth full fat yoghurt Soft/mashed fruits such as banana, stewed apple Scrambled egg Lunch/ • Stewed, tender meat, mince or keema with plenty of sauce, for example cottage pie, Evening shepherd's pie, corned beef hash meal Similar style dishes with plenty of sauce using Quorn® or soft tofu in place of meat • Fish (no bones) and plenty of sauce, for example fish in parsley sauce, fish pie Mashed potatoes, instant mash, mashed carrots and swede Well cooked vegetables, such as carrots, swede, broccoli, cauliflower Tinned spaghetti or ravioli Well-cooked pasta and rice (not al dente) with plenty of sauce Macaroni cheese or cauliflower cheese (well cooked cauliflower) Kitchri, dahl (well cooked with a sauce) Jacket potato (no skin) with butter and moist fillings, such as tuna mayonnaise, cream cheese, grated cheddar cheese, egg mayonnaise **Pudding** You may want to have a small break before having a pudding Milky desserts, for example semolina, rice pudding, tapioca, shrikhand, kulfi (no bits) Sponge pudding with custard, ice cream, cream Smooth full fat yoghurt Trifle, mousse, Angel Delight®, ice cream, crème caramel, jelly **Snacks** Biscuits, such as digestives, ginger nuts Plain sponge cake with cream or custard Milky drinks, for example Ovaltine®, hot chocolate, lattes or other milky coffees Bite and melt crisps such as Wotsits®, Quavers®, Skips® • Chocolate (no fruit or nuts) · Breadsticks and dips such as smooth hummus, sour cream and chive Tinned fruit, for example pears with whipped cream or ice cream Crackers with butter and grated cheese High protein/energy drinks from the supermarket (for example Complan®) Alternatively, you could make your own: 200mls full fat milk blended together with 1 scoop of ice cream and a flavouring of your choice - chocolate powder, strawberries, banana (fruits to be blended/liquidised and any pulp, seeds or skin removed/sieved)

Nutritional supplements

Nutritional supplements are available, but these may not be recommended for you. If you are already prescribed these, please continue to take these and speak to your doctor or dietitian about how long you need to take them for. If you would like more information please ask to be referred to a dietitian.

Helpful tips

- Chew all food well. It should be smooth with no lumps before swallowing. If there are any lumps left, do not be afraid or embarrassed to spit these out. To help with this, cut up food into small pieces and have small mouthfuls at a time
- Ensure foods have plenty of sauces to help make food moist and easier for you to swallow
- Eat small portions more frequently aim to eat small amounts at least five or six times a day
- Do not rush meals. Sit down for a meal, sit upright and stay sitting down for 30 minutes after eating
- If you have dentures, ensure these are fitted correctly. If they do not fit well, please speak to your dentist as this can affect your eating
- Have a drink nearby during your meal (water, squash, tea, fizzy pop). Take small sips whist you
 are eating as well as after. This helps food move through the stent and keep it clear.

Foods to avoid

Some foods are more likely to block your stent. These foods are:

- Bread and toast, naan, chapatti
- Boiled eggs
- Potatoes with skins and chips
- Fish with bones
- Salad and raw vegetables
- Stringy vegetables such as green beans, celery
- Pithy fruit, for example grapefruit, orange, satsuma, pineapple
- Seeded fruit such as raspberries, strawberries
- Fruits where peeling skin is difficult, for example grapes and dried fruits
- Nuts
- Hard lumps of cheese (grated cheese is allowed)
- Battered or breadcrumb fish/meat
- Biscuits/ cakes with nuts or dried fruit
- Crisps (except bite and melt crisps listed on the previous page)
- Hard sweets such as Jalebis

What should I do if I have a poor appetite?

If your appetite is poor, it is important to eat as nourishing a diet as possible. To help achieve this, a high calorie and high protein diet is advised. Fortifying food can help too. This means using every day foods to increase the nutritional content of what you eat.

Top Tips

- Eat little and often: have six to eight small meals a day rather than three big meals
- Have snacks easily available to nibble on during the day
- Choose full fat products where possible

•Aim for one pint of milk (any type) daily. You can fortify the milk by adding dried milk powder.

Recipe for fortified milk:

- 1. Measure out 1 pint of milk into a jug
- 2. Measure out 4 tablespoons of dried milk powder and place in another jug
- 3. Add a little bit of the milk you have measured out to the dried milk powder. Mix well to form a paste
- 4. Add the rest of the milk to the paste. Mix well
- 5. Use this fortified milk throughout the day on cereals and in drinks
- Add extra grated cheese, cream or butter to mashed potatoes, soups, main meals
- Add sugar to cereals or add jam or honey to porridge or Ready Brek®
- Add sugar, jam or honey to rice pudding
- Have regular milky drinks such as milky coffee, hot chocolate, milkshakes, lassi. You could try Complan® or supermarket own brand nourishing drinks in between your meals.

Medications

You should be able to continue to take your medications with a stent in place. However, please be aware of the following:

- Avoid large tablets
- Avoid tablets which cannot be crushed, for example those with a special coating to stop them from working until they reach where they need to be
- Liquid or dispersible alternatives may be available instead you should speak with your pharmacist or doctor

What should I do if the stent blocks?

The most important thing is to try not to panic. You should take small sips of warm fluid, walk around and stop eating. If after one to two hours the blockage has not cleared and you have done all you can at home and need to get some extra help you must contact your GP, local out-of-hours service, call 111 or your cancer nurse specialist (key worker) if you have one.

University Hospitals of Leicester

Sources of information and support

Macmillan Cancer Support

Website: www.macmillan.org.uk

Telephone: 0808 808 00 00

Oesophageal Patients Association

Website: www.opa.org.uk Telephone: 0121 704 9860

Cancer Research UK

Website: www.cancerresearchuk.org

Telephone: 0808 800 4040

Would you like to speak with a Dietitian?

- If you would like to be seen by a Dietitian during your hospital admission:
 - ⇒ Please speak with the ward nurse or doctor looking after you and ask them to refer you to the ward Dietitian
- If you would like to be seen by a Dietitian after you have been discharged:
 - ⇒ If you are already under the care of a UHL Dietitian, you should get in touch with them via the contact details they have previously provided you with
 - ⇒ If you are not under the care of a UHL Dietitian, you should speak with your GP and ask them to refer you to the Leicestershire Community Dietitian Service

اگر آپ کو یہ معلومات کسی اور زیان میں درکار ہیں، تو براہِ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔ علی هذه المعلومات بلغةٍ أُخری، الرجاء الاتصال علی رقم الهاتف الذي يظهر في الأسفل જો તમને અન્ય ભાષામાં આ માહિતી જોઇતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ `ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ। Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

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