

Problemau bwyta a chanser

Gall canser achosi problemau â bwyta ac yfed. Mae'r wybodaeth hon ynghylch y gwahanol broblemau a all ddigwydd a ffyrdd o ddelio gyda nhw.

Ceir esboniad o'r geiriau sydd wedi eu tanlinellu yn y rhestr geiriau ar y diwedd. Mae'r rhestr geiriau hefyd yn dweud wrthy ch sut i ddweud y geiriau yn Saesneg.

Os oes gennych unrhyw gwestiynau am yr wybodaeth hon, gallwch holi eich meddyg, nyrs neu ddietegydd.

Gallwch hefyd ffonio Cymorth Canser Macmillan ar y rhif radffôn **0808 808 00 00**, dydd Llun i ddydd Gwener, 9am i 8pm. Mae gennym gyfieithwyr, felly gallwch siarad gyda ni yn eich iaith eich hun. Pan fyddwch yn ein ffonio, dywedwch wrthym yn Saesneg pa iaith yr ydych ei hangen (dywedwch "Welsh").

Mae mwy o wybodaeth am ganser yn Gymraeg yn macmillan.org.uk/translations

Mae'r wybodaeth hon yn trafod:

- Sut y gall canser effeithio ar fwyta
- Os ydych yn rhy flinedig i goginio neu fwyta
- Problemau'r geg a'r gwddf
- Teimlo'n sâl, dŵr poeth a chamdreuliad
- Newidiadau i'r coluddyn sy'n effeithio ar eich diet
- Newidiadau i'ch chwant am fwyd a'ch pwysau
- Sut y gall Macmillan eich helpu chi
- Rhestr geiriau
- Mwy o wybodaeth yn GYMRAEG
- Cyfeiriadau a diolchiadau

Sut y gall cancer effeithio ar fwyta

Mae gan nifer o bobl sy'n dioddef o ganser broblemau bwyta. Gallai hyn fod wedi ei achosi gan y cancer neu'r driniaeth.

Problemau bwyta a achosir gan ganser

Gan ddibynnu ar ble mae'r cancer yn eich corff, gall problemau gynnwys:

- teimlo'n sâl
- bod yn sâl
- poen
- camdreuliad
- colli pwysau.

Problemau bwyta a achosir gan driniaethau cancer

Gall triniaethau cancer weithiau achosi problemau gyda bwyta, yfed neu eich treuliad.

Efallai bydd rhai problemau bwyta yn rhai mân tra gall eraill gael mwy o effaith arnoch. Gall problemau fod yn rhai dros dro a gwella pan fyddwch yn gorffen eich triniaeth. Weithiau, gall problemau bara yn hirach.

Siaradwch gyda'ch meddyg cancer, nyrs neu feddyg teulu os oes gennych broblemau gyda bwyta. Gallant eich cyfeirio at ddietegydd.

Risg o haint (imiwnedd isel)

Gall cancer a thriniaethau cancer weithiau wanhau eich system imiwnedd. Gelwir hyn yn imiwnedd isel. Mae'n golygu bod mwy o risg i chi ddal haint.

Efallai bydd eich meddyg yn awgrymu bod angen i chi osgoi bwydydd penodol. Mae hyn i'ch atal rhag cael haint gastrig (bol). Bydd hefyd angen i chi fod yn ofalus wrth baratoi, storio ac ailgynhesu bwyd. Bydd eich nyrs cancer yn siarad â chi am hyn. Mae gennym ragor o wybodaeth yn Gymraeg yn y daflen ffeithiau 'Bwyta'n iach'. Ewch i macmillan.org.uk/translations

Diet arbennig

Bydd gan rai pobl broblemau bwyta penodol. Er enghraifft, os ydych wedi cael llawfeddygaeth ar eich stumog neu goluddyn, efallai bydd angen i chi ddilyn diet arbennig. Gall eich dietegydd roi cyngor i chi ar hyn.

Os ydych yn rhy flinedig i goginio neu fwyta

Mae teimlo'n flinedig yn gyffredin gyda thriniaeth canser. Efallai y byddwch yn ei chael yn anodd coginio eich prydau neu hyd yn oed eu bwyta.

Beth allwch chi ei wneud

- Gwnewch yn siŵr bod gennych ddigon o fwyd yn y tŷ sy'n hawdd i'w baratoi. Gallech ddefnyddio prydau parod, prydau wedi rhewi a bwyd tun.
- Ceisiwch gynllunio ymlaen llaw. Os oes gennych rewgell, paratowch fwyd tra byddwch yn teimlo'n well, a'i rewi ar gyfer pan fyddwch wedi blino.
- Gofynnwch i ffrindiau a theulu eich helpu i wneud ychydig o siopa a choginio.
- Os ydych chi angen help gyda choginio a bwyta adref, rhowch wybod i'ch meddyg teulu neu ddietegydd. Gallant drefnu i brydau gael eu danfon atoch i'ch cartref.

Gofalu am eich ceg

Sgîl-effaith gyffredin triniaeth canser yw problemau gyda'r geg. Mae'n bwysig iawn edrych ar ôl eich ceg yn ystod triniaeth, er mwyn osgoi cael haint.

Cadw eich ceg yn iach

- Efallai bydd angen i chi weld eich deintydd cyn dechrau'r driniaeth am ganser. Gallant ddweud wrthyhch beth yw'r past dannedd gorau i'w ddefnyddio yn ystod triniaeth.
- Glanhewch eich ceg, tafod a dannedd yn ysgafn bob bore a nos, gyda brws dannedd plant meddal. Ceisiwch osgoi defnyddio deintbigau a holwch eich meddyg canser cyn defnyddio edau ddannedd.
- Os ydych yn gwisgo dannedd gosod, rhowch nhw i socian mewn toddiant glanhau dros nos. Peidiwch â'u gwisgo am gyn hired ag y medrwh yn ystod y dydd fel nad ydynt yn rhwbio ar gig y dannedd.
- Yfwch ddigon o hylif, yn enwedig dŵr. Mae llefrith hefyd yn dda.
- Dilynwch unrhyw gyngor a gewch gan eich meddyg canser neu nyrs ynghylch sut i ofalu am eich ceg.

Os yw eich ceg yn brifo

- Efallai bydd bwyd a diod lled oer yn well na rhai poeth iawn neu oer iawn.
- Ychwanegwch rew mâl at ddiodydd neu gwnewch dalpiau rhew gyda sudd ffrwythau - gall sugno ar giwbiau rhew leddfu eich ceg. Gall hufen iâ helpu hefyd.
- Gall rhai suddion ffrwythau losgi'r geg os ydynt yn asidaidd. Rhowch gynnig ar suddion llai asidaidd fel sudd gellyg neu gyrens duon.
- Yfwch trwy welltyn.
- Dylech osgoi bwydydd hallt neu sbeislyd – efallai y byddant yn llosgi.
- Dylech osgoi bwydydd garw neu ansoddedig fel bara crystiog, tost neu lysiau amrwd.
- Cadwch eich bwyd yn llaith gyda sawsiau a grefi.
- Gall cymryd poenladdwyr cyn bwyta eich helpu i lyncu'n haws.
- Os yw eich ceg yn ddolurus iawn, gall eich meddyg ragnodi gel neu olch ceg cryfach. Peidiwch â phrynu golch ceg o'r fferyllfa heb holi eich meddyg canser yn gyntaf, gan y gall y rhain fod yn rhy gryf.
- Os nad yw'ch ceg yn rhy ddolurus, gall golch ceg dŵr halen helpu.

Problemau'r geg a'r gwddf

Ceg sych

Gall radiotherapi i'r pen neu'r gwddf ddifrodi eich chwarennau poerol ac achosi ceg sych. Gall rhai cyffuriau cemotherapi hefyd wneud eich ceg yn sych.

Beth allwch chi ei wneud

- Gall eich meddyg helpu trwy ragnodi cegolchion, losennau, chwistrellau neu geliau poer artiffisial.
- Cariwch ddiod gyda chi bob amser a chymrwch lymed yn rheolaidd, gan gynnwys pan ewch i'r gwely neu pan ewch allan. Cymerwch lymediau o ddŵr gyda'ch prydau.
- Chwistrellwch eich ceg gyda dŵr oer i'w chadw'n wlyb.
- Sugnwch ar dalpiau rhew neu lolipops rhew.
- Defnyddiwch sawsiau a grefi i feddalu eich bwyd.
- Dylech osgoi siocled, toesenni, menyn cnau a bwydydd sych eraill os ydynt yn anodd eu bwyta.
- Rhowch gynnig ar gnoi gwm – gall hyn weithiau gynyddu poer.
- Defnyddiwch eli gwefusau neu Vaseline® ar wefusau sychion.
- Dywedwch wrth eich nyrs os oes haen wen yn datblygu ar eich tafod.

Newidiadau blas

Gall triniaeth canser effeithio ar eich blas mewn sawl ffordd. Mae hyn fel arfer dros dro.

Beth allwch chi ei wneud

- Defnyddiwch sbeisys, perlaysiau a sesnin i roi blas ar fwyd. Ond byddwch yn ofalus os yw eich ceg yn ddolurus, gan y gall rhai sbeisys a sesnin wneud hyn yn waeth.
- Ceisiwch fwyta bwydydd siarp, megis ffrwythau ffres a sudd ffrwythau. Ond, byddwch yn ofalus os yw eich ceg yn ddolurus, gan y gallai'r rhain frifo'ch ceg.
- Efallai y bydd bwydydd oer yn blasu'n well na bwydydd poeth.
- Efallai y bydd cigoedd oer yn blasu'n well gyda phicl neu gatwad.
- Os oes gennych flas metel yn eich ceg, defnyddiwch gyllyll a ffyrnc plastig.
- Gall prydau pysgod, cyw iâr ac wyau flasu'n well pan maent wedi eu coginio neu eu marineiddio mewn saws.
- Os oes gennych flas metel wrth fwyta cig coch, rhowch gynnig ar gig gwyn, pysgod neu brydau llysiuol, gan ddefnyddio ffa a chorbys.

Problemau cnoi a llyncu

Dywedwch wrth eich meddyg, nyrs, therapydd iaith a lleferydd neu ddietydd os ydych yn cael unrhyw broblemau yn llyncu. Os yw yfed yn gwneud i chi besychu, rhowch wybod i'ch meddyg neu nyrs ar unwaith.

Beth allwch chi ei wneud

- Gallai cymryd poenladdwyr cyn prydau helpu os yw cnoi neu lyncu yn brifo. Gall eich meddyg roi cyngor i chi.
- Efallai y bydd angen i chi feddalu bwydydd i'w gwneud yn haws i'w bwyta.
- Coginiwch fwyd yn araf am gyfnod hir i'w wneud yn fwy meddal a defnyddiwch flendiwr i'w falu a'i wneud yn haws i'w fwyta.
- Gorchuddiwch fwyd mewn saws neu refi.
- Torrwch gig a llysiâu yn ddarnau mân.
- Torrwch y crystyn oddi ar fara.
- Os ydych chi'n teimlo fod bwydydd yn mynd yn sownd yn eich gwddf, gall ddiodydd pefriog helpu.
- Mae gan rai cwmnïau danfon bwydydd ddewis o ddiodydd ysgafn ar eu bwydlen.
- Os ydych chi'n cael anhawster bwyta digon, mae yna ategolion bwyd y medr wch eu cael fel diod rhwng prydau.

Teimlo'n sâl, dŵr poeth a chamdreuliad

Teimlo'n sâl

Gall rhai triniaethau canser a phroblemau fel rhwymedd neu ddifrod i'r iau, wneud i chi deimlo'n sâl.

Gall eich meddyg canser roi cyffuriau atal salwch i chi i helpu gyda salwch. Os nad yw hyn yn helpu, dywedwch wrth eich meddyg, gan fod yna sawl math y gallwch eu trïo.

Beth allwch chi ei wneud

- Dilynwch y cyfarwyddiadau a roddir i chi am bryd i gymryd y cyffuriau atal salwch.
- Gall bwyd sych, fel cracers neu fisgedi plaen eich helpu i deimlo'n llai sâl ben bore.
- Os yw'n bosibl, gadewch i rywun arall wneud y coginio. Weithiau gall arogl bwyd wneud i chi deimlo'n sâl.
- Dylech osgoi bwyta bwydydd seimllyd, brasterog neu wedi ffrio.
- Ceisiwch fwyta bwydydd ysgafn fel cawl tenau.
- Gwnewch yn siŵr bod digon o awyr iach o'ch cwmpas pan fyddwch yn bwyta.
- Eisteddwch i fyny wrth y bwrdd i fwyta, a pheidiwch â gorwedd am o leiaf 30 munud wedi bwyta.
- Gall bwyd neu ddiod sy'n cynnwys sinsir helpu.
- Mae rhai pobl yn canfod bod te mintys yn helpu. Gallech ychwanegu llwy de o fêl os ydych eisiau blas mwy melys.
- Mae sipian diod pefriog, fel lemonêd, diod sinsir neu ddŵr pefriog, yn helpu rhai pobl.
- Ceisiwch gael diodydd rhwng prydau yn hytrach na gyda'ch bwyd.
- Gwisgwch Sea Bands® ar eich arddyrnau. Gallwch eu cael gan eich fferyllydd.
- Gall technegau ymlacio eich helpu i deimlo'n llai sâl.

Gadewch i'ch meddyg wybod os ydych yn rhwym, gan y gall hyn wneud i chi deimlo'n sâl. Efallai byddwch angen ychydig o feddyginiaeth i helpu.

Dŵr poeth a chamdreuliad

Gall rhai triniaethau canser a chyffuriau eraill boeni'r stumog. Dŵr poeth yw teimlad o losgi yn y frest. Camdreuliad yw anesmwythdra yn rhan uchaf yr abdomen (bol). Mae'n digwydd yn bennaf wedi prydau.

Beth allwch chi ei wneud

- Siaradwch â'ch meddyg. Byddant yn ceisio canfod achos y dŵr poeth neu gamdreuliad a rhoi meddyginiaeth i'w leihau.
- Gwnewch nodyn o ba fwydydd sy'n achosi anesmwythdra i chi fel y gallwch eu hosgoi.
- Dylech osgoi siocled, alcohol, bwydydd sbeislyd, bwydydd brasterog a had anis, gan y gwyddys bod y rhain yn achosi problemau.
- Ceisiwch osgoi prydau mawr a bwyta'n hwyr yn y nos.
- Bwyteuoch brydau rheolaidd yn araf.
- Gorffwyswch am 45–60 munud wedi i chi fwyta. Ceisiwch beidio gorwedd i lawr ar ôl pryd.
- Gwisgwch ddillad llac o amgylch eich canol.
- Ceisiwch gadw'ch pwysau'n iach.
- Os ydych yn ysmegu, ceisiwch stopio neu gwtogi.

Newidiadau i'r coluddyn sy'n effeithio ar eich diet

Rhwymedd

Pan mae'n anodd neu'n boenus i gael pŵ. Gall rhai cyffuriau canser achosi rhwymedd. Siaradwch gyda'ch meddyg os ydych yn rhwym. Efallai y bydd yn rhoi meddyginiaeth i chi o'r enw carthyddion.

Beth allwch chi ei wneud

- Bwyteuoch fwyd gyda llawer o ffibr ynddynt. Mae'r rhain yn cynnwys ffrwythau a llysiau ffres, bara gwenith cyflawn, grawnfwyd gwenith cyflawn, miwsli, ceirch, ffa, ffacbys, pys, reis brown a phasta gwenith cyflawn.
- Yfwch lawer o ddiodydd poeth ac oer. Ceisiwch yfed 2 litr y dydd (3½ peint). Mae hyn yn bwysig os ydych chi'n cynyddu faint o ffibr ydych chi'n ei fwyta.
- Efallai y bydd meddyginiaethau naturiol fel sudd eirin sych, eirin sych, bricyll sych neu surop ffigys yn helpu.
- Gall ymarfer ysgafn, fel cerdded, helpu.

Os oes gennych ganser y coluddyn, mae'n bwysig siarad gyda'ch dietegydd, meddyg neu nyrs cyn newid eich diet.

Dolur rhydd

Mae hyn pan fyddwch angen cael pŵ yn amlach nag arfer, ac mae'r pŵ yn fwy meddal nag arfer.

Mae llawer o driniaethau canser a gwrthfotigau yn gallu achosi dolur rhydd. Gall meddyginiaethau eraill neu haint hefyd achosi dolur rhydd. Gall dolur rhydd fod yn effaith dros dro, ysgafn. Dywedwch wrth eich meddyg bob amser os oes gennych ddolur rhydd neu os yw'n gwaethygu.

Os oes gennych ddolur rhydd ar ôl llawdriniaeth ar gyfer canser y coluddyn, siaradwch gyda'ch meddyg canser neu nyrs cyn newid eich diet.

Beth allwch chi ei wneud

- Yfwch ddigon (o leiaf 2 litr neu 3½ peint y dydd).
- Bwytwch brydau bach yn fwy rheolaidd, yn hytrach na chael prydau mawr.
- Bwytwch fwydydd ysgafn, fel pysgod, cyw iâr ac wyau wedi eu coginio'n dda, bara gwyn, pasta a reis.
- Bwytwch lai o ffibr (fel grawnfwydydd, ffrwythau a llysiau amrwd).
- Ceisiwch osgoi bwydydd seimllyd a brasterog fel sglodion a byrgers.
- Ceisiwch osgoi bwydydd sbeislyd.

Os nad yw newid yr hyn a fwytwch yn helpu gyda'r dolur rhydd, efallai byddwch angen tabledi atal dolur rhydd. Mae'n bwysig cymryd y tabledi yn union fel mae eich meddyg yn egluro.

Gwynt

Gall radiotherapi i'r pelfis (ar ardal gwaelod y bol) a rhai mathau o lawdriniaeth ar y coluddyn achosi gwynt. Gall rhwymedd a rhai mathau o feddyginiaeth hefyd achosi gwynt.

Os ydych yn cael anhawster ymdopi gyda'r gwynt, neu os yw'n achosi poen i chi, siaradwch gyda'ch meddyg canser neu nyrs.

Beth allwch chi ei wneud

- Yfwch a bwytwch yn araf. Cymerwch gegaid fach a chnoi bwyd yn dda.
- Dylech osgoi ffa, corbys, picls, india corn, nionod a diodydd pefriog.
- Triwch ddwy lwy de o ddŵr mintys poeth mewn gwydriad o ddŵr cynnes. Gallwch ei felysu gyda mêl. Neu gallech roi cynnig ar de mintys.
- Gall eich meddyg teulu roi capsawlau mintys poeth i chi a allai helpu.
- Gall tabledi siarcol helpu – gallwch gael rhai gan eich fferyllydd.
- Gall ymarfer ysgafn helpu.
- Ceisiwch sicrhau eich bod yn cael pŵ yn rheolaidd - gall gwynt fod yn arwydd o rwymedd.

Newidiadau i'ch chwant am fwyd a'ch pwysau

Os ydych yn ei chael yn anodd bwyta, neu os ydych yn colli pwysau, mae'n bwysig siarad gyda dietegydd. Gallant hefyd ddweud wrthy'ch sut i fagu pwysau neu atal colli pwysau.

Os oes gennych chwant gwael am fwyd

Yn ystod triniaeth am ganser, efallai byddwch yn colli eich chwant bwyd. Gallai hyn fod oherwydd eich bod yn teimlo'n sâl, bod bwyd a diod yn blasu'n wahanol, neu oherwydd eich bod yn teimlo'n rhy flinedig. Dyma ambell awgrym a allai helpu:

- Bwytwch brydau llai, ond yn amlach.
- Cadwch fyrbrydau, fel creision, cnau, ffrwythau sych, caws, craceri ac iogwrt ar gyfer pryd y byddwch yn teimlo y gallwch fwyta.
- Bwytwch fwyd ar blât bach.
- Bwytwch brydau yn araf, cnowch y bwyd yn dda ac ymlaciwch am beth amser ar ôl bob pryd.
- Os na allwch fwyta llond plât o fwyd, gallech gael smwddi ffrwythau gydag iogwrt neu hufen iâ. Neu ysgythaeth neu siocled poeth, gyda llefrith braster llawn ac ychydig o hufen. (Gweler ategolion bwyd isod).
- Gall sieri neu frandi bach hanner awr cyn bwyta gynyddu eich chwant. Gallai gwydraid o win gyda bwyd hefyd helpu gyda threuliad. Holwch eich meddyg ynghylch a fedrwch gael alcohol.
- Efallai bydd eich meddyg yn rhoi meddyginiaeth i chi a all helpu i gynyddu eich chwant.
- Ar ddyddiau pan fo'ch chwant yn well, ceisiwch fwyta'n dda a bwyta'ch hoff brydau.

Os ydych wedi cael triniaeth am ganser y coluddyn, siaradwch â'ch dietegydd, nyrs neu feddyg canser am eich diet.

Dylech osgoi colli pwysau

Os ydych chi'n colli pwysau neu'n ei chael yn anodd bwyta, gallwch ychwanegu mwy o galoriau (egni) a phrotein yn eich diet heb orfod bwyta mwy o fwyd.

- Ychwanegwch lefrith braster llawn, surop, mêl neu siwgr i frecwast a phwdinau.
- Ceisiwch ychwanegu hufen neu gorbys, ffa a nwdls i gaserolau a chawl.
- Gellir ychwanegu caws wedi'i gratio neu olew olewydd i gawl poeth.
- Gellir hefyd ychwanegu hufen, caws a menyn i datws stwnsh neu sawsiau.
- Defnyddiwch ddigon o fenyn ac ychwanegwch mayonnaise neu hufen salad ar frechdanau.

Ategolion bwyd

Efallai bydd eich meddyg yn awgrymu eich bod yn cael ategolion bwyd (ategolion maeth). Gall y rhain ychwanegu calorïau (egni) ychwanegol neu proteïn i'ch diet. Mae rhai yn ddioddydd ac eraill yn bowdrau y gallwch ychwanegu i'ch bwyd neu ddiod. Efallai bydd eich meddyg neu ddietygydd angen rhagnodi rhai ohonynt, ond gallwch brynu eraill o'r fferyllfa neu'r archfarchnad.

Gallwch ofyn i'ch meddyg neu ddietegydd am ategolion bwyd. Dim ond os ydynt yn argymhell i chi wneud hynny y dylech ddefnyddio ategolion.

Os oes gennych ddiabetes, dylech gael cyngor oddi wrth eich meddyg teulu, nyrs canser neu ddietegydd, cyn i chi ddefnyddio ategolion bwyd.

Sut gall Macmillan helpu

Mae Macmillan yma i'ch helpu chi a'ch teulu. Gallwch gael cefnogaeth gan:

- **Linell Gymorth Macmillan (0808 808 00 00)**. Mae gennym gyfieithwyr, felly gallwch siarad gyda ni yn eich iaith. Dywedwch wrthym, yn Saesneg, yr iaith rydych am ei defnyddio. Gallwn ateb cwestiynau meddygol, roi gwybodaeth am gefnogaeth ariannol neu siarad gyda chi am eich teimladau. Mae'r llinell ffôn ar agor o ddydd Llun i ddydd Gwener, 9am i 8pm.
- **Gwefan Macmillan (macmillan.org.uk)**. Mae gan ein safle lawer o wybodaeth Saesneg am ganser a byw gyda chanser. Mae mwy o wybodaeth mewn ieithoedd eraill yn macmillan.org.uk/translations
- **Gwasanaethau gwybodaeth a chefnogaeth**. Mewn gwasanaeth gwybodaeth a chefnogaeth, gallwch siarad ag arbenigwr canser a chael gwybodaeth ysgrifenedig. Chwiliwch am eich canolfan agosaf yn **macmillan.org.uk/informationcentres** neu ffoniwch ni. Efallai y bydd gan eich ysbyty ganolfan.
- **Grwpiau cefnogaeth lleol** – Mewn grŵp cefnogaeth, gallwch siarad â phobl eraill wedi'u heffeithio gan ganser. Dewch o hyd i grŵp gerllaw yn **macmillan.org.uk/supportgroups** neu ffoniwch ni.
- **Cymuned Ar-lein Macmillan** – Gallwch hefyd siarad â phobl eraill wedi'u heffeithio gan ganser ar-lein yn **macmillan.org.uk/community**

Rhestr geiriau

Gair (target language)	Yn Saesneg	Sut i'w ddweud yn Saesneg (transliteration of English word)	Ystyr
Ategolion bwyd	Food supplements	[Ffŵd Sypl-li- ments]	Diodydd, powdrau neu fwydydd y gellir eu hychwanegu at eich diet i gynyddu faint o <u>galoriau</u> , <u>protein</u> neu <u>faetholion</u> rydych yn eu cael.
Caloriau	Calories	[Cal-or-îs]	Caloriau yw'r unedau o egni mewn bwyd. Mae'ch corff angen egni o fwyd i weithredu.
Camdreuliad	Indigestion	[In-di-jes-ti-yn]	Poen neu anesmwythdra yn rhan uchaf y bol. Gall ddigwydd pan fydd asid y stumog yn poeni leinin y stumog. Mae'n digwydd yn bennaf wedi prydau.
Cemotherapi	Chemotherapy	[Cî-mo-ther-api]	Triniaeth canser sy'n defnyddio cyffuriau i ladd celloedd canser.
Chwant	Appetite	[Ap-yt-eit]	Pan fyddwch yn teimlo eich bod eisiau bwyd.
Chwarennau poerol	Salivary glands	[Sal-ai-fy-ri glands]	Chwarennau o amgylch y geg sy'n cynhyrchu <u>poer</u> .
Diabetes	Diabetes	[Dai-y-bî-tîs]	Cyflwr ble mae lefel y siwgr yn y gwaed yn rhy uchel gan nad yw'r corff yn ei ddefnyddio yn iawn.
Dietegydd	Dietitian	[Dai-yt-ish-yn]	Arbenigwr mewn bwyd a maeth. Gall ddweud wrthych pa fwydydd sydd orau i chi. Gallant hefyd roi cyngor i chi os oes gennych broblemau gyda'ch diet.
Dŵr poeth	Heartburn	[Hart-byrn]	Dŵr poeth yw teimlad o losgi yn y frest. Gall fod yn boenus iawn. Mae'n digwydd pan fydd asid o'r stumog yn aflonyddu ar leinin yr <u>oesoffagws</u> (y beipen fwyd).
Gwrthfotigau	Antibiotics	[Anti-bai-otics]	Meddyginiaethau sy'n trin <u>haint</u> .
Haint	Infection	[In-ffec-shyn]	Pan fo bacteria yn mynd i'ch corff ac yn achosi salwch.

Imiwneidd isel	Low immunity	[Low im-iw-ny-ti]	Pan nad yw <u>system imiwneidd</u> eich corff yn gweithio'n iawn. Mae'n golygu bod mwy o risg i chi ddal <u>haint</u> .
Maetholion	Nutrients	[Niw-tri-ynts]	Sylweddau mewn bwyd mae eich corff eu hangen i barhau i weithio'n iawn a chadw'n iach.
Oesoffagws	Oesophagus	[Os-off-ag-ys]	Y tiwb sy'n mynd o'r geg i'r stumog. Mae bwyd yn pasio ar ei hyd pan fyddwch yn bwyta. Mae hefyd yn cael ei alw yn llwnc neu'n beipen fwyd.
Poer	Saliva	[Sy-lai-fa]	Hylif mae eich corff yn ei gynhyrchu ac yn ei ryddhau i'ch ceg. Mae'n helpu cadw eich ceg yn iach a llaith. Mae hefyd yn helpu gyda chnoi, llyncu a <u>threulio</u> . Fe'i gelwir yn salifa hefyd.
Protein	Protein	[Pro-tîn]	Sylwedd mewn bwyd sy'n bwysig ar gyfer diet iach. Mae ein corff angen protein i weithio, tyfu a thrwsio ei hun.
Radiotherapi	Radiotherapy	[Rei-dio ther-afi]	Triniaeth canser sy'n defnyddio pelydrau ynni uchel, megis pelydrau X, i ladd celloedd canser.
Rhwymedd	Constipation	[Con-sdi-pê-shyn]	Pan mae'n anodd neu'n boenus gwagio eich coluddyn (cael pŵ). Efallai na fyddwch yn mynd mor aml, neu efallai bod eich pŵ yn galed a lympiog.
System imiwneidd	Immune system	[Imíwn sus-tym]	Eich system imiwneidd yw dull eich corff chi o'ch amddiffyn rhag bacteria niweidiol a <u>haint</u> .
Treuliad	Digestion	[Dai-jes-ti-yn]	Sut mae eich corff yn torri i lawr y bwyd a fwytwch a chael <u>maetholion</u> ohono.
Therapi targedig	Targeted therapy	[Tar-get-ed ther-afi]	Triniaeth canser sy'n defnyddio cyffuriau sy'n targedu ac ymosod ar gelloedd canser.
Therapydd iaith a lleferydd	Speech and language therapist	[Sbîthch and lan-gwij ther-ap-ist]	Rhywun sy'n gallu'ch helpu os oes gennych broblemau gyda lleferydd a llyncu.

Mwy o wybodaeth Gymraeg

Mae gennym wybodaeth yn Gymraeg am y pynciau hyn:

<p>Mathau o ganser</p> <ul style="list-style-type: none">• Canser y fron• Canser y coluddyn mawr• Canser yr ysgyfaint• Canser y brostad <p>Triniaethau</p> <ul style="list-style-type: none">• Cemotherapi• Radiotherapi• Llawfeddygaeth	<p>Ymdopi â chanser</p> <ul style="list-style-type: none">• Os cewch ddiagnosis o ganser - Canllaw cyflym• Hawlio budd-daliadau• Problemau bwyta a chanser• Diwedd oes• Cymorth ariannol - budd-daliadau• Cymorth ariannol – help gyda chostau• Bwyta'n iach• Blinder gyda chanser• Sgil-ffeithiau triniaeth canser• Yr hyn y gallwch ei wneud i helpu'ch hun
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I weld yr wybodaeth hon, ewch i macmillan.org.uk/translations

Siaradwch â ni yn Gymraeg

Gallwch ffonio Macmillan am ddim ar **0808 808 00 00** a siarad â ni yn Gymraeg trwy gyfieithydd. Gallwch siarad â ni am eich pryderon a'ch cwestiynau meddygol. Does dim ond angen i chi ddweud Cymraeg yn Saesneg pan y galwch (dywedwch “Welsh”).

Rydyn ni ar agor o ddydd Llun i ddydd Gwener, 9am tan 8pm.

Cyfeiriadau a diolchiadau

Mae'r holl wybodaeth yma wedi ei hysgrifennu a'i golygu gan dîm Datblygu Gwybodaeth Canser Cymorth Canser Macmillan. Mae wedi cael ei chyfieithu i Gymraeg gan gwmni cyfieithu.

Mae'r wybodaeth sydd wedi'i chynnwys yn seiliedig ar lyfrynnau Macmillan **Eating problems and cancer** a **The building-up diet**. Gallwn anfon copïau i chi, ond mae'r llyfrynnau llawn ar gael yn Saesneg yn unig.

Mae'r wybodaeth wedi ei hadolygu gan arbenigwyr perthnasol a'i chymeradwyo gan ein golygydd meddygol, Dr Tim Iveson, Oncolegydd Meddygol Ymgynghorol a Phrif Olygydd Meddygol Macmillan.

Gyda diolch i Debbie Provan, Arweinydd AHP Cenedlaethol ar gyfer Adsefydlu Canser a Rheolwr Prosiect TCAT Macmillan, a Loraine Gillespie, Rheolwr Dieteg.

Diolch hefyd i'r bobl sydd wedi eu heffeithio gan ganser a adolygodd yr wybodaeth hon.

Mae'n holl wybodaeth yn seiliedig ar y dystiolaeth orau sydd ar gael. Am ragor o wybodaeth am y ffynonellau a ddefnyddiwn, cysylltwch â ni yn **bookletfeedback@macmillan.org.uk**

MAC15753_WELSH



Adolygwyd y cynnwys: Medi 2018

Adolygiad arfaethedig nesaf: 2021

Rydym yn gwneud pob ymdrech i sicrhau bod yr wybodaeth a ddarperir gennym yn gywir, ond ni ddylid dibynnu arni i adlewyrchu cyflwr presennol ymchwil feddygol, sy'n newid o hyd. Os ydych chi'n poeni am eich iechyd, siaradwch â'ch meddyg. Ni all Macmillan fod yn gyfrifol am unrhyw golled neu ddifrod sy'n deillio o unrhyw gamgymeriad yn y wybodaeth hon na gwybodaeth trydydd parti, fel gwybodaeth ar wefannau rydym yn rhoi dolenni atyn nhw.

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Eating problems and cancer

Cancer can cause problems with eating and drinking. This information is about the different problems that can happen and ways of dealing with them.

Any words that are underlined are explained in the word list at the end. The word list also tells you how to say the words in English.

If you have any questions about this information, ask your doctor, nurse or dietitian.

You can also call Macmillan Cancer Support on freephone **0808 808 00 00**, Monday to Friday, 9am to 8pm. We have interpreters, so you can speak to us in your own language. When you call us, please tell us in English which language you need (say “xxxxx”).

There is more cancer information in [LANGUAGE] at **macmillan.org.uk/translations**

This information is about:

- How cancer can affect eating
- If you are too tired to cook or eat
- Mouth and throat problems
- Feeling sick, heartburn and indigestion
- Bowel changes that affect your diet
- Changes to your appetite and weight
- How Macmillan can help you
- Word list
- More information in [LANGUAGE]
- References and thanks

How cancer can affect eating

Many people with cancer have eating problems. They could be caused by the cancer or the treatment.

Eating problems caused by cancer

Depending on where the cancer is in your body, problems can include:

- feeling sick
- being sick
- pain
- indigestion
- weight loss.

Eating problems caused by cancer treatments

Cancer treatments can sometimes cause problems with eating, drinking or your digestion.

Some eating problems may be minor, while others may have a bigger effect on you. Problems may be temporary and improve when you finish treatment. Sometimes, problems can last longer.

Talk to your cancer doctor, nurse or GP if you have problems with eating. They can refer you to a dietitian.

Risk of infection (low immunity)

Cancer and cancer treatments can sometimes weaken your immune system. This is called having low immunity. It means you are more at risk of getting an infection.

Your doctor may suggest that you need to avoid certain foods. This is to stop you getting a gastric (tummy) infection. You will also need to be careful when preparing, storing and reheating food. Your cancer nurse will talk to you about this. We have more information in [language] in the factsheet 'Healthy eating.' Visit macmillan.org.uk/translations

Special diets

Some people will have specific eating problems. For example, if you have had stomach or bowel surgery, you may need to follow a special diet. Your dietitian can give you advice on this.

If you are too tired to cook or eat

Feeling very tired is common with cancer treatment. You may find it hard to cook your meals or even to eat them.

What you can do

- Make sure you have enough food at home that is easy to make. You could use ready-made meals, frozen meals and tinned food.
- Try to plan ahead. If you have a freezer, prepare food while you are feeling better, and freeze it for when you are tired.
- Ask family or friends to do some shopping or cooking for you.
- If you need help at home with cooking or eating, tell your GP or dietitian. They can arrange for meals to be delivered to you at home.

Looking after your mouth

A common side effect of cancer treatment is mouth problems. It is very important to look after your mouth during treatment, to avoid getting an infection.

Keeping your mouth healthy

- You may need to see your dentist before cancer treatment starts. They can tell you the best toothpaste to use during treatment.
- Clean your mouth, tongue and teeth gently each morning and evening, with a soft children's toothbrush. Avoid using toothpicks and check with your cancer doctor before using floss.
- If you wear dentures, soak them in a cleaning solution overnight. Leave them out for as long as you can during the day to stop them rubbing your gums.
- Drink lots of fluids, especially water. Milk is also good.
- Follow any advice from your cancer doctor or nurse about how to care for your mouth.

If you have a sore mouth

- Cool foods and drinks may be better than very hot or very cold ones.
- Add crushed ice to drinks or freeze fruit juice in ice cube trays – sucking on ice cubes can sooth your mouth. Ice cream can also help.
- Some fruit juices can sting the mouth if they are acidic. Try less acidic juices like pear or blackcurrant.
- Drink through a straw.

- Avoid salty or spicy foods – these may sting.
- Avoid rough textured foods such as crusty bread, toast or raw vegetables.
- Keep your food moist with sauces and gravies.
- Taking painkillers before eating can help you swallow more easily.
- If you have a very sore mouth, your doctor can prescribe a gel or stronger mouthwash. Do not buy mouthwash from the chemist without checking with your cancer doctor, as these can be too strong.
- If your mouth is not too sore, a salt-water mouthwash can help.

Mouth and throat problems

Dry mouth

Radiotherapy to the head and neck area can damage your salivary glands and cause a dry mouth. Some chemotherapy drugs can also make your mouth dry.

What you can do

- Your doctor can help by giving you mouthwashes, lozenges, artificial saliva sprays or gels.
- Keep a drink with you all the time and sip it regularly, including when you go to bed or go out. Have sips of water with your meals.
- Spray your mouth with cool water to keep it moist.
- Suck ice cubes or ice lollies.
- Use sauces and gravies to soften your food.
- Avoid chocolate, pastry, peanut butter and other dry foods if they are hard to eat.
- Try sugar-free chewing gum – this can sometimes increase saliva.
- Use lip balm or Vaseline® on dry lips.
- Tell your nurse if your tongue gets a white coating over it.

Taste changes

Cancer treatment can affect your taste in different ways. They are usually temporary.

What you can do

- Use spices, herbs and seasoning to flavour food. But be careful if your mouth is sore, as some spices and seasonings can make this worse.
- Try having sharp tasting foods, such as fresh fruit and fruit juice. Be careful if your mouth is sore though, as these may hurt your mouth.
- Cold foods may taste better than hot foods.
- Cold meats may taste better with pickle or chutney.
- If you have a metal taste in your mouth, use plastic cutlery.
- Fish, chicken and egg meals may taste better when cooked or marinated in a sauce.
- If you have a metal taste when eating red meat, try white meat, fish, or vegetarian meals, using beans and lentils.

Chewing and swallowing problems

Tell your doctor, nurse, speech and language therapist (SALT) or dietician if you have any problems swallowing. If drinking makes you cough, tell your doctor or nurse straight away.

What you can do

- Taking painkillers before meals may help if it hurts to chew or swallow. Your doctor can give you advice.
- You may need to soften foods to make them easier to eat.
- Cook food slowly for a long time to make it softer and blend it to make it easier to eat.
- Cover food in a sauce or gravy.
- Chop meat and vegetables into small pieces.
- Cut the crusts off bread.
- If you feel food is getting stuck in your throat, fizzy drinks can help.
- Some meal delivery companies have a choice of soft foods on their menu.
- If you find it hard to eat enough, there are food supplements that you can have as drinks in between meals.

Feeling sick, heartburn and indigestion

Feeling sick

Some cancer treatments and problems like constipation or liver damage, can make you feel sick.

Your cancer doctor can give you anti-sickness drugs to help with sickness. If this does not help, tell your doctor, as there are different types you can try.

What you can do

- Follow the instructions you are given about when and how to take the anti-sickness drugs.
- Dry foods, such as crackers or plain biscuits can help you to feel less sick first thing in the morning.
- If possible, let someone else do the cooking. Sometimes the smell of cooking can make you feel sick.
- Avoid greasy, fatty or fried foods.
- Try to eat light foods such as thin soups.
- Have some fresh air around you when you eat.
- Sit up straight at the table to eat, and stay like this for at least 30 minutes after eating.
- Food or drink containing ginger can help.
- Some people find peppermint tea helps. You could add a teaspoon of honey if you prefer a sweeter taste.
- Sipping a fizzy drink, such as lemonade, ginger ale or fizzy water, helps some people.
- Try having drinks between meals rather than with your food.
- Wear Sea Bands® on your wrists. You can get them from your chemist.
- Relaxation techniques may help you feel less sick.

Let your doctor know if you have constipation, as this can make you feel sick. You may need some medicine to help.

Heartburn and indigestion

Some cancer treatments and other drugs can irritate the stomach. Heartburn is a burning feeling in the chest. Indigestion is discomfort in the upper part of the abdomen (tummy). It happens mostly after meals.

What you can do

- Talk to your doctor. They will try to find out the cause of your heartburn or indigestion and give you medicines to reduce it.
- Make a note of foods that cause you discomfort so you can avoid them.
- Avoid chocolate, alcohol, spicy food, fatty food and aniseed, as these are known to cause problems.
- Avoid large meals and eating late at night.
- Eat regular meals and eat slowly.
- Rest for 45–60 minutes after you eat. Try not to lie down after a meal.
- Wear loose clothing around your waist.
- Try to stay a healthy weight.
- If you smoke, try to stop or cut down.

Bowel changes that affect your diet

Constipation

This is when you find it difficult or painful to poo. Some cancer drugs can cause constipation. Talk to your doctor if you have constipation. They may give you medicines called laxatives.

What you can do

- Eat foods with lots of fibre in. These include fresh fruit and vegetables, wholemeal bread, wholemeal cereal, muesli, oats, beans, lentils, peas, brown rice and wholegrain pasta.
- Drink lots of fluids, both hot and cold drinks. Try to drink 2 litres each day (3½ pints). This is important if you are increasing the amount of fibre you eat.
- Natural remedies such as prune juice, prunes, dried apricots or syrup of figs might help.
- Gentle exercise, such as walking, can help.

If you have bowel cancer, it is important to talk to your dietitian, doctor or nurse before changing your diet.

Diarrhoea

This is when you need to poo more often than normal, and the poo is softer than normal.

Several cancer treatments and antibiotics can cause diarrhoea. Other medications or an infection can also cause diarrhoea. Diarrhoea can be a temporary, mild side effect. Always tell your doctor if you have diarrhoea and if it gets worse.

If you have diarrhoea after surgery for bowel cancer, talk to your cancer doctor or nurse before changing your diet.

What you can do

- Drink lots of fluids (at least 2 litres or 3½ pints each day).
- Eat small meals more regularly, rather than having large meals.
- Eat light foods, such as fish, chicken, well-cooked eggs, white bread, pasta and rice.
- Eat less fibre (such as cereals, raw fruits and vegetables).
- Avoid greasy and fatty foods such as chips and burgers.
- Avoid spicy foods.

If changing what you eat does not help with diarrhoea, you may need to have anti-diarrhoea tablets. It is important to take the tablets exactly as your doctor explains.

Wind

Pelvic radiotherapy (to the lower tummy area) and some types of bowel surgery may cause wind. Constipation and some types of medicines can also cause wind.

If you find wind difficult to cope with or it causes you pain, talk to your cancer doctor or nurse.

What you can do

- Eat and drink slowly. Take small mouthfuls and chew food well.
- Avoid beans, pulses, pickles, sweetcorn, onions and fizzy drinks.
- Try two teaspoons of peppermint water dissolved in a glass of warm water. You can sweeten it with honey. Or you could try peppermint tea.
- Your GP can give you peppermint capsules that may help.
- Charcoal tablets may help – you can get some from your chemist.
- Gentle exercise can help.
- Try to make sure you poo regularly – wind can be a sign of constipation.

Changes to your appetite and weight

If you find it hard to eat, or you are losing weight, it is important to talk to a dietitian. They can also tell you how to put on weight or prevent weight loss.

If you have a poor appetite

During cancer treatment, you may lose your appetite. This may be due to feeling sick, food and drink tasting different, or because you feel too tired. Here are some tips that may help:

- Eat smaller meals but have them more often.
- Keep snacks, such as crisps, nuts, dried fruit, cheese, crackers and yoghurt. with you for when you feel able to eat.
- Serve food on a small plate.
- Eat meals slowly, chew the food well and relax for some time after each meal.
- If you cannot eat a plate of food, you could have a fruit smoothie with yoghurt or ice cream. Or a milkshake or hot chocolate, made with full fat milk and some cream. (See food supplements below).
- A small sherry or brandy half an hour before you eat can increase your appetite. A glass of wine with meals may also help digestion. Check with your doctor whether you can have alcohol.
- Your doctor may give you a medicine that can help increase your appetite.
- On days when your appetite is better, try to eat well and have your favourite foods.

If you have had treatment for bowel cancer, talk to your dietitian, cancer nurse or doctor about your diet.

Avoiding weight loss

If you are losing weight or finding it hard to eat, you can add extra calories (energy) and protein to your diet without having to eat more food.

- Add full-fat milk, syrup, honey or sugar to breakfasts and desserts.
- Try adding cream or lentils, beans and noodles to casseroles and soups.
- Grated cheese or olive oil can be added to hot soup.
- Cream, cheese and butter can be added to mashed potatoes or sauces.
- Use plenty of butter and add mayonnaise or salad cream in sandwiches.

Food supplements

Your doctor may suggest that you have food supplements (nutritional supplements). These can add extra calories (energy) or protein to your diet. Some are drinks and others are powders that you add to food or drink. Your doctor or dietitian may need to prescribe some but others you can buy from the chemist or supermarket.

You can ask your doctor or dietitian about food supplements. You should only use supplements if they recommend it.

If you have diabetes, you must get advice from your GP, cancer nurse or dietitian, before you use food supplements.

How Macmillan can help

Macmillan is here to help you and your family. You can get support from:

- **The Macmillan Support Line (0808 808 00 00).** We have interpreters, so you can speak to us in your language. Just tell us, in English, the language you want to use. We can answer medical questions, give you information about financial support, or talk to you about your feelings. The phone line is open Monday to Friday, 9am to 8pm.
- **The Macmillan website (macmillan.org.uk).** Our site has lots of English information about cancer and living with cancer. There is more information in other languages at macmillan.org.uk/translations
- **Information and support services.** At an information and support service, you can talk to a cancer support specialist and get written information. Find your nearest centre at macmillan.org.uk/informationcentres or call us. Your hospital might have a centre.
- **Local support groups** – At a support group you can talk to other people affected by cancer. Find a group near you at macmillan.org.uk/supportgroups or call us.
- **Macmillan Online Community** – You can also talk to other people affected by cancer online at macmillan.org.uk/community

Word list

Word (target language)	In English	How to say in English (transliteration of English word)	Meaning
	Antibiotics		Medicine that treats an <u>infection</u> .
	Appetite		When you feel you want to eat food.
	Calories		Calories are the amount of energy contained in food. Your body needs energy from food to function.
	Chemotherapy		A cancer treatment that uses drugs to kill cancer cells.
	Constipation		When you find it difficult or painful to empty your bowels (poo). You might not be going as often as usual, or your poo might be hard and lumpy.
	Diabetes		A condition where the amount of sugar in the blood is too high because the body does not use it properly.
	Dietitian		An expert in food and nutrition. They can tell you which foods are best for you. They can also give you advice if you have problems with your diet.
	Digestion		How your body breaks down the food you eat and gets <u>nutrients</u> from it.
	Food supplements		Drinks, powders or foods that can be added to your diet to increase the amount of <u>calories</u> , <u>protein</u> or <u>nutrients</u> you are getting.
	Heartburn		Heartburn is a burning feeling in the chest. It can be very painful. It happens when acid from the stomach irritates the lining of your the <u>oesophagus</u> (food pipe).
	Immune system		Your immune system is your body's way of protecting you from harmful bacteria and <u>infections</u> .

	Indigestion		Pain or discomfort in the upper part of the tummy. It can happen when stomach acid irritates the lining of the stomach. It happens mostly after meals.
	Infection		When bacteria gets into your body and causes an illness.
	Low immunity		When your body's <u>immune system</u> is not working properly. It means you are more at risk of getting an <u>infection</u> .
	Nutrients		Substances in food that your body needs to keep working properly and stay healthy.
	Oesophagus		The tube that goes from the mouth in to the stomach. Food passes down it when you eat. It's also called the gullet or food pipe.
	Protein		A substance found in food that is important in a healthy diet. Our body needs protein to function, grow and repair itself.
	Radiotherapy		A cancer treatment that uses high-energy rays, such as x-rays, to kill cancer cells.
	Saliva		A liquid your body produces and releases into the mouth. It helps keep your mouth healthy and moist. It also helps with chewing, swallowing and <u>digestion</u> . It is also called spit.
	Salivary glands		Glands around the mouth that produce <u>saliva</u> .
	Speech and language therapist		Someone who can help if you have problems with speech and swallowing.
	Targeted therapy		A cancer treatment that uses drugs that target and attack cancer cells.

More information [language]

We have information in [language] about these topics:

<p>Types of cancer</p> <ul style="list-style-type: none">• Breast cancer• Large bowel cancer• Lung cancer• Prostate cancer <p>Treatments</p> <ul style="list-style-type: none">• Chemotherapy• Radiotherapy• Surgery	<p>Coping with cancer</p> <ul style="list-style-type: none">• If you're diagnosed with cancer – A quick guide• Claiming benefits• Eating problems and cancer• End of life• Financial support – benefits• Financial support – help with costs• Healthy eating• Tiredness (fatigue) and cancer• Side effects of cancer treatment• What you can do to help yourself
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To see this information, go to macmillan.org.uk/translations

Speak to us in [language]

You can call Macmillan free on **0808 808 00 00** and speak to us in [LANGUAGE] through an interpreter. You can talk to us about your worries and medical questions. Just say [LANGUAGE] in English when you call (say “xxxxx”).

We are open Monday to Friday, 9am to 8pm.

References and thanks

All of this information has been written and edited by Macmillan Cancer Support's Cancer Information Development team. It has been translated into [language] by a translation company.

The information included is based on the Macmillan booklets **Eating problems and cancer** and **The building-up diet**. We can send you copies, but the full booklets are only available in English.

This information has been reviewed by relevant experts and approved by our medical editor, Dr Tim Iveson, Consultant Medical Oncologist and Macmillan Chief Medical Editor.

With thanks to Debbie Provan, National AHP Lead for Cancer Rehabilitation & Macmillan TCAT Project Manager, and Loraine Gillespie, Dietetic Manager.

Thanks also to the people affected by cancer who reviewed this information.

All our information is based on the best evidence available. For more information about the sources we use, please contact us at **bookletfeedback@macmillan.org.uk**

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Next planned review: 2021

We make every effort to ensure that the information we provide is accurate but it should not be relied upon to reflect the current state of medical research, which is constantly changing. If you are concerned about your health, you should consult your doctor. Macmillan cannot accept liability for any loss or damage resulting from any inaccuracy in this information or third-party information such as information on websites to which we link.

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