Supportive Care Following Surgery
8th Annual Jefferson Pancreas Cancer and Related Diseases Symposium, November 9, 2013

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Goals for the Next 30 Minutes

❖ Discuss Aspects of Supportive Care

❖ Encourage Open Discussion by Participants
Supportive Care

- Symptom Management
- Disease Progression
- End of Life
Supportive Care

Strives to:

- Minimize or eliminate symptoms in order to improve a person’s quality of life.
- Improve efficacy and tolerance of treatment.
- Achieve a satisfactory level of knowledge of the disease and comfort measures.
Selected Common Symptoms

- Pain
- Nausea / Constipation / Diarrhea
- Fatigue / Somnolence
- Anxiety / Depression
Pain Management

CONSIDER:

- Phase of disease?
- Cause of pain?
- Pain experience so far?
- What has worked before?

CONTRIBUTING FACTORS:

- Jaundice: Stent/Bypass
- Constipation: Stool Softener or Laxative need
- Fatigue: lack of sleep, treatment related, disease
Pain Management
Medication: Stepwise Treatment

Step 1:
- NSAIDS (Ibuprofen, Naproxyn
- Acetaminophen
- Tricyclic antidepressants, muscle relaxants

Step 2:
- Step 1 + Opiates:
  (Percocet - Oxycodone)

Step 3:
Step 1 + Stronger Opiates:
Dilaudid, Morphine, Fentanyl
Adjuvant Therapy: Non-Pharmacologic Interventions

- Distraction
- Relaxation techniques
- Guided imagery
- Therapeutic touch
- Reiki
- Acupuncture
- Magnets
- Cutaneous nerve stimulation
Management of Nausea / Vomiting
Constipation / Diarrhea

AVOID:

- Greasy foods
- Spicy foods
- Hard to swallow foods
- Strong odors
- Lying down flat after eating to reduce reflux
- Wearing tight clothing
Management: Nausea / Vomiting
Constipation / Diarrhea

- Hard candies (watch sugars)
- Salty foods – pretzels, crackers
- Flat coke syrup
- Cool or room temperature foods and drinks
- More fiber foods and protein - fewer carbs
- 5 small feedings a day - grazing
Management: Nausea / Vomiting
Constipation / Diarrhea

- **Antiemetics**
  - Zofran
  - Compazine
  - Reglan – motility – promotion of peristalsis

- **Beware of Constipation**
  - Keep hydrated
  - Colace, Senna, Dulcolax, Magnesium Citrate, Milk of Magnesia

- **Diarrhea**
  - Can easily get dehydrated
  - Creon, Imodium
Anxiety and Depression

- Feelings of Hopelessness
- Helplessness
- Worthlessness
- Guilt
- Suicide
- Abandonment by God
- Failure to Trust
- Sign from God
Management: Anxiety and Depression

1) SSRI – Prozac, Lexapro, Paxil, Zoloft
   • 3 - 4 weeks before feeling of relief
   • Best for DGE and urinary retention

2) Tricyclic – Sinequan, Tofranil
   • Watch for sedation

3) Psychostimulants – Methylphenidate, Modafinil
   • Rapid onset – can assist with appetite, fatigue, well-being
Management of Fatigue

- Aerobic or endurance activities
- Resistance training to improve muscle tone and maintain muscle mass
- Walking: low to moderate intensity program
- Pilates and yoga: unless already proficient in these modalities, start with beginner classes
- Medications not helpful unless have anemia or low white blood cell count
“A Progressive Post-Resection Walking Program Significantly Improves Fatigue and Health-Related Quality of Life in Pancreas and Periampullary Cancer Patients”

Theresa P. Yeo, Sherry A. Burrell, Patricia K. Sauter, Eugene P. Kennedy, Harish Lavu, Benjamin E. Leiby and Charles J. Yeo

Published in: The Journal of the American College of Surgeons, 2012;214,463-477.
Conclusions from Study

• A low to moderate intensity walking program improves cancer-related fatigue, pain and reduces depression and anxiety.

• Based on our study, we have incorporated the exercise prescription into our new discharge instructions for persons who had surgery for pancreas cancer and related conditions.
Recommendations Regarding Exercise: Resistance Exercise-Weight lifting

• **Start Low, Go Slow!**
• Use 1 - 2 pound hand weights, or
• Exercise bands (come in 4 strengths)
• Exercise Upper Body- arms, shoulders, abs, back
• Exercise Lower Body- hips, legs

• Work out at home or with a Certified Trainer or Cancer Rehabilitation Specialist

• **Progress at own pace**
Goal: 1 - 2 times week
Second-hand Chemotherapy

• Questions raised about risk of toxicity from chemo for family members / intimate partners
• There are currently no studies indicating that chemotherapy has caused health problems in family members
• Unborn babies and young children most at risk
• Recommend that men wear condoms during intercourse for 48 hours after receiving chemotherapy and avoid deep kissing or:
  • Avoid intercourse for 48 hours following chemotherapy
  • Flush toilet twice in the 48 hours following chemo administration
• Men should sit to urinate to avoid splashing
Second-hand Chemotherapy

• Concern over chemo drugs in water supply--still active drugs can be found in urine, feces, vomit, saliva, tears and semen

• Can make their way into the environment through sewage and water systems

• No evidence of direct human harm according to the EPA

• May be some ecological harm
Have a Positive Attitude During Recovery....
Questions?