

Some cancer patients missing out on recommended nutrition advice

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Many New Zealand cancer patients are not getting valuable nutrition support which can aid in prevention and recovery of the disease, a University of Otago study reveals.



Led by Dr. Rana Peniamina and Associate Professor Rachael McLean from the Department of Preventive and Social Medicine, the study sought to understand and describe <u>cancer</u> survivors' perspectives and post diagnosis experiences of food and nutrition, focusing on barriers to healthy eating, <u>health equity</u> and Māori and Pacific perspectives.

"The World Cancer Research Fund and American Institute for Cancer Research recommend that all cancer patients receive professional expert advice and <u>support</u> on diet and nutrition," Dr. Peniamina says.

"However, our participants' experiences indicate that is not what is currently happening in New Zealand."

Data collected from Māori, Pacific and New Zealand European cancer survivors showed many cancer survivors had limited awareness of the role nutrition has in cancer prevention or recovery, but they would like better access to reliable cancer-specific nutrition information and access to support.

Most study participants said they were not offered any or enough nutritional advice as part of their care. A few asked for information when it was not offered, but Māori and Pacific participants—groups at higher risk of getting cancer and who have higher mortality rates—were less likely to do so.

"Several participants were not aware that nutrition can have a role in cancer recovery and prevention. Some had assumed diet or nutrition was not important because their oncology doctor didn't mention it, but suggested they would have followed advice if they had been given it," Dr. Peniamina says.

Financial limitations—the cost of healthy food and low income—and a lack of practical support were also important barriers to post-diagnosis



healthy eating.

While some participants paid to see a dietitian or nutritionist and were financially able to make dietary changes, many were constrained by their budget, especially as they were unable to work due to their health.

Some Māori and Pacific participants reported that low income meant they could not access enough food, healthy or otherwise.

When patients attempted to access nutrition information outside of the healthcare setting, they were exposed to misinformation, scare tactics and marketing of unproven, expensive remedies.

"Waiting for people with cancer to ask for nutrition information or find their own information, and not providing support to those who need it will contribute to inequities in cancer outcomes."

Dr. Peniamina says there needs to be a consistent and systematic nationwide approach to ensure all <u>cancer patients</u> have an equal opportunity to benefit from good nutrition during and after treatment.

"The establishment of Te Aho o Te Kahu (Cancer Control Agency) is a positive step and the New Zealand Cancer Action Plan recognizes the need for a more holistic approach to cancer care.

"However, outside of the health system there is also a need to address the impact of low incomes and the cost of healthy food," she says.

The health system review currently underway should look at increasing dietitian support for people with cancer during and after treatment and the development of a range of cancer-specific <u>nutrition</u> resources for nationwide use that are easy to understand and culturally appropriate, she says.



Provided by University of Otago

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