Artificial Nutrition Advance Care Planning

There may be times during your cancer treatment when you are unable to swallow well or take in enough food and liquid to meet your body's needs. Artificial nutrition may help you get the nutrition you need. If this happens, your care team will work with you to decide the best treatment plan.

The following information explains the different ways patients can receive artificial nutrition. We encourage you to talk with your care team about this treatment before you need it.

- Learn the facts about each treatment.
- Understand the benefits and risks and how they apply to you.
- Talk with your care team and ask questions.
- Talk with the people who you trust and care about you.

Types of Artificial Nutrition

Artificial nutrition is a way to get nutrition and hydration without taking in food and drink through the mouth. Artificial nutrition feeds the body through tubes, which may be placed:

- Through the nose into the stomach
- Through a cut in the skin and then into the stomach or small intestine
- Into a vein (intravenous or IV)

Tube Feeding (TF)

Tube feeding is a way to get artificial nutrition through a tube that is placed into your stomach or intestine. Depending on your medical needs, this tube goes through the nose or through the skin in your abdomen.

A tube placed through the nose into the stomach is called a nasogastric (NG) tube. This is usually a short-term way to place a feeding tube.

If the feeding tube needs to be in place for a longer time, a tube may be placed through the skin into the stomach (G-tube) or small intestine (J-tube). For some patients, this procedure may require surgery.

Total Parenteral Nutrition (TPN)

Feeding by IV is known as total parenteral nutrition (TPN). For TPN, the IV tube is connected to a bag of liquid formula which goes from the bag through the tube and into a vein. This method works best when the body cannot absorb feedings through the stomach or intestines.

For TPN, patients receive a central venous catheter (CVC). A CVC is a tube that is usually placed into a large vein in the arm or under the collarbone. A CVC is a long-term way to place a tube and can be removed when you no longer need it.

Benefits of Artificial Nutrition

Additional feedings may be helpful when you:

- Are preparing for surgery
- Cannot eat after surgery
- Have wounds that need to heal
- Have a blocked bowel (bowel obstruction)
- Cannot swallow because of a blocked esophagus or from oral surgery
- Cannot swallow because of severe pain in the mouth or esophagus caused by radiation, chemotherapy, infection or other reasons

Your Treatment Decisions

Talk with your doctor, nurse and dietitian about any questions or concerns you have. Artificial nutrition may not be right for all patients. The benefits and risks of each treatment may depend on your health status and goals.

Sometimes your body cannot use the nutrition properly and does not tolerate artificial nutrition. This often happens in the later stages of illness when the body begins to shut down. Comfort care may be the primary goal of care at this time.

At this stage, most people are not hungry. If you or your caregivers decide not to have artificial nutrition, you will not be starving. Good oral hygiene can help you stay comfortable, and just a few sips of fluid or a few bites of food is enough.

Resources

Learn more online at https://MDAndersonTLC.LibGuides.com/AdvanceCarePlanning.

Ask your social work counselor for a copy of the patient education workbook titled **Advance Care Planning**.