



Preventing and Treating Diarrhea Related to Chemotherapy and/or Radiation Therapy  
 Clinical Practice Guidelines Table  
 (Literature search completed through May 2008)

Guidelines Author	Summary of Guidelines	Conclusions and Implications
<b>Review of Dietary Guidelines for the Management of Diarrhea in Patients With Cancer</b>		
<b>PEP Weight of Evidence Category: Recommended for Practice</b>		
<p>McCallum &amp; Polisen, 2000</p>	<p>Authored primarily by clinical dietitians. Impetus for publication came from members of the Oncology Nutrition Dietetic Practice Group (ON DPG) who requested practice guidelines.</p>	<p>Recommended diet practices:            --Avoid insoluble fiber (raw fruit and vegetables, whole-grain bread, nuts, popcorn, skins, seeds, legumes)            --Add soluble fiber (pectin-containing foods such as applesauce, oatmeal, bananas, cooked carrots, and rice)            --Avoid large quantities of hyperosmotic liquids such as fruit juice and sweetened fruit drinks            --Avoid greasy, fatty, or fried foods            --Restrict milk products            --Replace fluid losses with one cup of water per episode of diarrhea            --Avoid or limit caffeine to less than 2–3 servings of coffee, tea, or cola            --Eat small but frequent meals            --Increase intake of foods high in potassium, such as bananas and potatoes            --Consider elemental oral nutrition supplements or supplements with medium chain triglycerides (MCT) oil if fat malabsorption is an issue.</p>
<p>American Institute of Cancer Research, 2007</p>	<p>AICR, a nonprofit organization, is the only national cancer organization that focuses exclusively on the relationships among diet, nutrition, and cancer. AICR's primary focus is on cancer prevention, but also seeks to provide reliable information about cancer diagnosis and treatment for patients diagnosed with cancer. AICR conducts research and provides educational programs to promote understanding of how dietary changes can reduce cancer risk, as well as educating the public about the role of diet in the treatment of cancer. AICR is funded by private/individual donations. AICR does not receive any federal funding.</p> <p>AICR developed the <i>CancerResource</i> program for cancer patients, families, and friends. <i>CancerResource</i> discusses treatment options, expected side effects, and tips for managing side effects. The guidelines listed in the column to the right are available via <i>CancerResource</i> publications as well as online.</p>	<p>Recommended diet practices:            --Choose low-fiber, low-residue foods (rice, noodles, cream of wheat, well-cooked eggs, bananas, white toast, canned or cooked fruit without skin, skinned turkey or chicken, fish, and mashed potatoes)            --Avoid insoluble fiber (raw fruit and vegetables, whole-grain bread, nuts, popcorn, skins, seeds, legumes)            --Avoid spicy, greasy, fatty, or fried foods            --Avoid milk products            --Avoid alcohol            --Drinks plenty of fluids, such as water, diluted cranberry juice, broth, and decaffeinated tea or coffee            --Avoid or limit caffeine to less than 2–3 servings coffee, tea, or cola            --Eat small frequent meals            --Drink liquids at room temperature            --Increase intake of foods high in sodium and potassium, such as bananas and potatoes</p>
<b>Review of Diet Recommendations for Chemotherapy-Induced Diarrhea</b>		
<b>PEP Weight of Evidence Category: Recommended for Practice</b>		



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Kornblau, 2000	<p>Document discusses overall management of chemotherapy-induced diarrhea (CID) resulting from treatment with fluoropyrimidines and irinotecan and includes an expert review of mechanisms of CID, management issues and pharmacologic approaches. Toxicity is defined per National Cancer Institute (NCI) criteria.</p> <p>Expert clinicians include doctors, oncology nurses, and PharmDs. No dietitians were included. The group participated in a closed roundtable meeting to review known mechanisms of CID and GVHD-induced diarrhea, management issues during cancer treatment (e.g., treatment of diarrhea), and pharmacologic approaches to treatment. The end result was a proposal for new treatment guidelines and an algorithm for the management of CID and GVHD-induced diarrhea.</p>	<p>The first step in treatment should include evaluating diet for “diarrhea-enhancing foods” with subsequent diet modifications: Avoid lactose, high-fat foods, caffeine, and alcohol. Consume at least 8-10 servings of liquid per day and eat small, frequent meals.</p> <p>Recommendations included in algorithm for treatment of diarrhea</p>
<b>Review of Diet Recommendations for the Prevention and Management of Chemotherapy-Induced Diarrhea</b>		
<b>PEP Weight of Evidence Category: Recommended for Practice</b>		
Maroun et al., 2007	<p>A Canadian working group consisting of medical oncologists and an oncology pharmacist reviewed the optimal approach to managing CID.</p> <p>Strengths of article: The group used NCI criteria for severity of diarrhea, which is consistent with the body of literature. No special costs or training were required for diet interventions (listed in column to the right).</p> <p>Weaknesses: Requires further validation in prospective clinical trials.</p>	<p>The first step in treating grades 1–2 diarrhea is dietary management.</p> <p>Diet recommendations: Avoid foods that are high in fiber and fat, drinks that contain lactose, other caffeinated beverages, and alcohol. Increase total intake of oral fluids that are suitable for rehydration.</p> <p>In addition, evaluate possible causes of diarrhea, such as laxatives, stool softeners, antacids, and antibiotics.</p>