



# CARE INSTRUCTIONS

KAISER PERMANENTE

## Pancreatic Cancer Surgery: What to Expect at Home

### Your Kaiser Permanente Care Instructions

By the time you go home, most of your pain will probably be gone. If you have pain, you will have medicine you can take. You will probably feel very tired and weak. Even simple tasks may tire you. Take naps when you wish, but try to get some exercise.

You may have trouble concentrating or difficulty sleeping. This usually goes away in 2 to 4 weeks.

You will probably be able to return to work or your normal routine in about 1 month. It will probably take about 3 months for your strength to come back fully. You may need more treatment for the cancer, such as chemotherapy or radiation.

Food may not taste good to you and may have a metallic taste. Your stomach may not empty as it should after eating. This may cause nausea, vomiting, and loss of appetite. These usually go away 2 to 6 weeks after surgery. Most people regain their normal appetite in about 8 weeks. You will probably lose some weight. This is normal.

You may have a feeding tube (J-tube) coming out of your belly. If you have one, your doctor will decide when to take it out. You may have it for several months or longer.

When you find out that you have cancer, you may feel many emotions and may need some help coping. Seek out family, friends, and counselors for support. You also can do things at home to make yourself feel better while you go through treatment. Call the American Cancer Society (1-800-227-2345) or visit its website at [www.cancer.org](http://www.cancer.org) for more information.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to get better as quickly as possible.

## How can you care for yourself at home?

### Activity

- Rest when you feel tired. Getting enough sleep will help you recover. You will probably want to nap often.
- Try to walk each day. Start by walking a little more than you did the day before. Bit by bit, increase the amount you walk. Walking boosts blood flow and helps prevent pneumonia and constipation.
- For about 4 to 6 weeks after surgery, avoid lifting anything that would make you strain. This may include a child, heavy grocery bags and milk containers, a heavy briefcase or backpack, cat litter or dog food bags, or a vacuum cleaner.
- Avoid strenuous activities, such as biking, jogging, weight lifting, or aerobic exercise, until your doctor says it is okay.
- You may shower, if your doctor okays it. Pat the cut (incision) dry. Follow your doctor's instructions about showering with your drain and how to empty and care for it. Keep your feeding tube taped to your skin so it will not fall off. After showering, clean the tube site, dry it well, and replace the dressing if you have one.
- Ask your doctor when you can drive again.
- You will probably be able to return to work about 4 weeks after you leave the hospital.
- Your doctor will tell you when you can have sex again.

### Diet

- Sometimes the stomach empties food into the small intestine too quickly. This is called dumping syndrome. It can cause diarrhea and make you feel faint, shaky, and nauseated. It also can make it hard for your body to get enough nutrition.
  - High-sugar foods—such as desserts, soda pop, and fruit juices—are most likely to cause dumping syndrome. Avoid high-sugar foods, or use products that have artificial sweeteners if sugar gives you a problem.
  - Do not drink liquids within a half hour before eating and up to an hour after eating. Liquids move food even more quickly into the small intestine. Quick emptying of the stomach increases the chance of diarrhea.
  - Eat slowly. Try to chew each bite about 20 times. Allow 20 to 30 minutes for each meal.
  - Eat 5 or 6 small meals or snacks a day. This may keep you from feeling too full after eating and may reduce problems with diarrhea and dumping syndrome.

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- If the surgeon did not remove any part of your stomach, you can eat your normal diet. But the surgery affects everyone's digestion differently. You may need to eat more smaller meals instead of fewer larger meals. You may have to try several foods to see what tastes good to you.
- Eat healthy food. If you do not feel like eating, try to eat food that has protein and extra calories to keep up your strength and prevent weight loss. Drink liquid meal replacements for extra calories and protein. If your stomach is upset, try bland, low-fat foods like plain rice, broiled chicken, toast, and yogurt.
- Whenever you eat, you may have to take enzyme pills to replace those the pancreas makes. These help you digest your food, especially fat.
- You may notice that your bowel movements are not regular right after your surgery. This is common. Try to avoid constipation and straining with bowel movements. You may want to take a fiber supplement every day. If you have not had a bowel movement after a couple of days, ask your doctor about taking a mild laxative.

## Medicines

- Your doctor will tell you if and when you can restart your medicines. He or she will also give you instructions about taking any new medicines.
- If you take blood thinners, such as warfarin (Coumadin), clopidogrel (Plavix), or aspirin, be sure to talk to your doctor. He or she will tell you if and when to start taking those medicines again. Make sure that you understand exactly what your doctor wants you to do.
- You may have to take anti-ulcer medicine for stomach ulcers.
- You may have diabetes. If this is the case, you may have to check your blood sugar and give yourself insulin shots every day.
- You may need to take enzyme supplements to replace enzymes the pancreas makes.
- Take pain medicines exactly as directed.
  - If the doctor gave you a prescription medicine for pain, take it as prescribed.
  - If you are not taking a prescription pain medicine, ask your doctor if you can take an over-the-counter medicine.
- If you think your pain medicine is making you sick to your stomach:
  - Take your medicine after meals (unless your doctor has told you not to).
  - Ask your doctor for a different pain medicine.
- If your doctor prescribed antibiotics, take them as directed. Do not stop taking them just because you feel better. You need to take the full course of antibiotics.

## Incision care

- You may feel a ridge along the incision, or cut. This is normal, and it will go away in a few weeks.
- Wash the area daily with warm, soapy water and pat it dry, unless your doctor tells you not to.
- If you have strips of tape on the cut, leave the tape on for a week or until it falls off.
- You may see a small amount of clear or light red fluid staining your dressing. This is normal.

## Exercise

- Regular exercise will help you regain strength. Start with walking every day. Your doctor will tell you when you can do more.

## Other instructions

- You will have a drain near your incision. Your doctor will tell you how to take care of it.
- You may have a feeding tube in your belly. Your doctor will show you how to use it and take care of it.
  - It is normal to have some yellowish fluid around your feeding tube. This is **not** a sign of infection.
  - Keep your feeding tube clamped unless you are using it.
  - Keep it taped to your skin at all times.
  - Clean around the tube with water before and after you use it.
  - Flush the tube daily as your doctor tells you to.

**Follow-up care is a key part of your treatment and safety.** Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

## When should you call for help?

**Call 911** anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have severe trouble breathing.
- You have sudden chest pain and shortness of breath, or you cough up blood.

**Call your doctor now** or seek immediate medical care if:

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- Your feeding tube or the stitches holding it start to pull out.
- Your feeding tube is leaking or becomes cracked.
- It becomes harder to put food through the feeding tube.
- You have pain that does not get better when you take your pain medicine, especially pain in the belly.
- You have loose stitches, or your incision comes open.
- Bright red blood or a clear fluid has soaked through a large bandage over your incision.
- You have signs of infection, such as:
  - Increased pain, swelling, warmth, or redness.
  - Red streaks leading from the incision.
  - Pus draining from the incision.
  - A fever.
- You have signs of a blood clot, such as:
  - Pain in your calf, back of knee, thigh, or groin.
  - Redness and swelling in your leg or groin.

Watch closely for changes in your health, and be sure to contact your doctor if:

- You have diarrhea or are vomiting.
- Your stools look "greasy" or have undigested food in them.
- You urinate a lot more and feel thirsty.
- You have signs of jaundice. These include the white parts of your eyes looking yellow and your urine turning brown.
- Fluid is leaking around the drain, or you have no new fluid in the drain for 24 hours.
- You do not have a bowel movement after taking a laxative.

## Where can you learn more?

Go to <http://www.kp.org>

Enter **P848** in the search box to learn more about "**Pancreatic Cancer Surgery: What to Expect at Home.**"

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