

Lack of Appetite

What can be done when someone loses interest in food

What you can do

Family and friends often find a person's complete lack of appetite and weight loss worrisome. It is a natural instinct to encourage the person to eat and drink more, thinking that the person will feel stronger and live longer.

However, people with advanced illnesses can be comfortable with little or no food intake for weeks or months. That is because people who are seriously ill often do not experience hunger or thirst in the way that healthy people do. Forcing someone to eat in these situations can make them feel nauseated and may contribute to feelings of distress.

TIP: The person is often in the best position to make the decisions about what to eat, when to eat or whether to eat or drink at all.

Caregiver tips

- Prepare several small meals during the day, as opposed to three larger ones.
- Avoid spicy foods if the person can no longer tolerate them.
- Avoid cooking odors if they are troublesome.
- Do not be surprised if the person craves certain foods some days, and has no interest in them on others.
- Try not to get frustrated if the person asks for a certain food and then loses interest by the time the food arrives.
- Let the person decide how much, what, and when they will eat.
- Recognize that individuals with serious illnesses often become full quickly, sometimes after just a few bites of food.
- Try not to push the person to eat more, as a feeling of being overly full, nauseated or vomiting may result.
- Try not to make mealtimes a time of tension about eating and food. Rather, focus on sharing time together.
- Remember that a rejection of food is not a rejection of you.
- Unless a health provider asks for updates on weight, do not routinely keep track of weight.

Mouth care

Feelings of having a dry mouth can be reduced by sucking on ice chips or hard candies. The mouth can be moistened by swabbing with water. Another option is to spray a mist of water into the mouth. Remember that as people become weaker, they may not be able to swallow liquids safely. When in doubt, check with the health care team about what is safe to offer.

What your health care team may do

The health care team will sometimes find problems that may be contributing to loss of appetite. These are problems that the health care team may want to treat:

- constipation
- blockage of the bowels
- side effects of medicines
- chemical imbalances of the blood such as a high calcium level

Medications

The health care team might select a drug or combination of drugs to help manage lack of appetite and weight loss.

Medications that may help nausea

Medications might be used to help manage the persistent nausea that some people experience. Metoclopramide (Maxeran®) and domperidone (Motilium®) are medications that help to manage persistent nausea by speeding up the rate at which food moves out of the stomach. They also work at the nausea centre in the brain.

Medications that may help to stimulate appetite

Sometimes medications can help to stimulate appetite. Unfortunately, despite improved appetite and increased intake of food, the body still does not seem to be able to use the nutrients in food, so there may not be a gain in strength or improved overall survival time. However, these medications may result in more energy and an improved overall sense of well being. The medications most commonly used are steroids and special hormones called progestational drugs.

- Steroids such as prednisone and dexamethasone may stimulate the appetite for a short period of time (usually less than a month).

- This increase in appetite is usually not associated with weight gain. Inquire about potential side-effects.
- Hormones, specifically progestational drugs such as megestrol acetate (Megace®) may also stimulate the appetite, and the effects may last longer than those of steroids. People taking megestrol acetate may gain weight, although this tends to be fat, rather than muscle tissue. Inquire about potential side-effects.

Antidepressant medications

Poor appetite is common in people who are depressed. Antidepressant medications may be prescribed if depression is thought to be contributing to the lack of appetite. In addition, some antidepressants are thought to have appetite-stimulating effects that are independent of their influence on mood.

Tube feeding, intravenous fluids and nutrition

Using feeding tubes or intravenous (TPN) feeding are medical treatments. (There is no TPN done in Revelstoke. It is generally done in larger centers. If you want more education about this topic, please go directly to the Virtual Hospice website or explore it with your health care team.)

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