
PREPARE©
Potential Barriers and Strategies
CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

TOPICS

Welcome to Week 2



Click the yellow “Next” button NEXT above if you want to go through the entire Week 2 step by step, or click on a button below to jump directly to a topic of interest.

Watch this video of Dr. Eileen Shinn, Assistant Professor, MD Anderson Cancer Center, as she introduces the topics this week.

- Caring for Your Skin
- Communication at Home
- Dental Care
- Constipation
- Fighting with Your Caregiver
- Patient Stories and Tips to Encourage You
- Thick Saliva and Dry Mouth
- Stress Relief



Caring for Your Skin During Treatment

Click here to learn useful information about caring for your skin during your treatment.



CARING FOR YOUR SKIN DURING TREATMENT

General Information

Wear sunscreen on your neck anytime you're outside.

You can apply cream to your neck throughout the day EXCEPT for the 4 hours before your radiation treatment.

Wipe off excess cream before treatment, as a thick layer of cream spreads more radiation to your healthy tissue.

Note: These are general tips and guidelines. Always follow your doctor's orders.







CARING FOR YOUR SKIN

Sunscreen: Products

Neutrogena Ultra-Sheer Dry-Touch Sunblock SPF 70

What it is: An oil-free, fragrance-free sunscreen

Where to buy: CVS, Walgreens, other drug stores

More patients prefer this to other sunscreens. However it is water-resistant; so it may be difficult to wash off.



CARING FOR YOUR SKIN

Sunscreen: Products

Elta MD Skincare UV Broad Spectrum SPF 41

What it is: Helps prevent sun damage.

Where to buy: eltastore.com, amazon.com



CARING FOR YOUR SKIN

Sunscreen: Products

Blue Lizard Australian Sunscreen: Sensitive

What it is: Developed to combat one of the most intense UV environments in the world; so it is very effective.

Where to buy: walgreens.com, amazon.com

It is very thick but effective.



Constipation

Click here to learn about how to prevent and manage constipation during your treatment.



Preventing Constipation

"I was so irritated with my wife when she made me learn about bowel management, but it ended up saving my life."

Former Patient

Patients taking pain medication or receiving chemotherapy often experience constipation as a side effect.

Be sure to talk to your healthcare team so that an optimal bowel management plan can be created for you.

You may be asked to take an oral laxative to prevent or treat constipation. Recommended laxatives are Senna or Miralax.

You may also be asked to take enemas to prevent severe dehydration and hospitalization.



CONSTIPATION

Report the Following Symptoms to Your Doctor or Nurse

No bowel movement or passage of gas for more than 2 days.

Abdominal cramping.

Fever and/or nausea and vomiting.

Note: The following tips are general guidelines and products. Always follow your doctor's orders.



Constipation: Products
Prune Juice

Dose/Schedule: 1/2 cup morning and night

Description: Room temperature

Where to buy: Grocery store



Constipation: Products Hot Liquids

Dose/Schedule: 1 cup morning and night

Description: In general, increasing fluid intake promotes bowel movement.

Where to buy: Grocery store





Coffee and other caffeinated drinks are not the best choices for hydration during radiation. Try to drink water, herbal tea, or juice instead.

Constipation: Strategy Walking

Schedule: 1-3 times per day

Description: Walking/increasing activity helps promote muscle movement in the bowel.



Constipation: Strategy Foods

Ripe papaya, soft cooked spinach, cooked okra, beans

Dose/Schedule: 1/2 cup in the morning

Description: These foods help prevent constipation. If they are too fibrous or difficult to swallow, try something else.

Where to buy: Grocery store






Constipation: Products Senna (Senokot)

Dose/Schedule: Start with 1 tablet 2 x per day, morning and evening (same time every day); up to 4 tablets 2x per day. You can safely take up to 8 Senna tablets in one day. Many patients take more than 8 pills, but talk with your doctor or nurse first.

Description: A natural supplement that promotes bowel movement

Where to buy: CVS, Walgreens, other drug stores



Constipation: Products Miralax

Dose/Schedule: 1-3 sachets daily in divided doses

Description: A powder dissolved into water – promotes bowel movement

Where to buy: CVS, Walgreens, other drug stores



Constipation Management: What To Do If You're Constipated



If you do not have a bowel movement by 4pm of the second day:

- Drink half a cup (4 oz.) of prune juice at room temperature
- Then drink some hot liquid (e.g., soup, broth)

If you do not have a bowel movement by bedtime that night:

- Take Senna, Miralax or lactulose as prescribed

If you do not have a bowel movement after 2 days:

- Call the speech pathology team at the clinic – (817) 920-0484

CONSTIPATION

Do Not Take Metamucil or Citrucel

Do Not Take Metamucil or Citrucel, as these products can actually block your gut and cause serious complications.



Partial List of Medications that Cause Constipation



Do NOT stop taking any of your prescription medications without talking to your doctor.

Antacids with calcium (Tums, Maalox)

Antihistamines (Benadryl/diphenhydramine, Actifed/triprolidine, Allegra/fexofenadine, Claritin/loratidine, Zyrtec/cetirizine)

Anti-inflammatories

Calcium channel blockers (Calan/verapamil hydrochloride, Cardene/nicardipine hydrochloride, Dynacirc/isradipine, Nimotop/nimodipine)

Parkinson's disease medications (Sinemed/levodopa, Starvelo. Parcopa)

Iron Supplements

Muscle relaxants (Flexeril/cycolbenzaprine, Amrix, Fexmid, Lioresal/baclofen)

Opiod pain medicines (Codeine, Fentanyl, Hydrocodone, Hydromorphone, Levorphanol/ levodromoran, Meperidine/Demerol, Methadone, morphine, Darvon/propoxyhene, Anexia, Darvocate, Darvon Compound, Lorcet, Lortab, Percodan, Roxicet, Tylenol with codeine, Tylox)

Neuroleptics/Anti-psychotic medicines (Risperdal/risperidone, Zyprexa/olanzapine, Clozaril/clozapine, Haldol/haloperidol)

Tri-cyclic antidepressants (Elavil/amitriptyline, Anafranil/clomipramine)

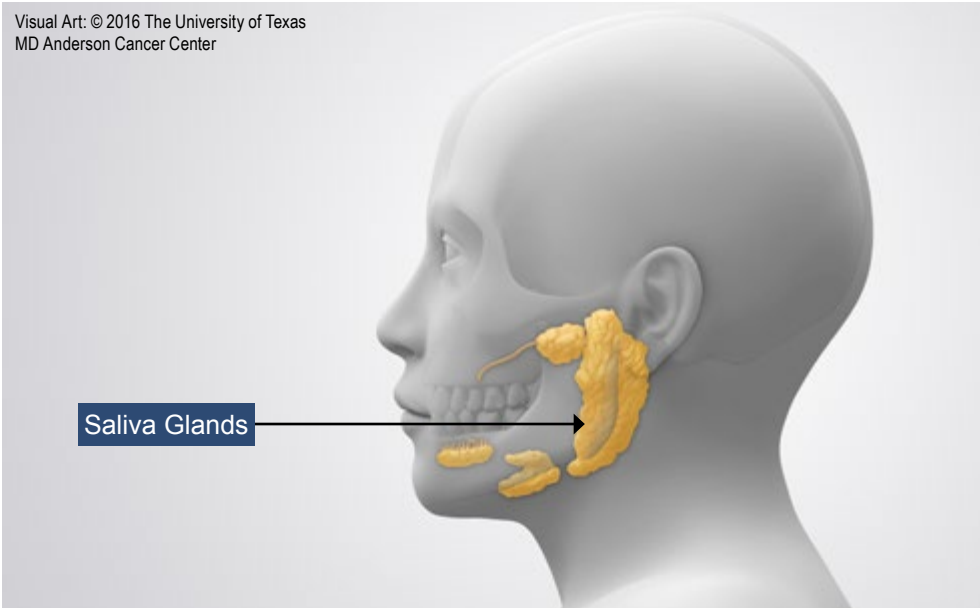
Thick Saliva and Dry Mouth

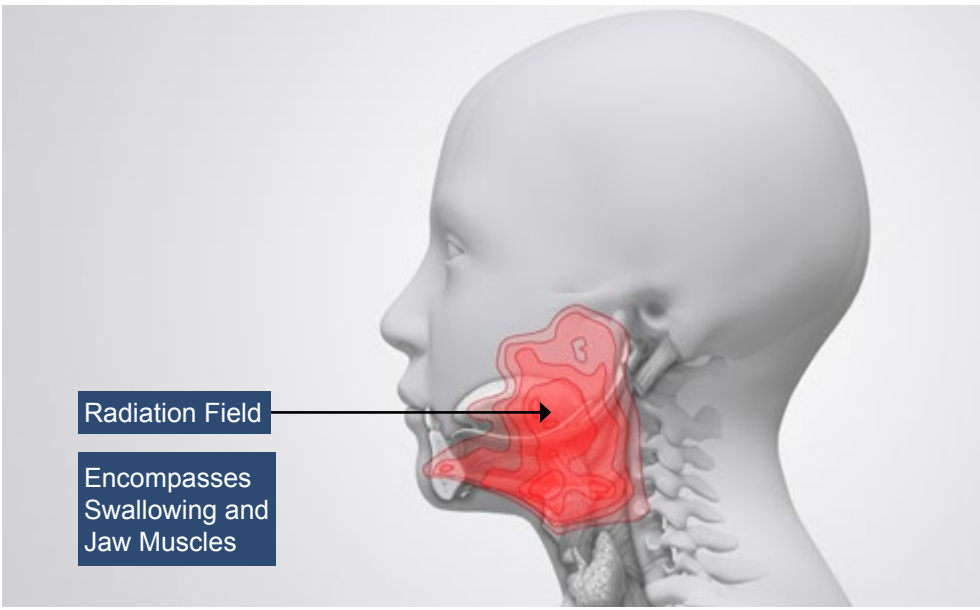
Click here or swipe left to learn how to control thick saliva and dry mouth.



Why is my saliva getting thick? Why is my mouth dry?

Your saliva is manufactured by three primary glands pictured above. Unfortunately, these glands are located in the area targeted by your radiation treatment. You may notice your saliva getting thicker, or that you have less of it. However, some patients experience the opposite problem: they have too much saliva.





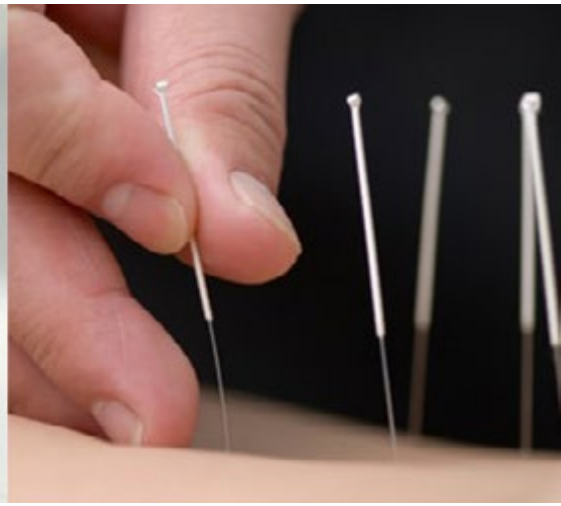
What can I do?

Drink liquids to prevent dehydration and ease the feeling of dryness in your mouth. Remember your 1 gallon of fluid (16 cups) spaced throughout the day. This will also help thin out your saliva.

Your doctor may recommend taking a teaspoon of Robitussin DM to thin out your mucus.

Acupuncture may be helpful. Ask your doctor for a referral for acupuncture.





Communication at Home

Click here or swipe left to learn how about communicating with your caregiver and family.



Tips for Communicating with Your Loved One at Home



Radiation treatment can be a very stressful time for patients and their caregivers. Therefore, it's not unusual for couples who normally communicate well with each other to start experiencing problems with their communication.

When speaking to your loved one, try to be as clear, specific, and detailed as possible.

Pay attention to nonverbal behavior. It is not always what you say, but how you say it. Watch your tone of voice, facial expressions, body language, and eye contact etc.

Be sure to listen: Try to tolerate lulls and silences in a conversation, in order to give your loved one the space they need to open up. One effective way to show that you are listening is to reflect back what was said and make a guess at the feeling underneath the spoken words.

During times of conflict, try not to talk down to the person in a condescending manner.

Resist the urge to jump in with advice. When you bombard people with suggestions, they may feel like you don't understand their situation or that you are minimizing their problems. First try listening to your loved one. Try to convey that you understand how they feel.

Empathy: When someone is going through a hard time, it is important to show him or her empathy. Convey that you are trying to imagine what it is like to be in their situation.

Tips for Communicating with Your Loved One at Home



Use “I” Statements

One way to communicate with your spouse without placing blame or drawing a defensive argument is to use “I” statements instead of “You” statements.

The “I” statement tells your spouse how you feel, in contrast to the “You” statement, which places responsibility on your spouse.

Tips for Communicating with Your Loved One at Home



When spouses become anxious, they sometimes start to nag. This is an ineffective way to help the patient. For example, caregivers may say something like the following:

"You never do your swallowing exercises. You know what the doctor said could happen!"

This is ineffective because nagging, or using other fear-based tactics, often causes the other person to "shut down." Communication can be very difficult when a person is feeling hounded by his or her caregiver.

A more effective strategy is to acknowledge the relationship between the caregiver and patient with an "I" statement:

"I feel a little anxious when I don't see you doing your exercises. Why don't you work on your exercises while I do some situps or stretches?"

Or

"I feel a little anxious when I don't see you doing your exercises. Is there something I can do to help support you with your exercises?"

This is more effective, because it takes some of the focus and pressure off the patient. And it acknowledges that your anxiety is your issue, not the patient's responsibility. Try to make the exercises feel like a team effort.

Fighting with Your Caregiver

Click here or swipe left to learn how to handle a fight with your caregiver.



If You're Having a Fight with Your Caregiver:



Pick appropriate times to express your feelings.

When expressing your feelings use "I" statements, instead of accusatory statements.

When you are upset or angry, try using a calm tone of voice.

Avoid negative communication styles such as name-calling, criticism, sarcasm, and yelling.

I**f the discussion** becomes too intense or difficult, take a time out.

It's important to realize that it is not your job to solve all of his or her problems.

The best way that you can help is to be an active listener. Active listeners make frequent eye contact and ask questions to show that they are listening.

If your loved one is pressuring you to solve his or her problems, you might want to take a break from the conversation.

Here is an example of something you could say:

"I'm trying to be helpful, but I'm reaching my limit. Let's please talk about this when we've both had some rest."

Stress Relief

Click here or swipe left to learn ways for patients and caregivers to relieve stress.



STRESS RELIEF

Stress Relief Skills Video Introduction



Watch this video of Dr. Eileen Shinn, Assistant Professor at MD Anderson Cancer Center. She has taught relaxation exercises to several cancer patients over the years and they have found them to be a very effective method to relieve stress.



STRESS RELIEF

Stress Relief for Patients and Caregivers

If you are stressed or if you are interested in learning more about stress relief, click the "I Am Stressed" button below.

If not, the yellow "Next" button NEXT above to go to the next page.

I Am Stressed



STRESS RELIEF

Diaphragmatic Breathing

Rationale: Deep breathing is one of the easiest relaxation techniques, however, it is one people don't think to use during times of stress.

What happens to your breathing when you are stressed?

Your breathing becomes shallow, rapid and occurs high in the chest.

How is it different when you are relaxed?

When you are relaxed, you breathe more fully, more deeply, and from your abdomen. It is hard to be tense and breathe from the diaphragm.



Benefits of breathing exercise include:

- **Increased oxygen** supply to the brain and muscles.
- **Efficient excretion** of bodily toxins through the lungs. When you take in an insufficient amount of fresh air, your blood is not properly purified or oxygenated. Waste products that should have been removed are kept in circulation.
- **Reductions** in anxiety, depression irritability, fatigue, muscle tension.

STRESS RELIEF

Breathing Awareness Instructions

(Adapted from the Relaxation and Stress Reduction Workbook. New Harbinger Publications, 1980)



Lie down in a comfortable position. (Patients who have difficulty can stay in their chairs).

Place your left hand on your chest and your right hand on your abdomen.

Close your eyes.

Pay attention to your breathing.

Which hand is moving the most? Which seems to rise and fall as you inhale and exhale?

If it's your chest, you are not efficiently using the lower part of your lungs.

If it's your abdomen, you are more likely to be breathing with your diaphragm.

STRESS RELIEF

Deep Breathing Instructions



Stay lying on your back in a comfortable position. Remember, you can practice this sitting in a comfortable chair or lying on a couch or bed.

Scan your body for tension. Remember to pause at each area.

Keep one hand on your abdomen and one on your chest.

Start out by inhaling slowly and deeply through your nose and exhaling slowly through your mouth.

Feel the breath move through your chest. As you breathe through your nose, once your breath gets to your stomach, concentrate on pushing your abdomen upwards toward the ceiling. The hand on your abdomen should rise higher than your chest. Then slowly exhale through your mouth.

Each time you inhale and push your abdomen toward the ceiling, hold your breath for just a second.

As you exhale, feel the tension leave your body.

Keep your breathing slow and regular.

To help slow breathing, some people like to count slowly to 4 as you inhale, and slowly to 4 as you exhale.

Others like to say something to themselves like “I am...” “relaxed.”

Continue to take long, slow, deep breaths, which raise and lower your abdomen.

Open your eyes slowly.

STRESS RELIEF

Diaphragmatic Breathing Audio

Pick a time when you won't be interrupted, sit in a comfy chair preferably without the TV on, and listen along.

Click on the play button at the right to play audio.



STRESS RELIEF

Guided Imagery Introduction

Many people use their imagination to relax.

Guided imagery is a way to create pleasant and relaxing images in your mind.

Use all your senses, sight, hearing, touch, taste, and smell.

This technique can be a good way to treat many stress-related and physical illnesses.

Guided imagery can be very helpful in relieving anxiety related to your treatment.



STRESS RELIEF

Rules for Effective Imagery



Pick a comfortable place to sit, without the TV or other interruptions.

Scan your body for tension and allow them to relax as fully as you can.

Form a mental image of a real or imaginary that is pleasant and calm.

Involve all of your senses: Sight, Hearing, Smell, Touch, and Taste. You may want to start with one sense and then add others as the image becomes more detailed.

If you have trouble coming up with a situation, you may want to spend time thinking about it, or even write a description of it before doing the guided imagery exercise.

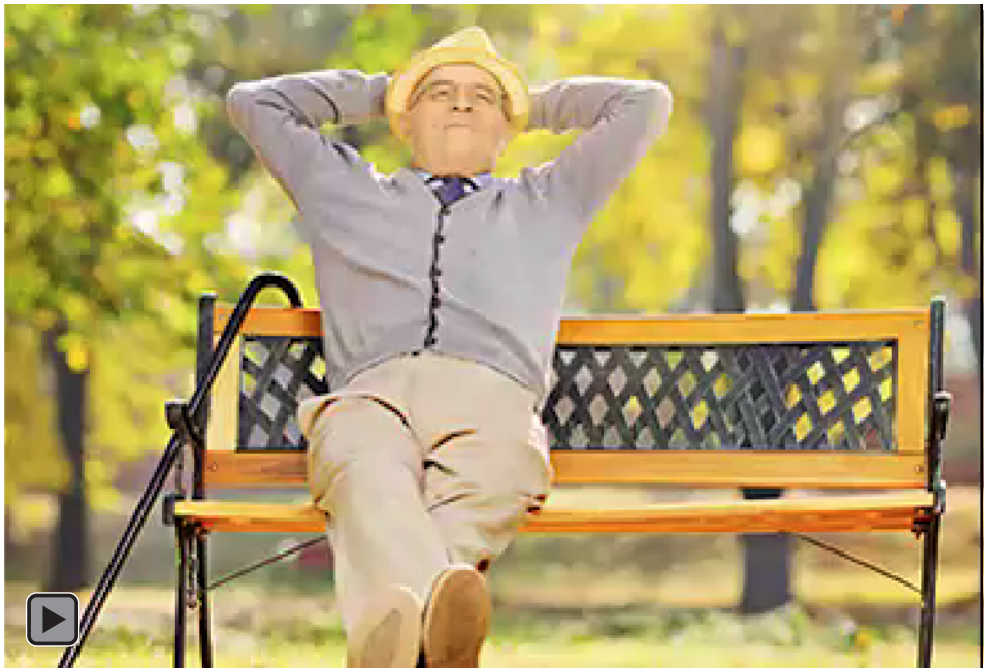
You may find it more relaxing if you make statements to yourself that describes your progress and that help you focus on the exercise.

STRESS RELIEF

Guided Imagery Audio

Pick a time when you won't be interrupted, sit in a comfy chair preferably without the TV on, and listen along.

Click on the play button at the right to play audio.



STRESS RELIEF

Progressive Muscle Relaxation

Introduction



Rationale: Progressive Muscle Relaxation (PMR) training consists of learning to tense then relax various groups of muscles all through the body, while at the same time paying very close and careful attention to the feelings associated with both tension and relaxation.

The goal of PMR training is to help you learn to reduce muscle tension in your body far below the normal level at any time you wish to do so!

Continued on the next page

STRESS RELIEF

Progressive Muscle Relaxation

Introduction



Before you begin, make sure you are seated in a comfortable recliner or lying on a comfortable surface. You may want to begin by doing a few minutes of diaphragmatic breathing.

For each muscle group, tense the muscles for about six seconds, and focus on relaxing the muscles for about twenty seconds. Be sure to let all the tension go immediately when you begin to relax the muscles. Remember to take deep, slow, diaphragmatic breaths between muscle groups.

If you have pain in one of the following muscle groups that you are asked to tense, skip that group for now until the pain subsides.

Continued on the next page

STRESS RELIEF

Progressive Muscle Relaxation



Steps

1. You will begin PMR training with your hands and your forearms. Tense the muscles in the right hand and right lower arm while making a tight fist. You should be able to feel the tension in the hand, over the knuckles, and up into the lower arm. Tense the muscles...and relax. Let all the tensions go, focusing on the relaxation.
2. Now, using the muscles of the right biceps, tense these muscles by pushing your elbow down against the arm of the chair or against the floor. Remember to hold the tension for about six seconds and then release the tension immediately. OK, tense now and relax.

Continued on the next page

STRESS RELIEF

Progressive Muscle Relaxation



Steps

3. Tense and relax the muscles of the left hand and lower arm in the same way as you did the right side, by making a tight fist. Tense now... and relax.
4. Tense and relax the muscles of the left biceps just as you did the right by pushing the elbows downward. Tense now...and relax. Focus on the feeling of the relaxed state.
5. Now tense the muscles of the forehead by raising your eyebrows as far as you can. Hold...and then relax. Imagine your forehead muscles becoming smooth and limp.

Continued on the next page

STRESS RELIEF

Progressive Muscle Relaxation



Steps

6. Now move down to the muscles in the central part of the face. Squint your eyes very tightly and at the same time wrinkle your nose to get tension throughout the central part of your face. Tense now...you should feel tension through the upper part of the cheeks and through the eyes. Now relax. Remember to breathe deeply.
7. Next, tense the muscles in the lower part of the face by biting your teeth together and pulling the corners of your mouth back. Tense now...focus on the feeling of tension in this area...and relax. Let your lips part and allow your jaw to hang loose.

Continued on the next page

STRESS RELIEF

Progressive Muscle Relaxation



Steps

8. Now tense the muscles of the neck. Pull your chin downward toward your chest and at the same time; try to prevent it from actually touching the chest. You should feel just a little bit of shaking and trembling in these muscles as you tense them. OK, tense now...and relax.
9. Now move to the muscles of the chest, the shoulders, and the upper back. You are going to combine quite a few muscles here, so tense these muscles by taking a deep breath, holding it, and at the same time, pulling the shoulder blades together. Pull them and try to make the shoulder blades touch. Tense now... and relax.

Continued on the next page

STRESS RELIEF

Progressive Muscle Relaxation



Steps

10. Now tense the muscles of the stomach by making these muscles very hard, as if you were going to hit yourself in the stomach. You should feel a good deal of tension and tightness in the stomach area. Tense now... and relax.
11. Now move on to the muscles of the legs and feet. Begin with the right upper leg by tensing the muscle on top of the leg. You should be able to feel the thigh muscle on top get quite hard. Tense now...and relax, letting all the tension go.

Continued on the next page

STRESS RELIEF

Progressive Muscle Relaxation



Steps

12. Now, tense the muscles of the right calf, or right lower leg. Do so by pulling your toes upward toward your head. You should be able to feel tension all throughout the calf area. OK, tense now...and relax. Remember to breathe deeply.
13. Tense the muscles of the right foot by curling your toes and arching your foot. Tense now... notice the feelings of tension in the foot... and relax.
14. Tense and relax the muscles of the left upper leg just as you had those of the right upper leg by tensing the muscle on top of the leg. Tense now... and relax, letting all of the tension go.

Continued on the next page

STRESS RELIEF

Progressive Muscle Relaxation



Steps

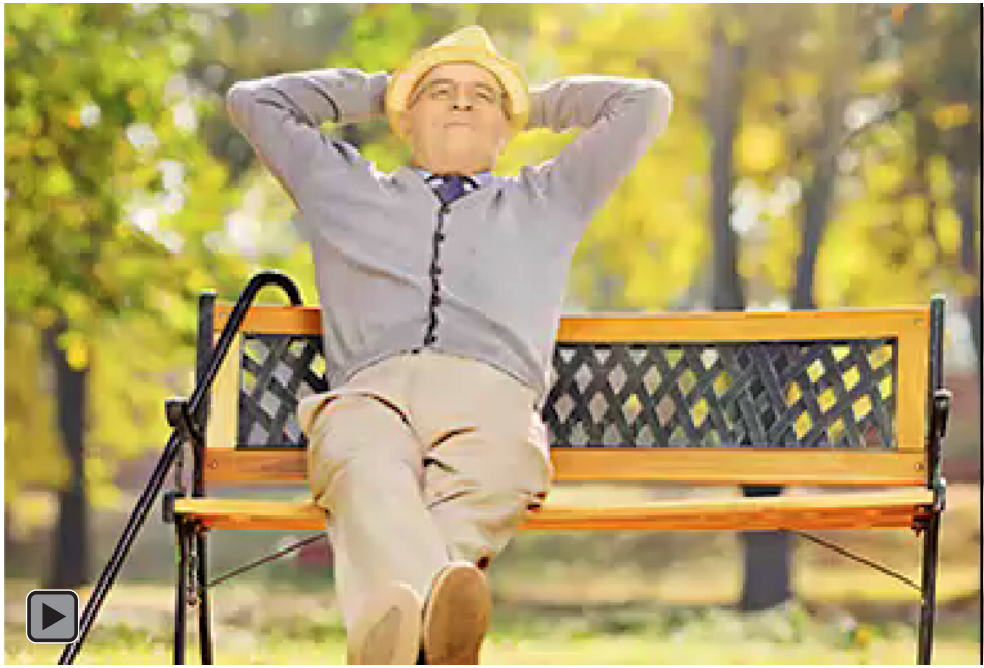
15. Now tense the muscles of the left calf or the left lower leg by pulling your toes upward toward you head. OK, tense now...and relax. Remember to breathe deeply.
16. Tense the muscles of the left foot by curling your toes and arching your foot. Tense now... and relax. Let all the tension go.

STRESS RELIEF

Progressive Muscle Relaxation Audio

This exercise is one of Dr. Shinn's favorites. The more you practice this exercise, the more quickly you will be able to achieve a state of deep relaxation.

Click on the play button at the right to play audio.



Dental Care

Click here or swipe left to learn about dental care during your radiation treatment.



DENTAL CARE

Instructions for Dental Care



It's important to take care of your teeth during radiation. Saliva has anti-microbial properties, without saliva, risk of cavities and bone loss increases.

BRUSH your teeth after every meal and snack, or after eating anything by mouth.

BRUSH your teeth in the morning and at night.

FLOSS your teeth after every meal and snack or after eating anything by mouth.

Apply FLUORIDE GEL to your teeth once a day for 5-30 min, as recommended by your dentist.

RINSE your mouth with baking soda solution after every meal and snack or after eating anything by mouth.

DENTAL CARE

Bicarbonate Oral Rinse

Baking soda rinses helps to keep your mouth cleaner, with less acidity. Try using the rinse 4x daily although you may use it as often as you like to help keep your mouth healthy and comfortable.

Ingredients

- 1 tsp baking soda
- 1 tsp salt
- 4 cups water

Mix baking soda, salt and water at room temperature in a bottle. Can be made daily, should be discarded after 24 hours.

Directions for Use

Swish in mouth and spit. Use 4x per day or as needed.



What do I do now?

Your doctor may recommend taking a teaspoon of Robitussin DM to thin out your mucus.

Communication can be very difficult when a person is feeling hounded by his or her caregiver.

The best way you can help is by being an active listener. Active listeners make frequent eye contact and ask questions to show that they are listening.

Resist the urge to jump in with advice.

Instead of nagging, use “I” Statements to communicate your concerns.

If you are having a fight or the discussion becomes too intense, take a time out.

Use sunscreen every day to protect your neck.

Pay attention to your bowel movements and follow the preventive steps if you feel yourself getting sluggish.

Try to drink 1 gallon (16 cups) of fluid spaced throughout the day.

Continue swallowing by mouth as much as possible.

If you are on pain medication, keep track of your Senna schedule and your bowel movements.

Listen to the relaxation exercise instructions

Alert your healthcare team if you are unable to keep fluids down and become lightheaded or your urine becomes dark in color.



Patient Stories and Tips to Encourage You

Click here to read stories and tips from other patients.



PATIENT STORIES AND TIPS TO ENCOURAGE YOU

"Attach a water bottle to your belt to always have water with you."

"Water, broth, decaffeinated coffee or tea, flavored drinks all count!"

"Radiation could be worse: I don't have to take my pants off and I'm face up!"

"Picture yourself well."

"If I do my exercises with the TV on, I lose all concentration. It's important to focus while you're doing them."

Former Patients

"Your spouse needs to understand the importance of the exercises."

Wife: "I'll say to him 'Have you done your exercises?' I don't want to be a nag."

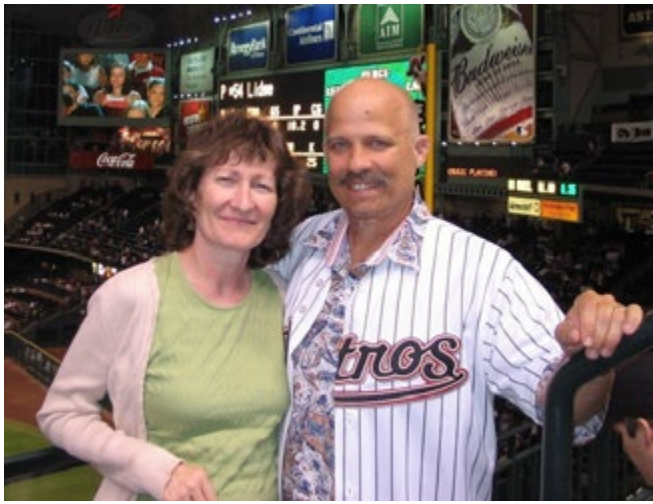
Husband: "Sometimes she'll say to me 'Just do half of your exercises then.'"

"People around have different reactions. For some, it is hard to be around me, and some just come up and talk. No one likes saying 'cancer.'"

"It's important to ask questions."



Steve's Story



"I had my cancer treatment two years ago. I don't define myself by my cancer. It's not something I dwell on. I had chemotherapy first followed by 6 weeks of radiation with double sessions during the last week. During radiation, I lost my appetite and everything tasted like cardboard.

Since so much was happening so fast, I had to find places where I could make a choice. For instance, I didn't want to hear about every potential side effect of my radiation, I just wanted to focus on getting through it. I didn't allow any negative talk during my treatment – I would even bring earphones to my appointments and listen to music in the waiting room if someone started venting on their cellphone.

I didn't want my wife Linda, who had already changed her role from that of wife to that of caretaker, to be my monitor of my swallowing exercises. Her being in the caregiver role was bad enough, I didn't want her to be my monitor too. I had a routine during radiation. Every day, I'd take a walk between Main and Kirby with my dog. I would do my exercises during the walk. Or if I was feeling sick and Linda was walking the dog, I would do the exercises in the hotel room while she was out. I just didn't want to do them in front of anyone.

I can eat pretty much anything and everything now, although I no longer love spicy foods. I can spit and swallow. It took awhile to come back. At first my recovery was rapid, then it kind of slowed to this gradual pace. Linda and I had to come to terms with uncertainty. Once you realize you don't have control, knowing this won't alleviate your pain, but at least you'll have knowledge that you can deal with whatever comes your way." •

Index of Topics with Week Numbers

A letter to head and neck patients (week 1)

Altered Taste/Dysgeusia
- Strategies to help you (week 3)

A note to caregivers (weeks 7 and 9)

Bowel management
- Do not take Metamucil or Citrucel! (week 3)
- What to do if you're constipated (weeks 3, 4, and 7)
- Summary of constipation management (week 7)

Caring for your skin
- Sunscreen products (weeks 1 and 2)

Checking for trismus (weeks 1, 2, 3, 4, 5, 6, 7, 8, 9, and 10)

Constipation management (week 8)

Communication at home (week 2)

Congratulations! (week 6)

Create Eat/ Don't Eat Lists (week 3)

Dealing with fatigue and nausea (week 7)

Dehydration (weeks 1, 2, 3, 4, 5, 6, 7, 8, 9, and 10)

Dental care
- Strategies for dental care (week 2)

Doubt (week 6)

Fatigue (weeks 5, 6, 8, and 9)

Feeding tube
- Help (week 1)
- Introduction (week 1)

Feeding tube weaning (week 8)

Fighting with your caregiver (week 2)

General advice from patients (week 3)

How to throw up through your feeding tube (week 5)

Hydration (week 1)

Importance of hydration (week 1)

Improving your oral intake (week 3)
- Foods you may enjoy
- Products to increase calorie intake

Information for caregivers (week 5)

Instructional videos for swallowing and trismus exercises (week 1)

Keep swallowing by mouth (week 4)

Low acid diet (week 1)

Making a commitment to do your swallowing and trismus exercises (week 1)

Managing your energy (week 1)

Mini-relaxation exercise for both patients and caregivers (week 5)

Mucositis (week 9)

Nausea
- Commonly prescribed anti-nausea medications (weeks 3 and 5)
- General information about nausea (week 9)
- Thick saliva can cause nausea (week 5)
- Try to determine what is causing nausea (weeks 3 and 5)

Nutrition (week 1)

Pain/dryness in radiated skin
- Products for dry and radiated skin (week 3 and 7)
- Should I use cream on my neck before radiation? (week 3)

Pain (week 5)

Pain and medicine side effects (week 8)

Pain from radiation burn (week 9)

Pain management (week 3)

Patient Stories
- Difficult journey ahead (week 6)
- Difficulty swallowing due to pain and mucus (week 9)
- Frank's story (week 7)
- Gary's story (week 6)
- Jake's story (week 9)
- John's story (week 3)
- Katy's story (week 4)
- Macho story (week 9)
- Maria's story (week 5)
- Michael's story (week 1)
- Steve's story (week 2)
- Trismus (week 1)
- Unexpected battle (week 7)
- Wearing the mask (week 1)
- You Can't Look Back, You Can't Change What's Been (week 8 and week 10)

Patient Quotes/Tips
- Advice to caregivers (week 8)

Index of Topics with Week Numbers

- Attitude (week 8)
- Exercises (week 1)
- Fatigue (week 8)
- Food (week 4)
- General tips (weeks 2, 4, 6, 7, and 9)
- Mouth care (week 3)
- Mucositis (week 3)
- Mucus (week 3)
- Nausea (week 8)
- Pain (week 8)
- Skin care (week 3)

Preventing constipation
- Do not take Metamucil or Citrucel! (week 2)
- Managing constipation (week 2)
- Medications that cause constipation (weeks 2 and 4)
- Products to combat constipation (weeks 2, 4, and 7)
- Strategies to combat constipation (weeks, 2 and 4)

Program Wrap-Up: Managing your health
- Congratulations to caregivers! (week 10)
- Congratulations to patients! (week 10)

Pureed diet
- Foods to avoid on a pureed diet (week 4)
- How to make pureed food (week 4)

Recipes
- All recipes (week 4)

Reminder: 6-Month follow up (week 9)

Resources (week 4)

Setting goals for yourself (week 6)

Soft diet (week 4)
- Foods to avoid on a soft diet (week 4)

Some reminders as you recover at home (week 7)

Stress relief for patients and caregivers
- A note to caregivers (week 8)
- Breathing Awareness (weeks 2 and 8)
- Diaphragmatic Breathing (weeks 2 and 8)
- Guided Imagery (weeks 2 and 8)
- Progressive Muscle Relaxation (weeks 2 and 8)
- Rules for Effective Imagery (weeks 2 and 8)

Swallowing exercises (week 1 and swallowing and trismus exercises PDF)

Taking care of your skin during treatment (week 2)

Taking medications through a feeding tube (week 5)
- Taking liquid medication through a feeding tube (week 5)
- Taking pills through a feeding tube (week 5)

Tell us what you ate (weeks 7 and 9)

The importance of swallowing exercises (weeks 1 and 2)

The importance of trismus exercises (weeks 1 and 2)

Thick saliva and dry mouth (week 2)
- Strategies to fight thick saliva

Thrush (Candida) vs. Mucositis (weeks 3 and 5)

Tips and products for mucositis
- Explanation of mucositis (week 3)
- Products for mucositis (weeks 3 and 7)
- Strategies to combat mucositis (week 3 and 7)

Tips and products for thrush
- Explanation of thrush (week 3)
- Medications to treat thrush (week 3)
- Strategies to combat thrush (week 3)

Tips for dry mouth
- Explanation of dry mouth (week 3)
- Products for dry mouth (weeks 3 and 7)
- Strategies to combat dry mouth (week 3)
- Tips for dry mouth (week 9)

Tips for improving oral intake (week 4)

Track your fluid intake (weeks 1, 2, 3, 4, 5, 6, 7, 8, 9, 10)

Track your weight (week 3)

Trismus exercise (week 1 and swallowing and trismus exercises PDF)

Unrealistic expectations (week 6)

Quote from a former patient (week 10)

What do I do now? (weeks 1, 2, 3, 4, 5, 6, 7, 8, 9, and 10)

When is my taste coming back? (week 9)

You can do it! (week 1)

Your progress (week 9)
- Don't stop your exercises now!