



Mouth and Skin Care



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

TOPICS

Welcome to Week 3

Click the yellow “Next” button [NEXT ►](#) above if you want to go through the entire Week 3 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.

[Pain/Dryness in Radiated Skin](#)[Improving Your Oral Intake](#)[Nausea](#)[Thrush, Mucositis and Dry Mouth](#)[Track Your Weight](#)[Altered Taste \(Dysgeusia\)](#)[Bowel Management](#)[Pain Management](#)[Patient Stories and Tips to Encourage You](#)



Pain/Dryness in Radiated Skin

[Click here to learn useful information about pain/dryness in radiated skin.](#)

PAIN/DRYNESS IN RADIATED SKIN

Pain/Dryness in Radiated Skin

Be sure to take care of your skin. Keep the area that's being irradiated clean by softly splashing lukewarm water on it and letting it air dry.

Drink or intake 1 gallon (16 cups) of water or fluids, spaced throughout the day. This will help prevent radiation sunburn.

Regularly apply a moisturizer, such as Aquaphor, alcohol-free Aloe Vera gel, or Aveeno Skin Relief Hand Cream: Intense Moisture (Blue and Maroon Label). Some patients prefer to mix Aquaphor with Aveeno or another lotion, to decrease the thickness of the Aquaphor.

Note: Aquaphor may stain your clothes, so we recommend wearing old and/or collarless shirts.



You may experience pain in the radiated skin, which often feels like a bad sunburn. Let your doctor know if you would like help with this. You may also look into some of the products listed in the chart below, and at the end of this newsletter. These products have been recommended by former patients.

PAIN/DRYNESS IN RADIATED SKIN

Dry and Radiated Skin: Products

Aquaphor

What it is: This is an ointment that helps to heal dry, cracked skin.

Where to buy: CVS, Walgreens, other drug stores



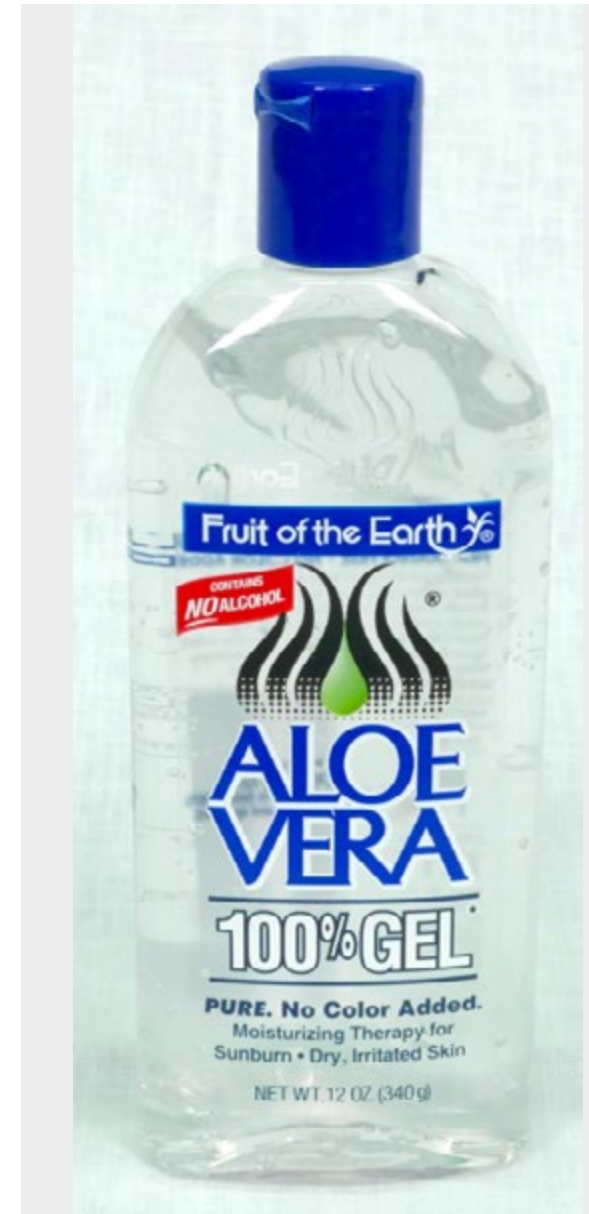
PAIN/DRYNESS IN RADIATED SKIN

Dry and Radiated Skin: Products

100% Aloe Vera Gel

What it is: This is a cooling and soothing gel that helps retain moisture and promote healing

Where to buy: [amazon.com](https://www.amazon.com)



PAIN/DRYNESS IN RADIATED SKIN

Dry and Radiated Skin: Products

Aveeno Moisture Repair Cream (Maroon Label)

What it is: This is a lotion that helps restore and maintain moisture barrier of extra-dry skin.

Where to buy: CVS, Walgreens, other drug stores



PAIN/DRYNESS IN RADIATED SKIN

Dry and Radiated Skin: Products

Elta Crème

What it is: This is a lotion that can be used on its own or mixed with Aquaphor for long-term moisture.

Where to buy: eltastore.com, amazon.com



PAIN/DRYNESS IN RADIATED SKIN

Dry and Radiated Skin: Products

Lindi Lotion

What it is: This is a moisturizing cream, NOT to be used for broken skin.

Where to buy: lindiskin.com, amazon.com



PAIN/DRYNESS IN RADIATED SKIN

Dry and Radiated Skin: Products

Emu Oil

What it is: This is an oil from the emu that helps moisturize skin.

Where to buy: Natural food stores, Walgreens, Walmart, or online at amazon.com



PAIN/DRYNESS IN RADIATED SKIN

Should I use cream on my neck before radiation?

You can and should apply cream to your neck continually throughout the day, **except for the four- hour period before your radiation treatment.**

Studies have shown that the cream would need to be a quarter of an inch thick to affect the beam's scatter.

The beam would still be effective in reaching your tumor, but the surrounding skin would get more radiation.

Do not use creams with zinc oxide as this may inadvertently lead to more irritation on your skin.



Thrush (Candida), Mucositis and Dry Mouth

[Click here to learn more about Thrush/Candida and Mucositis.](#)

THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Thrush (Candida) vs Mucositis



	Thrush (Candida)	Mucositis
What it is	Fungal or yeast infection	Inflammation
What causes it	Increased acidity in the mouth promotes the environment for infection	Radiation damages the lining of the mouth
Similarities	Can be painful	Can be extremely painful
Treatments	Nystatin rinse or clotrimazole lozenges for 10 days More aggressive infections are treated with fluconazole pills.	Symptom control, including prescription and over the counter rinses and prescription pain medication

THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Mild Mucositis

Mucositis is a term for the inflammation of the mucus-membranes in your mouth, usually caused by radiation therapy in head and neck cancer patients. They appear as red or white burn-like sores in your mouth and usually last anywhere from 6-8 weeks.

Signs of mild mucositis:

- Red, shiny or swollen mouth and gums
- Light, translucent coating over the gums
- Soreness or pain in the mouth and throat
- Feeling of dryness, mild burning, or pain when eating

It is imperative to keep up your current oral care routine to help prevent infection and from furthering the mucositis. These products have assisted patients in the past, so please take a look.

These are general guidelines and tips; always follow your doctor's orders.



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Mucositis: Strategy

Bicarbonate Oral Rinse

What it is: A mild alkaline solution that helps keep the mouth clean.

Instructions: Mix 1 teaspoon baking soda and 1 teaspoon salt into 4 cups water at room temperature in a bottle. Can be made daily, should be discarded after 24 hours. Swish in mouth and spit, 4x per day or as needed.

Where to buy: Baking soda, salt, and water can be found at any grocery store.



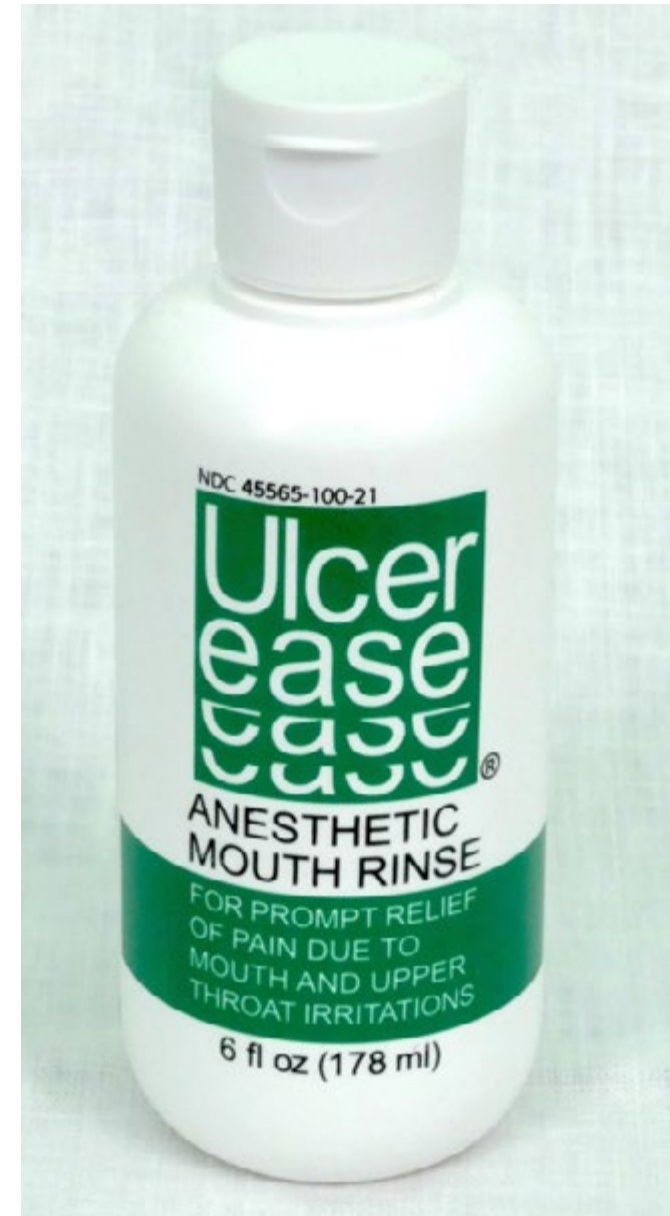
THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Mucositis: Products

Ulcer Ease Anesthetic Mouth Rinse

What it is: A short-acting swish-and-spit rinse that helps numb pain.

Where to buy: [amazon.com](https://www.amazon.com), [crownlaboratoriesstore.com](https://www.crownlaboratoriesstore.com)



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Mucositis: Products

Xyloxylin or “Magic Mouthwash”

What it is: A short acting swish-and-swallow rinse to help numb throat pain.

Where to buy: Ask your doctor about a prescription. Fill the prescription at a pharmacy which can make compounds.



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Mild Thrush (Candida)

What it is: Candida, also known as Thrush, is a mouth infection.

When it happens: It usually becomes a problem by the end of the 3rd week of treatment and could continue to be an issue for life.

Tip: “Eating yogurt with live cultures will discourage yeast growth.” – Katrina Jensen, Director, Medical Speech Pathology at Texas Health Care



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Thrush (Candida): Medications

Nystatin

Dose/schedule: 10 cc swish and swallow 5 times daily for 14 days (prescription only).

Where to buy: Ask your doctor about a prescription.



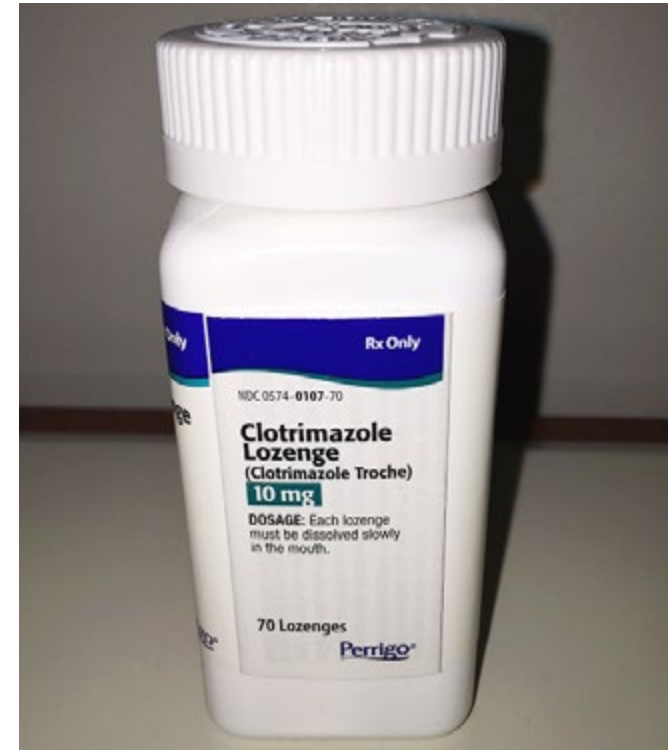
THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Thrush (Candida): Medications

Clotrimazole

Dose/schedule: 10 mg troches 5 times daily for 14 days.

Where to buy: Ask your doctor about a prescription.



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Thrush (Candida): Medications

Fluconazole or Diflucan

Dose/schedule: Two 100 mg tablets on the first day, another tablet for the next 13 days. (This is only an example; Your doctor may prescribe a different dose or schedule, so follow his or her instructions).

Where to buy: Ask your doctor about a prescription.



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Thrush (Candida): Strategy

Baking Soda

Description: Radiation changes your saliva and as a result your mouth is more prone to infections. Baking soda rinses are mildly alkaline and the alkalinity helps to counter the acidity created by radiation. The rinse helps keep your mouth clean and lowers the likelihood help restore the pH balance” in the mouth, which helps to keep the mouth healthy throughout a treatment.

Dose/schedule: Rinse 5x daily to prevent infection by keeping the oral cavity’s pH alkaline.

Where to buy: Baking soda, salt, and water can be found at any grocery store.



THRUSH (CANDIDA), MUCOSITIS 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.

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

Visual Art: © 2016 The University of Texas
MD Anderson Cancer Center

Saliva Glands

Radiation Field

Encompasses
Swallowing and
Jaw Muscles

THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Products

Biotene Products

What it is: Biotene Products – Toothpastes, mouthwashes, gum, ORAL Balance gel/liquid for treating dry mouth.

Where to buy: Walgreens, CVS, other drugstores



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Products

Xylimelts

What it is: Adhering discs that help with dry mouth. It can be used overnight.

Where to buy: Walgreens, CVS, other drugstores



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Products

MedActive Oral Relief Spray

What it is: A spray for dry mouth.

Where to buy: Walgreens, CVS, other drugstores



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Products

Stoppers 4 Dry Mouth

What it is: A spray for dry mouth.

Where to buy: walmart.com



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Products

Humidifier

What it does: It increases moisture in your room. Patients like to use this at night to reduce the frequency of waking up with dry mouth.

Where to buy: CVS, Walgreens, other pharmacies.



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Strategy

Acupuncture

What it does: Can help saliva production for some patients.

Where to buy: Ask Katrina Jensen at THC for recommendations.



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Products

Sugar Free Gum with Xylitol

What it is: Chewing gum increases the flow of saliva. Xylitol is a natural sweetener that reduces levels of decay-causing bacteria in saliva. Do not use gum with mint (it may be too strong for irritated linings of the mouth).

Where to buy: Walmart, Walgreens, CVS, gas stations, etc.



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Products

Cevimeline HCL or Pilocarpine HCL

What it does: This is a tablet for dry mouth.

Where to buy: Ask your doctor about a prescription.



THRUSH (CANDIDA), MUCOSITIS AND DRY MOUTH

Dry Mouth: Products

Water Bottle

What it does: Many patients find it useful to keep a water bottle with them as often as possible. You may even want to purchase a clip to attach the water bottle to your belt, so you can always have a quick drink handy.

Where to buy: Clips like this are available at the Container Store or a camping supply store.



Bowel Management

[Click here for more information about bowel management.](#)

BOWEL MANAGEMENT

Introduction

Patients are provided with brochures and packets of information by their healthcare team. Please keep in mind that every patient is different.

If untreated, constipation can lead to other serious problems, such as severe dehydration or perforation, which will require hospitalization and could even cause death.

Some patients require enemas as part of their bowel regimen during cancer treatment. While the idea of an enema may be unpleasant for some people, the risks of untreated constipation are much greater.

If you are constipated, do not take Metamucil or Citrucel, as these can block your gut.

It is important to consult with your nutritionist on the amount of fluids you should consume. This varies from person to person.

You can safely take up to 8 Senna tablets a day. If that doesn't work, call your doctor or nurse.



BOWEL MANAGEMENT

Constipation Management: What To Do If You're Constipated

If you do not have a bowel movement by 4 pm 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



Improving Your Oral Intake

[Click here to learn tips for improving your oral intake.](#)

IMPROVING YOUR ORAL INTAKE

Tips for Improving Oral Intake

Make sure the fluids you drink are nutritious such as juices, milk, or milkshakes.

Eat your main meal at the time when you feel the best during the day.

An eating schedule may be necessary to remind you to eat.

Eat moist foods for dry mouth.



IMPROVING YOUR ORAL INTAKE

Tips for Improving Oral Intake

Add Extra Calories for Energy

Spread plenty of butter/margarine on toast, muffins, rolls, potatoes, and rice.

Add peanut butter, jam, or honey to bread.

Pour sauces or gravies over potatoes, meat, and vegetables.

Add sour cream or mayonnaise to vegetables, salads, and sandwiches.

Scoop ice cream on to desserts or into beverages.

Drink milkshakes or hot chocolate made with whole milk.

Add cream to cereals, hot beverages and fresh fruit.

Top desserts or fruit with whipped cream or yogurt.

Add Benacalorie to your gravies, soups, and smoothies.



IMPROVING YOUR ORAL INTAKE

Increasing Calorie Intake: Products

Benecalorie

Description: This is another easy way to add good nutrition and calories to your diet. It is an unflavored supplement that mixes well with shakes and smoothies, or can be spooned over food as a gravy. Each scoop has 330 calories and 7 grams of protein.

Where to buy: [amazon.com](https://www.amazon.com), [walmart.com](https://www.walmart.com)



Track Your Weight

[Click here for more information about tracking your weight.](#)

TRACK YOUR WEIGHT

Track Your Weight

Weight loss is a common problem for cancer patients. Record your weight on a piece of paper.

Be sure to use the same scale every time.

What is your weight in pounds (lbs)?



TRACK YOUR WEIGHT

Tracking Your Weight

Are you losing weight?

If you have lost more than 1 pound of weight per week or have moved to 100% tube feedings, please call the clinic.

**CLINIC
(817) 920-0484**



Pain Management

[Click here to learn more about managing your pain.](#)

PAIN MANAGEMENT

Pain Management

Watch this video of Katrina Jensen, Director, Medical Speech Pathology at Texas Health Care as she talks about the importance of managing your pain.





Nausea

[Click here to learn more about managing your nausea.](#)

NAUSEA

Nausea

Your nausea may become especially bad during the next couple of weeks. Be sure to drink plenty of fluids, including broth, fruit juice and sports drinks to replace important salts that you may lose when you're sick.

If you have trouble keeping medication down, try crushing it up and mixing it with apple sauce, jelly or custard when you take it. (Be sure to check with your doctor, nurse or pharmacist regarding which medications should not be crushed.)

Avoid using caffeine, alcohol and tobacco.



NAUSEA

Try to Determine What is Causing Your Nausea

For example, does it tend to start late in the afternoon? If so, you might be fatigued and need a nap.

Does the nausea happen after a meal?

Try eating smaller meals instead, with a few minutes between each bite or sip.

Does the nausea occur only during the first five days or so after a chemotherapy treatment? If so, it is likely that the nausea is caused by your chemotherapy; in this case anti-nausea medications can be effective.

Dehydration is a major cause of nausea and vomiting in patients getting radiation and or chemotherapy. Only hydration can remedy this, so remember to push fluids.



NAUSEA

Thick Saliva Can Cause Nausea

Thick saliva that is constantly in the throat can cause nausea.

Try gargling with salt water or water with baking soda to relieve the nausea.

Some patients swear by gargling flat ginger ale (carbonated drinks are likely to irritate your throat).



NAUSEA

Commonly Prescribed Anti-Nausea Medications

Note: The following list is meant to provide general information about the different types of drugs used to treat nausea. Remember, your doctor knows which medicine will work best for you and therefore you should follow his or her directions at all times. If you are unsure what to do, ask your doctor for clarification.

Remember, dehydration is a major cause of nausea and vomiting in patients getting radiation and or chemotherapy. Only hydration can remedy this; medications can not. Make sure to alert your health care team if in addition to nausea and vomiting you get light headed (especially when standing), and/or your urine is less frequent and or dark.

Name of Prescription Medication	Notes
Compazine (prochlorperazine)	This is a common general anti-nausea medicine. It is given in pill or suppository form.
Phenergan (promethazine)	This is a very common medicine for allergies and cough, but also is effective for nausea, and is in the same family as Compazine. It can cause drowsiness, but does come in a liquid.
Zofran (ondansetron)	This is a very common medicine for chemotherapy induced nausea, and is also used for radiation or chemoradiation related nausea. It can be prescribed as a pill, or as a dissolvable pill that you place under your tongue, or intravenously. One of the main side effects is constipation.
Reglan (metoclopramide)	This is a medicine used for refractory heartburn. However, it also helps to empty the stomach faster, and some patients who get chemotherapy and/or radiation can have slow emptying of the stomach that causes nausea, bloating and vomiting. It is used sometimes in patients with feeding tubes who feel they get full too fast or vomit when they insert the liquid nutrition into their stomachs.
Other drugs	There are several other drugs your doctor may try if the more common medicines do not work. These include but are not limited to Emend (aprepitant), Marinol (dronabinol), and a combination of lorazepam, diphenhydramine and haloperidol (a Compounded medication that comes in pill, suppository or gel). Often patients who get chemotherapy will get steroids with the chemotherapy to help with nausea, but most doctors prefer not to use this as a longer-term solution.

Altered Taste (Dysgeusia)

[Click here to learn more about dealing with altered taste.](#)

ALTERED TASTE (DYSGEUSIA)

Altered Taste (Dysgeusia)

Watch this video of Katrina Jensen, Director, Medical Speech Pathology at Texas Health Care as she talks about how your radiation affects your relationship with food.





ALTERED TASTE (DYSGEUSIA)

Try a Different Temperature

Room temperature or even slightly chilled foods may taste better than hot foods, especially during radiation treatment.



ALTERED TASTE (DYSGEUSIA)

To Avoid Metallic Taste

Use Plastic Utensils

Cook foods in oven safe glass with plastic or wooden utensils.

Store food in plastic or glass, cover with plastic or wax paper.



ALTERED TASTE (DYSGEUSIA)

Try This Before Eating

Rinse your mouth with salted water to clear your taste buds.

Suck on hard candy.



ALTERED TASTE (DYSGEUSIA)

Some Types of Food Are More Likely to Taste Okay

Substitute eggs for fish or meat.

Vegetables usually taste good. **Avoid** tomatoes.

Pasta is sometimes well-tolerated.



ALTERED TASTE (DYSGEUSIA)

Create Your Own Eat/ Don't Eat Lists

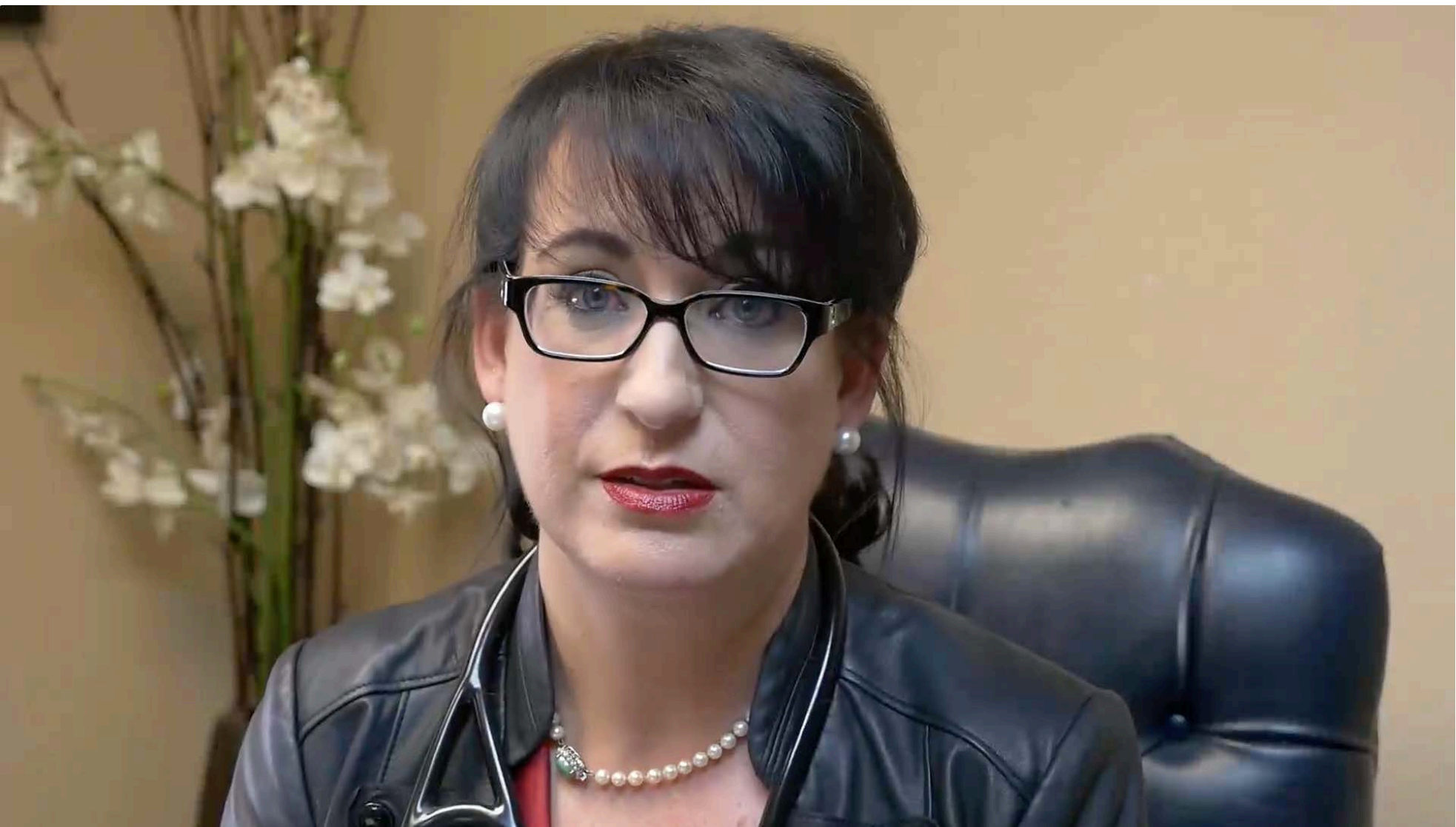
Eat/Don't Eat lists help you find something to eat when nothing seems appealing.

Try a variety of foods.

If something tastes bad, put it on the “Don't Eat” list, and don't try it again until your sense of taste returns.

If something tastes OK, put it on the “Eat” List.





DEALING WITH NAUSEA

Create Your Own Eat/ Do Not Eat Lists

Patients/Caregivers: As you experiment with different foods, create your own “Eat/Do Not Eat” list.

Foods that are OK to eat	Do not eat
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

WHAT DO I DO NOW?

What do I do now?

Continue your swallowing and trismus exercises.

Continue swallowing by mouth as much as possible.

Keep trying new recipes. Experiment with different consistencies of food to see which kinds you can swallow.

You need at least 1 gallon (16 cups) of water/ fluid every day to avoid dehydration and possible hospitalization.

Don't suffer in silence! Talk to your doctor about your pain.

Try to find a good spray or rinse for dry mouth.

Wash your neck with plain water or with Cetaphil.

You can and should apply cream to your neck continually throughout the day except for the 4 hour period before your radiation treatment.

Use sunscreen every day to protect your skin.

If you are on pain medicine, keep track of your senna schedule and bowel movements.

If one medication doesn't work, try something else.



Patient Stories and Tips to Encourage You

[Click here to read stories and tips from other patients.](#)

John's Story

"I took this disease seriously. I didn't do my exercises just 1 or 2 times a day. I did them 5, 6, 8 times a day. Every day. It was hard. Sometimes my wife would have to ask me if I did them. But I did them on my way to radiation and back, while I was watching TV.

I was on a feeding tube, but I would still drink my cans of vanilla Boost every day. I also set goals for eating. When I was doing doubles during my last week of radiation, I told myself I would eat pecan pie. I did eat that slice of pecan pie, even though it tasted like the leaves you rake up in your yard. Talk about a letdown! But I never gave up trying to eat different things. I never wanted to give up on anything, because if you give up on one thing, then you're going to give up on the next thing and the next thing.

I can eat everything now. I have a friend at work who had the same cancer and radiation as I did. It is now 3 years since he finished treatment, and he is still, to this day, having problems swallowing and eating some things. He did not do his exercises as much as he should have. You have to be really honest with yourself. If you are telling yourself that you are swallowing just fine, ask yourself if you are swallowing enough calories every day to keep your strength up.

The way I looked at it was, you can either pay now or pay later. Do your swallowing exercises; it's a way to have normalcy after this is all over. This is reality, and you have to face it."



PATIENT STORIES AND TIPS TO ENCOURAGE YOU

Patient Quotes

Tips on Skin Care

“Use the Aveeno lotion, regular, maroon-brown label. Start early putting the lotion on the back of the neck where the hairline is.”

“Aquaphor keeps your neck skin from bleeding, and the Alcohol-free aloe vera gel also works very well.”

“For my neck: Vaseline was ultra-healing. I also used Cetaphil lotion, fragrance free.”

“Clean the area around the feeding tube with a Q-tip. Wet the skin with Aquaphor or other lotion.”

“Don’t put anything on your neck starting 4 hours before radiation.”

“Use 100% Aloe Vera as long as it doesn’t have alcohol.”

Former Patients



PATIENT STORIES AND TIPS TO ENCOURAGE YOU

Patient Quotes

Tips on Skin Care

“Along with these treatments you need to be prepared for blistering.”

“Not everyone blisters, but I unfortunately blistered very badly. I was given creams to put on for my radiation burn which helped immensely. I would take warm showers in the morning and put warm washcloths on my neck to ease the oozing from the blistering, but trust me you will get through this.”

Former Patient



PATIENT STORIES AND TIPS TO ENCOURAGE YOU

Patient Quotes

Tips on Mucositis

“Carbonated drinks are not good for mucositis.”

“Gargle with baking soda and water.”

“I switched from water to cold brewed ice tea.
It has a lot less caffeine than regular tea.
Better than mouth rinse.”

Former Patients



PATIENT STORIES AND TIPS TO ENCOURAGE YOU

Patient Quotes

Tips on Mouth Care

“At night, I used a cold water humidifier and put it next to my bed. I got fresh, cool, moist, air which helped me sleep better at night since my mouth did not feel so dry. This can be used any time you need more humidity.”

“Too much saliva-Robitussin DM helps to break up the thick mucus.”

“Paint the fluoride on with a tooth brush.”

“Use Biotene Original, not mint toothpaste.”

Former Patients



PATIENT STORIES AND TIPS TO ENCOURAGE YOU

Patient Quotes

Tips on Mucus

“Another challenge I faced going through radiation was difficulty swallowing because of pain and also because of mucus. I couldn’t believe that my body could produce that much mucus. It really was a challenge to clear it out so that I could swallow food. I would swallow so much mucus that I got nauseated and there’s just nothing worse than throwing up. Everything I did was to try and keep from having to throw up.”

“Break up the mucus by gargling flat diet ginger ale.”

“Gargle with warm salt water, or water mixed with baking soda.”

Former Patients



PATIENT STORIES AND TIPS TO ENCOURAGE YOU

Patient Quotes

General Advice

“My wife and I have fun goals. We keep a bell in our hotel room and ring it every day I get home from a treatment. We want to buy a ‘69 Impala after radiation is over and fix it up. We keep a picture of the Impala in our hotel room too.”

“Keep trying to find new things you can try.”

“Don’t be self-conscious.”

“The pain patch—they’re good for three days and that made life a lot better.”

Former Patients



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

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!