After Pancreatic Surgery

Caring for Yourself at Home

Activity

You will likely feel very tired after surgery. Your body needs extra energy as it recovers. Be sure to get plenty of rest. After a few weeks, you can return to most normal activities. Remember:

- Don't drive if you are taking pain medicine.
- Don't lift more than 10 pounds (4.5 kilos) for six weeks after surgery.
- Try to change position every 1 to 2 hours.
- Be as active as you can. Work up to walking 20 minutes a day 3 to 5 times a week.
- Most people go back to work 4 to 6 weeks after surgery. You may return sooner if you feel strong enough and have a signed note from your doctor. But take it easy—no heavy lifting, contact sports or other strenuous activity.

Drain care

You might go home with one or more drains in place. Before you leave the hospital, your nurse will tell you how to take care of these drains.

- Keep your drains clean and dry. Be sure you know how to empty them.
- If you have a drain that needs to be emptied, write down how much fluid comes out each day, what color it is and what it looks like.
- If your drain gets loose or comes out, don't panic. Cover the drain site with a dry bandage. Then, call our clinic.

If you are deaf or hard of hearing, please let us know. We provide many free services including sign language interpreters, oral interpreters, TTYs, telephone amplifiers, note takers and written materials.
Diet and nutrition

Your care team will tell you what kind of food you should eat at home. Follow this diet as closely as you can. This might be hard to do, because you may not be very hungry when you first get home.

- Try to eat 5 or 6 small meals a day.
- Eat high-protein foods with lots of calories. High-protein foods include:
  - Meats: chicken, turkey, tuna, pork, fish
  - Milk products: cheese (for example, cottage cheese, ricotta, American, cheddar, mozzarella), milk, yogurt, pudding
  - Some vegetarian foods: eggs, tofu, soymilk, lentils, kidney beans, black beans, baked or refried beans, garden burgers
  - Nutrition drinks: Carnation Instant Breakfast, Boost or Ensure

You will meet with a dietitian in the hospital. You can also talk to a dietitian during your follow-up visit at the clinic. If you need more details about what to eat, please ask us.

Follow-up care

We will tell you when to come back to the clinic. During that visit:

- We may take out your stitches or staples.
- We will ask you how things are going at home.
- If you have a drain tube or feeding tube, we will discuss when it will be taken out.
- We will let you know the next steps in your follow-up plan. We will also discuss any further tests you might need.
- We will refer you to a medical oncologist (doctor who treats cancer with chemotherapy), if you don’t have one already.

When to call your care team

Please call us if you notice any of these symptoms.

- A fever above 100 °F (37.7 °C), taken by mouth.
- Your surgery or drain site is red, warm or leaks fluid.
- You cannot control your pain with pain medicine, or you suddenly have a lot more pain.
- You have nausea (feel sick to your stomach) or vomiting (throw up).
Managing symptoms

You may have a number of symptoms after surgery. We have listed the most common symptoms below.

If you have any other symptoms—or any questions—please talk to your care team.

*Loss of appetite*

You may not be hungry, and you might lose weight before and during your treatment. Here are some tips that may help.

- Try to eat 5 or 6 small meals a day. You will feel better if you eat foods with a lot of protein. (Avoid fatty foods like chips and fried foods.)
- Try to eat your biggest meal when you are the most hungry.
- Chew your food slowly.
- Eat fresh foods instead of processed foods (like frozen dinners).
- Drink 6 to 8 cups of clear liquids during the day. Clear liquids include water, sports drinks, clear soda pop, coffee and tea (no milk), soup broth, and fruit juice without pulp.
- Drink liquids 30 to 60 minutes before you eat, so you won’t feel so full.
- To help you feel hungrier, try some light exercise before you eat, like taking a walk.
- Try over-the-counter drinks like Boost, Ensure or Carnation Instant Breakfast.
- Ask your doctor about enzyme pills to aid digestion.
- If you have nausea (feel sick to your stomach), ask your care team about medicine that can help.

*Pain*

Many people with cancer have pain, but pain can be treated. Treatment will help your quality of life and make it easier to cope with your cancer. Pain treatment may include:

- Prescribed pain medicine
- Pain patches
- Nerve blocks
- Relaxation methods
- Healthy eating
- Getting enough sleep
- Light exercise.

Many people worry that they might get addicted to pain medicine. Don’t let this stop you from getting help with your pain.

People who are addicted are mentally dependent on medicine. Needing medicine for cancer pain is not the same as being addicted. If you need more medicine over time, it’s because your body has gotten used to the medicine, and you need to take more to get the same relief.

*Pancreatic fistula*

If we removed part of your pancreas, the part that remains may leak fluid. When leaking lasts more than 10 days, it is called a fistula [FIS-tyoo-luh].

Symptoms include increased belly pain or pressure, bloating and increased drainage.

The problem should get better on its own. You will have a drain in place until the fistula heals.
**Infection**

An infection can develop in your incision (surgical wound). It can also develop inside the body, if your remaining pancreas leaks fluid.

Symptoms of infection include:

- Increased warmth, redness or swelling at the incision site
- A bad smell coming from the incision
- Fever, chills or flu-like symptoms.

Treatment may include antibiotics (germ-killing medicine), drain tubes and tube feedings.

**Diabetes**

If you develop diabetes, you may need medicine to control your blood sugar. If so, you will take this for the rest of your life. You will need to work closely with your diabetes care team to manage this illness.

**Digestive problems**

- **Constipation** (hard, dry stools). This is usually a side effect of certain medicines, such as pain medicine. Pain medicine can cause your digestive system to slow down. This makes your stools hard and difficult to pass. Your care team may suggest:
  - Over-the-counter stool softeners
  - Laxatives
  - Fiber supplements
  - Lots of fluids
  - Lots of foods with fiber.

- **Delayed gastric emptying** (the stomach takes longer than normal to digest food). This is the most common problem after Whipple surgery.

- When you eat, you may feel like your stomach is very full, or you may have nausea (feel sick to your stomach). The problem usually gets better over time as your body heals. For some people, it can be a long-term problem.

- We may give you medicine for a short time. We may also suggest a different diet.

- **Pancreatic insufficiency.** This means your pancreas does not produce enough enzymes (chemicals) to break down food. Symptoms can include large amounts of gas, bloating, stomach cramps and loose stools (diarrhea).

  If this happens, your doctor may give you enzyme pills to help you digest food.