

IN EVERY ISSUE

Do Survivors Need a Dietitian?

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Nutrition after cancer becomes part of an emerging survivorship plan.

When Diana Dyer, a three-time cancer survivor and registered dietitian, completed treatment for her first bout with breast cancer in 1985, she asked her oncologist what she could do for herself, asking specifically about diet. “The lack of a clear answer was frustrating and disappointing.”

Interest and research over the next 20 years created a better understanding of the role of nutrition for healthy cancer survivorship, but for many survivors, interpreting the multitude of data published on the subject can be tricky. Registered dietitians can help explain the research, review a survivor’s medical history, communicate with the survivor’s healthcare team and pull all that information together to create short-term and long-term nutrition goals.

What to Expect

One of the responsibilities of a registered dietitian is to develop a nutrition plan that will not only improve cancer-related health, but also other chronic illnesses, such as hypertension and diabetes. “It can be a time to optimize overall health, not just focus on the chance to reduce the risk of recurrence,” Dyer says.

Immediately following treatment, many survivors should focus on short-term goals, such as returning to their normal weight. “This is the time to regain the strength to grocery shop and cook your own meals, not the time to worry about eating nine or more servings of fruits and vegetables a day,” Dyer says. Long-term goals that include weight loss or maintenance, increasing fruits and vegetables and better overall nutrition allow survivors to work on these goals over several months and even years.

Rachel Zinaman, a registered dietitian at the Evelyn Lauder Breast Center at Memorial Sloan-Kettering Cancer Center in New York, says personal interests and where patients are in their survivorship will determine what can be accomplished with a dietitian. She advises patients to make a list of questions before the initial appointment and know what they hope to accomplish by using a dietitian. Patients should also bring their complete medical history and a list of any medications, supplements, vitamins or herbs they take. “If they want a dietitian to help manage drug-nutrient interaction, we can help them with that,” Zinaman says. “We’ll see patients come in with shopping bags of bottles asking us to go through them and tell them what they shouldn’t take.”

How to Find a Dietitian

Although many professionals use the titles interchangeably, not every nutritionist is trained as a registered dietitian. The first place to look for a registered dietitian is at a cancer center. The American Dietetic Association also has a listing of registered dietitians at www.eatright.org.

Finding a dietitian also means paying for his or her services. Medicare only covers nutritional services for renal disease and diabetes, and a legislative bill proposed in 2005 to expand these services to cancer failed to pass. “We believe diseases such as cancer can be related to weight, and a healthy lifestyle can reduce that risk. We want these services to be covered,” Zinaman says. Survivors should ask about insurance and payment issues when finding a dietitian. Though many large cancer centers, such as Sloan-Kettering, include nutritional help in their care, sessions can be expensive if not covered by insurance.

Dietitians can work with patients during one session and answer questions on healthy guidelines and what’s recommended for a certain cancer, though issues such as weight management may require several sessions.

As follow-up care expands to include more holistic elements, such as nutrition, dietitians are taking their place on the survivor’s healthcare team. “A lot of people enjoy the supportive environment and motivational learning dietitians provide,” Zinaman says. “You have a counselor that you work with one on one instead of an annual checkup, and actually form a relationship with your dietitian.”