



Coping Strategies for Gastrointestinal Issues

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Andrew Schorr:

Hello and welcome to Patient Power. I'm Andrew Schorr. Let's face it. Millions of people suffer from GI problems that could come and go: things such as heartburn, stomach pain, gas, constipation. And, of course, for cancer patients, you wonder does it come from medicine, or is it part of recovering from something like a transplant. When do you call the clinic, and what can be done? To hear about the range of issues that can come up and possible solutions, we spoke with Anna Antonowich who's a nurse practitioner at City of Hope.

Anna Antonowich-Jonsson:

Actually, there's a wide variety of them because of various populations, the way people eat. The most common is nausea and vomiting with medications, not tolerating medications, if their counts drop.

So they're getting hydroxyurea (Hydrea), and their counts drop, they might develop mucositis. Mucositis can be skin breakdown anywhere from their mouth down into their gut and all the way through their gut. With that, we can treat it several different ways. The nausea, vomiting we can control with ondansetron hydrochloride (Zofran) and granisetron (Kytril). There are a lot of antiemetics.

The things we stress with patients is they need to catch it early. If you start to feel nauseated, take your medicine. A lot of people want to tough it out. Don't tough it out. The sooner you catch it, the sooner it goes away. If you wait until you're salivating, you're going to throw up. There's nothing that can stop that at that point.

We can just make you feel better a little bit later once it's all calmed down. Watching people's diets, making sure that their food is not as spicy, make sure that if they need some kind of a proton pump inhibitor to help with any kind of acid that they're having in their stomach, that might help calm it down.

Making sure that they're eating an appropriate diet. Some people will not eat for hours and hours. And some people just need to eat more often. They need to eat small meals more often so that they don't build that up and, also, to not lay down right after they eat.

Andrew:

Anna, I know many of people don't think of fatigue as being part of GI issues, but I understand you can become really fatigued when your GI system is sort of working overtime. So help us understand that related to blood cancers.

Anna Antonowich-Jonsson:

Well, it's one of the most under-reported and the most, I think we don't document it as well as we should. I know there's a big push now for us to document it much better. We actually have a questionnaire we use here now so we can track people's fatigue better.

What I tell patients is they will, especially the transplant patients, they want to do more. They get out of the hospital, and it's like, oh, I want to do all this. And then they're down for a day and can't understand why they're so fatigued. A lot of it's just moderation.

They need to learn what level they can function at, making sure they eat, making sure they sleep, making sure they don't sleep too much during the day, so they have a good night's sleep.

If they're not able to sleep because of steroids, which a lot of them are taking steroids, in general depending on what disease they have, making sure that maybe they get something to help them sleep at night just so they get a little bit of sleep, making sure that they exercise a little bit.

Sometimes not exercising and laying around makes you more fatigued. If you can just walk to the post office or walk down the block. And the next day, walk one step further. If you could just do those little few things, sometimes the fatigue isn't as bad.

Not drinking enough fluids is key. If you're dehydrated, you will become more fatigued. You tend to not drink as much fluid making you more fatigued. It's like a vicious cycle. So we recommend two to three liters of fluid a day.

Andrew Schorr:

That's some great information from nurse practitioner Anna Antonowich, from City of Hope. Thank you for being with us. Remember to be signed for alerts on our website so we can let you know whenever we post something new. I'm Andrew Schorr. Remember, knowledge can be the best medicine of all.

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