



Nutrition for children with cancer

A guide for families during treatment



7

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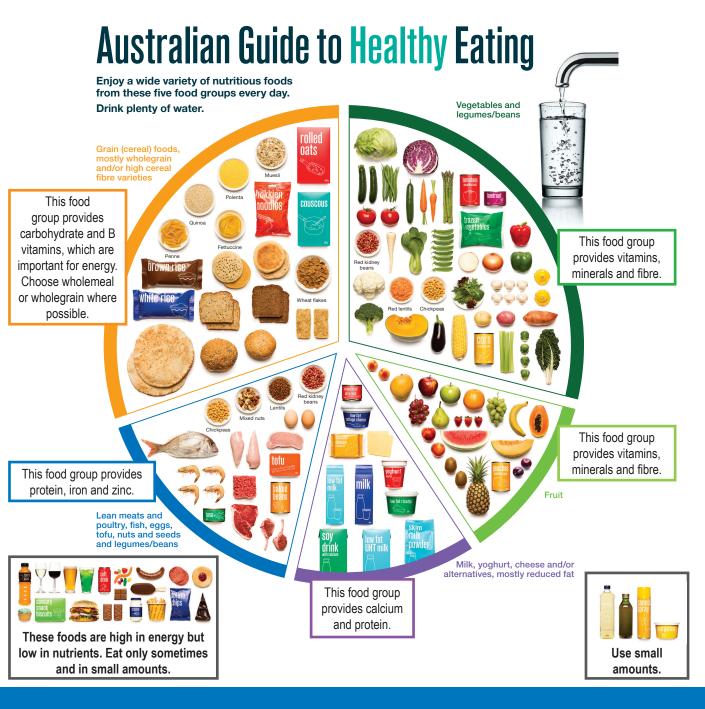
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Eating well during cancer treatment

Parents and caregivers often wonder about the best diet for their child with cancer. Good nutrition is important during cancer treatment. It can help your child:

- Cope better with cancer treatment
- Feel better and have more energy to play and learn
- Fight infections and recover faster
- Keep them growing during their treatment

The best diet for your child is one that includes a variety of food from all the food groups. Each food group provides different nutrients for your child.





Vegetarian and vegan eating

Some families choose to follow a vegetarian diet. It is extra important that your vegetarian child eats a variety of legumes, tofu, nuts, seeds and grain-based foods. This will make sure your child gets the same nutrients and protein that meat, chicken and fish would usually provide. Eggs and dairy foods will provide extra nutrients and are a valuable source of protein.

Some families choose to follow a vegan diet. It can be challenging to meet your child's nutrition needs during their cancer treatment on a vegan diet. Their diet will need to be carefully planned, and your team can support you with this. Discuss this with your child's treating Oncologist.

Alternative diets and supplements

Many different diets and dietary supplements are promoted as a treatment for cancer. Unfortunately, there is no diet that will 'cure' cancer.

Diets that cut out whole food groups without providing an alternative may increase the risk of weight loss and vitamin or mineral deficiencies. Studies show the best nutrition during cancer treatment is from a diet that includes a variety of food from all food groups. This will make sure your child gets enough energy (kilojoules or calories), protein, vitamins and minerals.

Many supplements and herbal products may interfere with your child cancer treatments, and some may even be dangerous. It is essential to discuss any changes to diet or plans to take any type of supplement with your child's treating Oncologist.

Eating during treatment

Most children will have a poor appetite and eat less at some stage during their treatment. While this can be stressful for families, it is a normal part of their treatment journey. It is important to remember it is only temporary, and they will start eating more once they are feeling better. Talk to your doctor if you are worried about your child's eating.

While we recommend giving your child a balanced diet during their treatment, there will be times when they don't want to or can't eat certain foods. They might be feeling sick, lose their appetite, or things don't taste right. Be flexible during these



times. Offer them the food they like or can eat. Once they are feeling better you can go back to offering a variety of food.

Nutrition support during treatment

Sometimes, despite offering your child a variety of nutritious food, they will be unable to eat enough, and may lose weight. If your doctor is concerned, they will ask a dietitian to see your child. The dietitian can provide you with suggestions and advice. They may recommend your child has some high calorie supplement drinks.

Some children will need to get their nutrition through a feeding tube sometime during their treatment. This is a common and temporary part of treatment. It is an important way we make sure your child gets enough nutrition to support them through their treatment and continue growing. Children who have feeding tubes can usually still eat and drink.

Fussy eating

Fussy eating behaviours like food fads, refusing certain foods and playing with food are a normal part of childhood. Disruption to usual routines and hospital food can sometimes make fussy eating behaviours worse.

If your child is in hospital, it is okay to be more flexible with eating. They may be feeling unwell, have less appetite and be undergoing procedures. Treats and flexibility can make this easier.

However, once you are home try to follow a normal family routine where possible:

- Offer regular meals and snacks
- Encourage a variety of food from all food groups
- Make sure they are not filling up on sweet drinks or lots of milk

Gut health

Many families ask about gut health for their child during cancer treatment. While your child is not able to have probiotics or uncooked fermented foods, there are plenty of foods your child can eat for good gut health. A diet that includes vegetables, fruit, wholegrains, legumes and yoghurt will promote good gut health.

Sugar

There is no evidence that sugar makes cancer cells grow faster or causes cancer. All carbohydrates, such as bread, potato, pasta, grains as well as sucrose (table sugar) is broken down into glucose. This is used as an energy source for all cells in the body (both healthy cells and cancer cells). Cutting out carbohydrate from your child's diet could mean they miss out on the energy and vitamins they need. However overeating sugar, especially in processed drinks and food, can mean your child eats less from the five food groups. The Cancer Council recommends eating from the five food groups each day, and limiting food that contains added sugar, such as biscuits, cakes, soft drink and cordial.

More information

For more information on the Australian Dietary Guidelines: https://www.eatforhealth.gov.au/

The Cancer Council's "iHeard" website is a useful resource to answer frequently asked questions about diet and cancer: https://www.cancer.org.au/iheard

For more information on fussy eating and general nutrition topics, go to the 'Everyday Care' section of the PICS website:

https://www.vics.org.au/picsresources



Food safety during cancer treatment

Some cancer treatments, like chemotherapy and radiation, can reduce your child's immune system and make them more likely to get infections. When germs (bacteria, viruses, parasites) contaminate food they may make your child unwell. While your child is having treatment it is important to take extra care when preparing and cooking food for your child. There are also some high risk foods they will need to avoid.

The 4 steps of food safety

1. Clean

Keeping your hands and kitchen clean will reduce spreading germs onto food.

- Wash your hands with soap and dry them before preparing or eating food.
- Wash your hands again if you touch raw meat, poultry, fish or eggs.
- Wash your hands after using the toilet, changing nappies, or touching animals.

- Wash fruit and vegetables thoroughly under running water.
- Never wash meat, poultry, or eggs (the splashing water can spread germs).
- Keep your kitchen equipment and utensils clean and wipe down surfaces often.
- Wash chopping boards, knives, and utensils with warm soapy water between raw and cooked foods.

2. Separate

Keeping food separate stops germs spreading from one food to another.

- Keep raw food (like meat, poultry and seafood) separate from from ready to eat foods. Do this in your supermarket trolley, shopping bags and fridge so meat juices don't drip on food that will not be cooked.
- Keep foods covered in containers in the fridge.
- Use separate chopping boards and knives for raw meats and ready to eat food.

3. Cook

Cooking food properly will kill harmful germs.

- Cook all food until it is steaming hot (you can see steam coming out).
- Food needs to be steaming hot all the way through, not just on the edges. Cut open the food with a knife so you can check it is steaming hot in the middle. If you are cooking a large dish, you may need to check it in a couple of places.
- When using a microwave, stir the food during cooking to help it cook evenly.
- Serve food as close to cooking as possible, but allow steaming hot food to cool down enough so your child doesn't burn their mouth.

4. Chill

Refrigerate foods to slow the growth of germs.

- Keep your fridge below 5°C and your freezer below -20°C.
- Select cold foods last at the supermarket and go directly home. Take a cooler bag and ice brick to the supermarket for cold and frozen foods.
- Cool down cooked food quickly if it will be eaten later. As soon as it stops steaming, divide it into shallow containers and put it in the fridge or freezer.
- Defrost food in the fridge, or in cold water, or in the microwave. Never defrost food on the bench or in the sun.

The 2 HOUR RULE

Refrigerate or freeze meat, poultry, fish, seafood, eggs, dairy (and other food that can spoil or 'go off') within 2 hours of buying or cooking. This includes food made from these ingredients.

After 2 hours throw out!



Avoiding higher risk foods

There are some foods your child should not eat. Avoid the high risk foods below and choose the lower risk food instead.

	Higher risk – avoid	Lower risk – choose
<text></text>	 Raw or undercooked meats Cold ready-to-eat chicken or meat Ready-to-eat chicken that is not steaming hot 	 Meat or poultry that is well cooked until steaming hot For example: Burger patties, mince and sausages must be cooked until there is no pink meat. Chicken must be cooked until there is no pink meat and juices are clear. BBQ chicken straight out of the rotisserie.
Seafood	 Raw or undercooked shellfish or fish e.g. sushi, sashimi, ceviche Smoked or ready-to- eat fish or seafood (e.g. smoked salmon) Shellfish and fi until steaming Canned fish ar Smoked fish or that has been reheated until shot throughout 	
<text></text>	 Pâtés or meat spreads Ready-to-eat deli meats (unless cooked to steaming hot) Ready-to-eat deli meats from a delicatessen counter, sandwich bar, buffets, or Bain Maries. 	 Deli meats purchased in a packet from the fridge section AND cooked / reheated until steaming hot throughout. For example: Ham in a toasted sandwich that is toasted until steaming hot throughout. Pepperoni on a pizza that has been cooked until steaming hot.

	Higher risk – avoid	Lower risk – choose
Eggs	 Dirty or cracked eggs Raw or undercooked eggs (e.g. runny yolk) Foods that contain raw or undercooked eggs, e.g. Homemade dressings Uncooked dough or cake batter 	 Clean eggs with no cracks Thoroughly cooked eggs with firm white and yolk (no runny eggs)
Milk & yoghurt	 Unpasteurised milk ("raw milk" or "bathing milk") Yoghurt or milk with probiotics added ("probiotic" or "bio" yoghurts, or probiotic drinks) 	 Pasteurised milk Pasteurised yoghurt without probiotics added ("live cultures" are okay)
<section-header></section-header>	 Soft and semi-soft cheese (e.g. feta, ricotta) that are not cooked/ reheated until steaming hot throughout Surface-ripened and mould-ripened cheese (e.g. camembert, brie, gorgonzola, blue cheese 	 Hard cheeses (e.g. cheddar, parmesan) Processed cheese (e.g. singles, stringers) Cheese spreads, cream cheese Plain cottage cheese Soft and semi-soft cheese (e.g. feta, ricotta, haloumi) ONLY if thoroughly cooked/ reheated until steaming hot throughout For example: Ricotta in baked cannelloni that is served steaming hot. Spinach and feta sausage roll that is cooked until steaming hot. Feta on a pizza that is steaming hot.

	Higher risk – avoid	Lower risk – choose
<section-header></section-header>	 Unwashed vegetables Raw sprouts Pre-prepared salads at a delicatessen, buffet, or restaurant Supermarket bags/tubs of salad that cannot be thoroughly washed (e.g. pre-prepared coleslaw) 	 All other vegetables if thoroughly washed under running water Freshly prepared salads Bags of leaves from the supermarket that can be thoroughly washed (these should always be re-washed at home before serving) Sprouts if thoroughly washed and cooked
<section-header></section-header>	 Unwashed fruit Rockmelon Pre-prepared fruit salads from delicatessen, buffets, or salad bars Purchased frozen berries and frozen fruit from countries other than Australia or New Zealand. Unpasteurised fruit juice 	 All other fruits if thoroughly washed under running water Freshly prepared fruit salads Purchased frozen berries and frozen fruits from Australia or New Zealand produce. You will need to check the packet to ensure it is 100% Australian fruit that is packed in Australia Pasteurised fruit juice Juice freshly squeezed at home
Grains	 Rice and pasta from buffets or Bain Maries, cooked rice in sushi, or restaurant rice Pre-cooked rice packets (e.g. 1-minute microwave rice) Uncooked flour (e.g. uncooked cake batter or cookie dough) 	 Any rice or pasta freshly cooked from dry Cooked flour (e.g. baked cakes and cookies) Hot meals from PCH hospital kitchen that contain rice and pasta, including those reheated. The PCH inpatient kitchen has strict food safety controls to keep food safe. See page 13.

	Higher risk – avoid	Lower risk – choose
Fermented foods	 Uncooked tofu and tempeh Uncooked miso Uncooked fermented grains and vegetables Fermented drinks e.g. kefir, kombucha 	• Any fermented food cooked until steaming hot
Expired or damaged foods	 Foods past their "Useby" or "Best Before" dates Foods open longer than the shelf life statement on the packet (e.g. "use within 3 days of opening") Fresh food that looks bruised or damaged Food in damaged packaging or canned foods with bulges or dents 	• Foods within their "Use- by" or "Best Before" dates
Other	 Soft serve ice cream (and shakes made with this) Untreated rainwater or tank water Probiotics (supplements, foods or infant formula with probiotics added) 	 Frozen ice cream Scheme water (regular tap water) and bottled water



Frequently asked questions

What about leftovers?

Leftover food is allowed, so long as:

- It is put into the fridge or freezer within 2 hours of cooking.
- It is eaten within 24 hours of cooking if stored in the fridge or defrosted from the freezer.
- The food/meal is made from 'lower risk' foods (shown in the table above).
- It is reheated in the microwave or on the stovetop until steaming hot throughout.
- Leftovers must only be re-heated once. Throw out the food that is left on your child's plate. Do not reheat the food again.
- The exception to this is leftover rice and pasta, which is not recommended. This must always be cooked fresh.

What about eating out?

You can still enjoy eating out with friends and family, so long as the meal:

- Is freshly cooked to order for your child and served steaming hot.
- Is made from the 'lower risk' foods (shown in the table above).
- Do not eat from buffets, salad bars, Bain Maries, or pre-prepared foods. This includes foods that use salads that are prepared in advance e.g. salad in burgers or wraps. Salads should be freshly washed and chopped for your child.
- Rice and pasta must be cooked fresh from dry for your child.

What about take-away?

You can give your child take-away, so long as:

- It is freshly cooked to order for your child and served steaming hot.
- Is made from the 'lower risk' foods (shown in the table on pages 10-11).
- Follow the 2 hour rule.

Avoid the following take-aways even if they are even if they are cooked fresh for your child:

- sushi
- rice (fried / steamed rice)
- pre-prepared salads (Subway, Zambreros, kebabs, burgers with salad etc.).

Why can't my child have probiotics or any **raw** fermented food?

There has been a lot of interest in gut health in recent years, and probiotics and fermented foods are often used for their potential health benefits.

However, probiotics are live microorganisms. In children with weak immune systems, there is a risk they can cause blood infections (sepsis), especially when a child has a damaged or inflamed gut (e.g. with mucositis). We do not know enough about probiotics yet to say which bacteria strains, what brands, and how much is safe for your child while they are having cancer treatment. For these reasons it is recommended that you do not give your child any food or supplements containing probiotics.

Foods are fermented when a large amount of bacteria, yeast, or mould is used to change the taste of the food. Cooking fermented foods will kill most of these, making them safer to eat. For this reason, we recommend your child does not have any fermented food or drink unless they are cooked until steaming hot throughout.

While your child is not able to have probiotics or uncooked fermented foods, there are plenty of foods your child can eat for good gut health. A diet that includes vegetables, fruit, wholegrains, legumes and yoghurt will promote good gut health.



The commercial kitchen at PCH complies with strict food safety regulations. There is regular cleaning, temperature and microbiological testing and audits. The kitchen also has equipment such as blast chillers and temperature controlled trolleys. All of this means we can be confident the food we serve is safe for all of our patients.

The PCH inpatient menu is being reviewed to remove high risk foods. Until these items are removed from the menu, please do NOT order the foods listed below for your child:

- sushi all types
- ham sandwiches
- ham salad
- rockmelon (in melon slices).

More information

For more information on food safety please visit the below websites.

Food Safety Australia New Zealand (FSANZ): https://www. foodstandards.gov.au/consumer/safety/ MicroorganismsAndFoodbornellIness

WA Health: https://healthywa.wa.gov. au/Safety-and-first-aid/Food-safety

Food Safety Information Council: https://foodsafety.asn.au/food-safety-athome/

Treatment side effects and nutrition

Some of the side effects of treatment and medications can change your child's eating and drinking.

This section covers some of the most common side effects, and things you can try to help manage these. Every child's treatment journey is different, and your child may not experience all of these symptoms.

As always, if you are ever concerned about any of these, talk to your oncologist. They may ask the dietitian to see you, or prescribe medication to help.

Keep this information handy to refer to if needed.

Low appetite or weight loss

If your child does not feel hungry or gets full quickly it can be hard to eat enough food.

Many children with cancer also have increased energy (kilojoule) and protein needs. Protein is used by the body grow, repair, and maintain muscle strength.

Some ways to help increase the amount your child eats:

- Offer small meals more often. Try 3 small meals and 3 snacks each day.
- Keep mealtimes calm and pleasant. Encourage good eating but don't nag or force your child to eat.
- Work with your child's appetite and allow them to mix up their meals, for example eating breakfast cereal at dinner.
- Offer at least one favourite food with meals.
- Avoid filling up on sweet drinks like juice, cordial, or fizzy drinks.
- Offer dairy based drinks with snacks.



Include a high protein food in every meal and snack:

- meat, fish and chicken
- full fat dairy
- eggs
- beans, legumes, nuts* and seeds.

Include a high energy food in every meal and snack:

- oil, margarine or butter
- full fat dairy (milk, yoghurt, cheese, custard, cream, sour cream)
- avocado, mayonnaise
- nuts* and seeds.

*Do not give whole nuts to children under 5 as they are a choking risk. Use nut pastes, flour and meal instead.

High energy foods can also be added to meals or snacks as energy 'boosters' by adding a small amount (between 1 teaspoon to 1 tablespoon). For example, cheese added to pasta, or cream added to yoghurt.

Once your child finishes their treatment they won't need as much energy and protein. You can go back to their usual diet and stop using energy boosters when they finish treatment.



If your child continues to lose weight or is unable to eat enough, talk to your Oncologist. Your child may be referred to the dietitian for more help.

Nausea and vomiting

Chemotherapy and radiation can cause nausea and vomiting. Many children will need anti-nausea medicine. Make sure you know how much anti-nausea you can give your child and how often. It is important to also tell your oncologist if your child is still vomiting a lot despite using the anti-nausea medicine.

These strategies can also help with nausea and vomiting:

- Eat small meals and snacks through the day.
- Eat food that is easy to digest e.g. toast, crackers, rice, cereal, noodles, plain fruit or vegetables.
- Do not eat very greasy, rich, or spicy foods. These can often make vomiting worse.
- Do not keep offering "favourite foods" when your child is vomiting. This can turn them off these foods.
- Encourage clear, cool drinks between meals.

- Smells of cooking food can make nausea worse. Try to keep your child away from the kitchen or eat in a well ventilated room. Your child may prefer cold foods (e.g. a sandwich) instead of a hot meal with a strong smell.
- When in hospital, avoid removing the lid of the food tray in front of your child as the smell can be overpowering. Remove the lid outside the room and then bring the foods they want inside the room.
- Encourage your child to rinse their mouth after vomiting.
- Offer breakfast 30 minutes after giving their morning anti-nausea medication.
- If your child is not able to eat, offer rehydration solution (e.g. Hydralyte or Gastrolyte) or other fluids so they do not become dehydrated. If the problem continues or you are concerned contact the HOT phone (haematology/oncology triage phone) on 0410 717 816.



Taste changes

Some treatments may change your child's sense of taste. These changes are different for each person, and some children will not be affected.

Ask your child or teen to tell you what the food tastes like, for example: Is the food too sweet? Or does it taste like metal?

Some	tips	for	each	taste	change	are	below:
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Taste change	Strategies to help			
Bland or no taste	 Add flavour with herbs, lemon, spices, ginger, garlic, marinades or sauces (e.g. soy, chilli, tomato and BBQ). Add foods with strong flavours (e.g. pickles, olives, flavoured crackers). Add strong flavoured cheese to food (e.g. haloumi, tasty, parmesar 			
Overpowering	 Choose bland foods. Avoid spices, chilli, and strong flavours. Avoid fizzy drinks or mints/gum 			
Too salty	 Avoid adding salt to cooking or at the table. Choose lower salt or 'no added salt' versions of canned and jar foods. Avoid salty sauces (e.g. soy sauce, fish sauce, oyster sauce, and Worcestershire sauce). Use lower salt cheeses (e.g. mozzarella, cream cheese, or well cooked ricotta). Avoid salty meats such as bacon, ham, polony, and corned silverside. Avoid salty spreads. 			
Too sweet	 Try plain breakfast cereals with less sugar, such as porridge, wheat biscuits, or cornflakes. Avoid dried fruit, fruit bars, muesli bars / snack bars. Try less sweet yoghurts such as Greek or "no added sugar" yoghurt. Avoid adding sugar, honey, or sweeteners to food. Avoid sugary drinks. 			
Metallic or bitter	 If red meats taste bitter try other protein sources such as chicken, turkey, fish, eggs, peanut butter, beans and lentils. Try cold pieces of fresh or canned fruit. Use plastic cutlery instead of metal cutlery. 			
Too dry Feels like "sand" or "straw" in the mouth	 Add sauces and gravy to moisten food. Choose soft and moist foods (e.g. scrambled eggs). Try smoothies between meals. Have sips of water between mouthfuls. Avoid dry, rough, and crunchy foods that make it feel worse. Speak to your oncologist or nurse who can recommend products to keep your child's mouth moist. 			



Mouth sores

Cells in the mouth and throat can be affected by chemotherapy and radiation therapy to the head and neck. It is important to have good mouth care and follow the instructions of your oncology team.

Tips for when your child has mouth sores:

- Eat soft and moist foods that don't need lots of chewing (e.g. smoothies, custard, jelly, slow cooked meat, creamy/cheesy pasta, mashed potato, and noodles).
- Cut food into small pieces or mash them.
- Try cold or room temperature foods.
- Try drinking from a straw to bypass the sores.
- Avoid very salty, spicy or acidic foods (e.g. vinegar, citrus fruits, tomatoes, pineapple).
- Avoid dry and crunchy foods that are uncomfortable in the mouth.
- Try smoothies.

Diarrhoea

If your child has diarrhoea it is important to encourage them to drink plenty of fluids for hydration as they are losing fluid in the runny poos.

Try these strategies:

- Encourage to sip on fluids regularly through the day.
- Small regular meals through the day.
- Avoid very fatty or spicy foods.
- Choosing lower fibre foods:
 - White bread, white rice and white pasta instead of wholegrain varieties.
 - Refined breakfast cereals such as corn flakes or rice pops instead of high fibre cereals (Weetbix, bran, or porridge).
 - Peel skins off fruit and vegetables.
 - Avoid dried fruit and large amounts of fruit juice.
 - Avoid large amounts of beans, legumes, corn, peas, cabbage, nuts or seeds.

Severe diarrhoea can reduce your child's ability to digest a milk sugar called lactose. In addition to the ideas above, you can trial lactose free cow milk, yoghurt, and custard to see if it helps reduce your child's symptoms.

Once the diarrhoea has settled you can add the fibre back in and try regular dairy products.

Constipation

Constipation is a common side effect of some chemotherapy and other medicine related to therapy.

A normal poo should be easy to push out and be smooth like a sausage. If your child is constipated, the poo becomes hard to push out. It may look like a very large lumpy log or like individual round hard pebbles. Your child might also have tummy pain or show 'holding on' behaviour like rocking or fidgeting, crossing legs or refusing to sit on the toilet. This 'holding on' can make constipation worse.

Try:

- Make sure your child is getting enough fluid.
- Offer foods that are high in fibre including fruit and vegetables (ideally with skin on), wholegrain breads, rice, and pasta and breakfast cereals (Weetbix, bran, or porridge).
- Encourage good toileting habits. This includes having your child sit on the toilet after a main meal. You can try a sticker or reward chart for sitting on the toilet.
- Encourage some light physical activity such as walking or active play if they can.

Discuss ongoing or painful constipation with your oncologist, as your child may need a laxative.

Steroids and excess weight gain

Steroid medication commonly causes an increased appetite and weight gain. If your child is underweight from chemotherapy this weight gain may be beneficial for them. However if your child gains weight rapidly they may go above the healthy weight range and become overweight for their height.

The following strategies can be helpful if your child is gaining too much weight:

- Have a meal and snack routine. Offer 3 main meals and 2 snacks per day.
- Offer water only between meals and snacks.
- Have some distractions ready if your child is asking for food between meals and snacks.
- Keep nutritious foods and snacks in the kitchen and pantry. Try to minimise high sugar, high fat foods in your home as these will be very tempting for your child. See the snack list below for ideas.
- Grill, bake, BBQ, or steam foods instead of frying to reduce the fat in the meal. Use oil and margarine/butter sparingly.
- Switch to low fat dairy options e.g. HiLo milk, reduced fat yoghurt, reduced fat cheese.
- Avoid sweet drinks like juice, soft drink and cordial. These are high in energy (kilojoules) and not filling. Sugar-free versions can be used occasionally.
- Don't eat take-aways very often. When you do eat out, choose options that include vegetables or salad. Avoid very fatty, oily foods like deep fried food, pizza or creamy pasta.
- Eat all snacks and meals together at the family table, and not in front of the TV.
- Do not make your child go on a 'diet' or treat them differently to the rest of the family. Instead encourage the whole family to make good food choices.

Try these healthy snack options:

- air popped popcorn with salt/spices (no butter)
- low fat, low sugar yoghurt or custard
- vegetable sticks and hummus or tzatziki
- fruit kebabs
- rice crackers/ rice cakes / corn thins with low fat dip / vegemite / scrape of jam / or low fat cheese

- smoothie/milkshake made with fruit and low fat milk and yoghurt
- baked beans or spaghetti
- boiled egg
- vegetable soup
- sweetcorn cob
- multigrain or fruit toasted muffin
- low fat high fibre breakfast cereal with low fat milk

• pita bread or crumpet with reduced fat cheese or vegemite.

Your child's appetite should return to normal when the steroids are stopped. If you are concerned, discuss this with your oncologist.

Notes:



Government of **Western Australia** Child and Adolescent Health Service



Worried about your child? Call HOT PHONE

(Haematology/Oncology Triage Phone)

0410 717 816

Ward 1A: 6456 3517 Clinic H: 6456 0170

For language assistance, please speak to one of our staff or call the Translating and Interpreting Service (TIS) on 131 450 to facilitate your call.

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