

# Nutrition Tips for Caregivers



**GOD'S LOVE  
WE DELIVER®**



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The mission of God's Love We Deliver is to improve the health and well-being of men, women and children living with HIV/AIDS, cancer and other life-altering illnesses by alleviating hunger and malnutrition. We prepare and deliver nutritious, high-quality meals to people who are unable to provide or prepare meals for themselves.

We also offer illness-specific nutrition education and counseling to our clients and families, care providers and other service organizations. All our services are provided free of charge without regard to income.

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# Introduction

In our lifetime, many of us will either give or receive care. It is estimated that there are more than 50 million Americans currently caring for an adult family member, partner or friend, enabling those individuals to avoid long-term care by remaining in their homes and communities. This staggering statistic reflects a tremendous amount of time, labor and love, and consists of a multitude of activities. This booklet focuses on the nutrition aspects of caregiving.

Food and meal time can be a source of comfort and connection for caregivers and their loved ones. It can be a time to slow down and take pleasure in each other's company, something often lost in the bustle of appointments, commitments and day-to-day tasks. For the person being cared for, food may be a source of familiarity, happiness, and contentment during difficult times.

Keeping an individual nutritionally healthy can enhance both quality of life and physical well-being. Eating well can prevent falls, infection, and skin breakdown, and help to maintain a healthy weight.

Food preparation and nutrition management may be overwhelming for caregivers, but healthy eating does not have to be complicated. This booklet is intended to alleviate stress by providing nutrition information, hopefully making the caregiver's life a little easier. It should be used as a resource to help guide nutritional choices and manage food-related concerns. Major issues are highlighted and resources for more in-depth information are provided. Also included are tips for self-care, an often neglected, but always crucial aspect of caregiving.

# Nutrition Basics for Caregivers



## APPROACHING MEAL PLANNING

One of the main tasks of a caregiver is providing nutritious meals for the person they care for. Below we have listed some things to consider in planning meals.

**Special Diets:** Does your loved one follow a special diet due to an illness or physical limitation? For example, people with diabetes will need to monitor their carbohydrate intake. Those with difficulty swallowing may need to modify the consistency of their food. The following sections in this book address these and other specific medical conditions and dietary needs.

**Weight Status:** Sudden and unintentional changes in weight (either up or down) can indicate a change in the person's medical condition. For example, you may notice a change in bowel habits, swelling in legs or ankles, decreased food intake, loss of appetite or poor eating habits. If such changes persist, you should discuss them with a healthcare provider.

**Financial Resources:** Even with the best intentions, sometimes financial resources are limited and it becomes difficult to provide a healthful diet. Consider applying for Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamps) benefits or using food pantries. You can also shop smart by looking for sales and using coupons. Sometimes buying in bulk is economical. You can then repackage or freeze the food in individual-sized containers.



**Food Availability:** It is not always easy to get to a grocery store or market that has the foods you are looking to buy. In this situation, try to stock up on dry goods whenever you can and in large quantities. Alternatively, you can arrange for a friend or relative to take you shopping on a regular basis. Also keep in mind that many supermarkets and food providers have online ordering and delivery services. In any case, it is a good practice to keep backup items on hand. See “Stocking Your Kitchen” for some must-have items.

### PLANNING WELL-BALANCED MEALS

Knowing what types of foods you wish to prepare, and having the ingredients on hand is half the battle. The other half is putting it all together. Bearing in mind any special diet requirements, the MyPlate model can make this job easier.

#### **Vegetables and Fruit:** *½ the plate*

Serve vegetables with every meal as a side dish, mixed dish (such as stew or soup), salad, or garnish for a sandwich. While it is important to select a wide variety of vegetables, green leafy vegetables should be served regularly. Fruit can be part of the meal, snack or dessert.

#### **Protein:** *¼ of the plate*

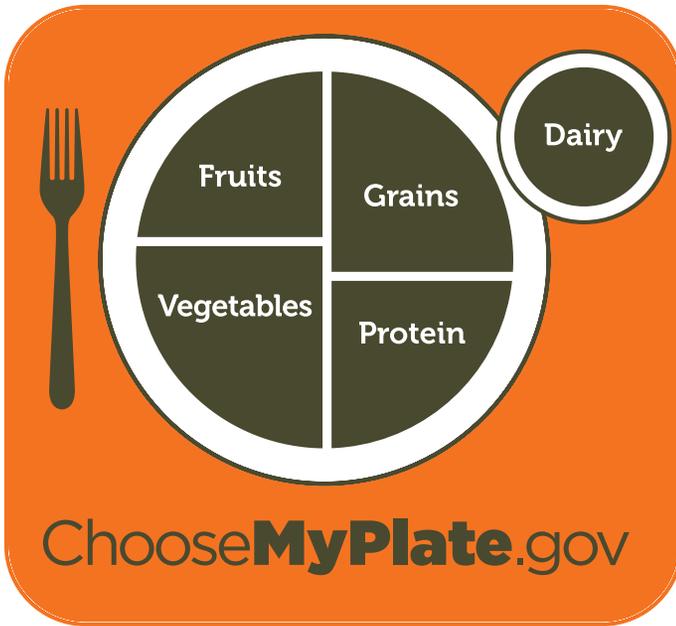
Look for lean cuts of meat (especially chicken and fish). Avoid processed meats, such as lunch meats and hot dogs. Try plant sources of protein, including beans and tofu.

#### **Grain:** *¼ of the plate*

Best choices are whole grains, such as brown rice, whole wheat pasta, barley or quinoa. Starchy vegetables, including potatoes and corn, are other choices in the starch category.

#### **Dairy:** *2-3 servings a day*

Examples include milk, cheese, and yogurt. Use low-fat products if needed.



## HYDRATION

Staying well-hydrated is critical. Nearly 60% of our body is water. Water is vital for many bodily functions, including removing toxins through urination. Signs of dehydration include headache, dry mouth, dizziness, weakness, dry skin and dark-colored urine. Recommendations for fluid intake vary from person to person, but a ballpark figure is 6-8 cups per day. Monitor color of urine: light yellow urine can indicate adequate hydration. (Note that some vitamins and medications can discolor urine.) Fluids include not only water and other beverages, but foods that are liquid at room temperature or contain large amounts of fluid. Yogurt, soup, applesauce, ices, pudding, gelatin, fruit, cucumbers, tomatoes and ice cream are all examples.



## STOCKING YOUR KITCHEN

### FREEZER

<b>Vegetables</b>	Mixed vegetables, broccoli, cauliflower, spinach, corn, collards
<b>Protein</b>	Chicken, fish, turkey
<b>Fruit</b>	Any frozen kind

### CUPBOARD

<b>Vegetables</b>	Canned* tomatoes, corn, string beans
<b>Protein</b>	Canned* fish (tuna, salmon, sardines, mackerel), canned* or dried beans
<b>Fruit</b>	Variety of canned fruit
<b>Grains/Starches</b>	Cereal, rice, quinoa, pasta, barley, potatoes, sweet potatoes, yucca
<b>Other</b>	Variety of spices, broths* and soups*

### REFRIGERATOR

<b>Vegetables</b>	Variety of fresh vegetables, especially dark greens; basics such as carrots, celery, onion, garlic
<b>Fruit</b>	Variety of fresh fruit
<b>Protein</b>	Chicken, fish, tofu, eggs, cheese
<b>Beverages</b>	Milk and juice

\*Low sodium

# Caring for Someone with Special Needs



## OLDER ADULTS

Nutrition issues related to age, such as reduced appetite, sense of taste, and thirst, are special considerations when caring for older adults. Many body functions slow with age, creating unique nutritional needs. Common concerns are unintentional weight loss and dehydration which can lead to increased frailty and dependence, decreased quality of life, and poorer health outcomes.

Keeping track of weight and intake of food and fluids can help identify problems before they become serious. Many older adults take multiple daily medications that interact with each other and with food. They also can cause changes in appetite, food intake and hydration. Be sure to ask a medical provider, registered dietitian or pharmacist for special instructions to avoid complications.

Things to watch for	How to watch for them	Further considerations
Weight changes	Check weight regularly – at least monthly.	Report any changes to medical provider or dietitian.
Dental or mouth pain	Observe eating, keep regular dental visits.	Report any changes to dentist or medical provider.
Skin breakdown (increased risk with diabetes, incontinence)	Observe skin, especially at bony prominent points, avoid excessive moisture (perspiration/urine).	Report any changes to medical provider immediately; change bedding frequently.
Hydration (see pg. 5)	Prompt to sip water throughout the day. Offer high water content foods. Keep log of amount of fluid consumed.	Check with medical provider or dietitian for individualized fluid recommendations.
Depression/mood	Observe mood, desire to take part in usual activities and sleep patterns.	Report any changes to medical provider or mental health professional.
Changes in food intake	Watch for changes in amount and types of food eaten, or shifts in schedule.	Alter mealtimes/foods as needed in order to maximize intake. Consider special equipment and/or assistance with feeding as needed.



## ALZHEIMER'S DISEASE

Alzheimer's is a progressive disease in which food needs, preferences and abilities change over time. These can result in weight loss, malnutrition and complications like increased frailty, skin breakdown and infections, which can advance dependence on others and increase caregiver burden.

A goal and challenge of caregiving is to maintain a person's independence, while encouraging a variety of foods and fluids. One way to approach this is to meet the person's needs as they change, and avoid anticipating too far into the future. For example, as the ability to use utensils and to self-feed is lost, consider using fewer utensils (just a spoon, no fork or knife), adaptive utensils and/or finger foods (foods that can be easily picked up and eaten without utensils). If the individual is able to chew and swallow safely, finger foods are a great way to encourage independent eating (see following page for ideas). There are many types of utensils, bowls, plates, cups and mugs that make self-feeding easier and may increase the amount of food eaten. For more information about this type of equipment, see the resources section (pg. 32).

Caregivers should be aware that chewing and swallowing abilities will diminish over time. If you suspect a swallowing problem, inform a medical provider immediately and consider a referral to a Speech Pathologist. As needed and recommended, offer modified consistency foods (thickened, chopped, pureed) step by step. Avoid taking away too much too soon. See page 19 for more about dysphagia (loss of ability to swallow) and its symptoms.



### Tips to encourage eating:

- Provide a calm, quiet environment for meals. Turn off the TV and radio.
- Make mealtime “person centered.” Focus on the person rather than the task.
- Remove utensils only when a person is confused or they are unsafe.
- Give verbal and physical eating cues, i.e., place spoon in person’s hand and say, “this is your spoon”; guide hand to plate and say, “these are your potatoes.”
- Offer small portions of foods one at a time. This can reduce confusion.
- Use solid pattern tableware in contrasting colors for less distraction. For example, a white plate against a blue placemat.
- Use non-skid bowls and plates to encourage independent eating.
- Remove all non-food items from area – wrappers, pits and packets.
- Keep in mind the time of day. Appetite and functioning may be best in the morning.
- Honor food preferences as much as possible.
- Provide water to sip throughout the day in a clear glass or mug. This way you can easily watch how much a person is drinking.

### HIV/AIDS

When caring for someone with HIV/AIDS, it is important to ensure the person is eating a well-balanced diet. Healthy eating is beneficial for boosting the immune system, increasing energy, building and maintaining muscles, and reducing the risk of other chronic diseases such as diabetes, heart disease and cancer. The guidelines presented on pages 4-5 can help you with this.

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### Finger Food Ideas

Cut up sandwiches

French toast sticks

Crackers with soft cheese

Slices of quiche, frittata or pizza

Quartered hard-boiled egg

Fruit slices and cut vegetables

Chicken breast slices

Potato wedges

Granola bars

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In addition, consider the following:

**Protein:** This nutrient is important for building and maintaining muscle, supporting the immune system and keeping the gastrointestinal (GI) tract healthy. Focus on lean protein, especially poultry and fish.

**Immune system:** An overall healthy diet with ample fruits, vegetables and lean protein will support the immune system.

**Gastrointestinal system:** The HIV virus has an affinity for tissue in the GI tract, so supporting this system is essential. Consider a high fiber diet and foods with probiotics, such as yogurt with active cultures and naturally fermented vegetables.

**Medications:** Watch for temporary or long-term side effects of medications, including nausea, vomiting, diarrhea or constipation. See the section on managing GI symptoms on page 21.

**Vitamins and minerals:** People with chronic disease, such as HIV, may need more vitamins and minerals than are provided by food. Taking a multivitamin can be supportive, especially if food intake is reduced due to loss of appetite or GI issues.

**Weight loss:** Weight loss is not as common a problem for people living with HIV or AIDS as it was in the past. However, it does still occur and it may be a sign that the medical condition is progressing. Report weight loss to the healthcare team if you are unable to explain why your loved one is losing weight. For example, if your loved one is eating the same amount and types of foods but is losing weight, there may be an underlying reason for the change.



## CARDIOVASCULAR DISEASE

Cardiovascular disease (CVD) refers to a group of conditions that affect the heart and the blood vessels. The most common causes of disease are atherosclerosis (hardening of the arteries) and hypertension (high blood pressure). Both are related to a number of factors, some that cannot be changed (like genetics and age), and some of which can be modified (such as smoking, diet and physical activity). Focusing on these lifestyle factors will help to avoid further events or worsening of disease.

When caring for someone with CVD, following a heart-healthy eating plan is essential to maintain health. Here are some things to consider:

### *Focus on healthy fats*

- Select **monounsaturated** fats: olives, olive oil and avocado.
- Favor **polyunsaturated** fats: canola oil, nuts, and **omega-3** fats which are found in cold water fish (salmon, mackerel, tuna).
- Choose fat-free and low-fat dairy products.
- Eat fewer saturated fats: fatty meats, poultry skin, full-fat dairy products. Avoid trans-fats, which are found in processed foods and many commercially baked goods.

### *Monitor sodium intake*

- Limit sodium to 1,500 mg per day. Ask your medical provider for individual recommendations.
- Check the ingredients label for salt-containing ingredients such as: sodium chloride, monosodium glutamate (MSG), baking soda/baking powder, sodium benzoate, sodium nitrite, and sodium sulfite.



- Choose more fresh or frozen fruits and vegetables.
- When using canned goods, drain and rinse well in cold water, or purchase low-sodium products.
- Avoid items that are pickled, brined, smoked and cured – they are all high in sodium.
- Season food with fresh or dried herbs or spices instead of salt.
- Snack on fruits, vegetables, unsalted nuts and crackers, and low-fat yogurt.
- Processed and prepared foods may contain large amounts of sodium; eat fewer of these items and read food labels to make better choices (see below).

**Use the Food Label to Make Heart Healthy Choices:** When buying packaged foods, check the food label for the amount of fat and sodium. Look at the % Daily Value column (see opposite page for an example) to determine whether the item contains a high or low source of each nutrient.

The 5%-20% rule of thumb:

- 5% or less is low. Keep total fat, saturated fat, trans fat, cholesterol and sodium low.
- 20% or more is high. Keep vitamins, minerals and fiber high.

This label is an example of an item that is not a healthy food choice because it is high in sodium and fat and low in fiber.



# Nutrition Facts

Serving Size 1 Cup (228g)

Servings Per Container 2

## Amount Per Serving

**Calories** 250    Calories from Fat 110

### % Daily Value\*

→ <b>Total Fat</b> 12g	<b>18%</b>
Saturated Fat 0g	<b>15%</b>
Trans Fat 0g	
→ <b>Cholesterol</b> 30mg	<b>10%</b>
→ <b>Sodium</b> 470mg	<b>20%</b>
<b>Total Carbohydrate</b> 31g	<b>10%</b>
→ Dietary Fiber 0g	<b>4%</b>

Sugars 5g

**Protein** 5g

Vitamin A 4%    ●    Vitamin C 2%

Calcium 20%    ●    Iron 4%

\*Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:

	Calories:	2,000	2,500
Total Fat	Less than	65g	80g
Saturated Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g



## MULTIPLE SCLEROSIS

While there is no specific diet for people living with multiple sclerosis (MS), following overall healthy eating practices can help manage disease symptoms as well as reduce the risk of other illnesses. Diet suggestions include the following:

Research has shown that omega-3 fats could lower the severity and length of MS attacks, as well as improve mood and memory. Omega-3 fats are found in salmon, mackerel, sardines, albacore tuna and herring. It is a good idea to serve fish at least two times per week.

Incorporate carbohydrates that promote health such as fruits, vegetables, whole grains and beans, and avoid highly processed ones such as white bread, baked goods, white rice and sweetened beverages. A major benefit of unprocessed carbohydrates is their high fiber content which promotes bowel movements and increases the feeling of fullness and satiety. See page 21 for additional tips on managing bowel movements.

Fluids, especially water, are important to prevent dehydration, of course, but also to avoid constipation and urinary tract infections, two common conditions for persons with MS.

Low vitamin D status has been linked to MS in some studies. If vitamin D levels are low, consider a supplement, as it is difficult to obtain sufficient vitamin D through food. The recommended dietary allowance is 600 IU for adults through age 70, and 800 IU for those over 70 years. It is always a good idea to check with your medical provider before taking supplements.



## DIABETES

If you are caring for someone with diabetes, encouraging a healthy lifestyle is an effective way to control blood glucose (also called blood sugar). Choosing foods wisely, along with regular physical activity, can prevent blood glucose from going too high or too low. Some beneficial daily practices are:

- Plan meals and snacks ahead of time. Try to eat around the same time every day.
- Eat balanced meals that contain carbohydrates (grains, vegetables and fruit), fat and protein. See page 4 to help guide you.
- Keep portion sizes for carbohydrates moderate; avoid eating a lot of them at any one meal or snack. The chart below will help you identify which foods are high in carbohydrates.

### WHAT FOODS HAVE CARBOHYDRATES?

#### High-Carb Foods:

Rice, cereal, pasta, bread/crackers, milk, fruit, fruit juice, starchy vegetables (potatoes, corn, beans, peas), soda and sweetened beverages, desserts

#### Low-Carb Foods:

most vegetables  
(except the starchy ones)

#### No-Carb Foods:

meat, poultry, fish and oils

- Choose high fiber foods often.
- Eat whole foods and whole grains rather than processed foods. They contain more nutrients and do not raise blood sugar as much. The “Whole Foods Swap” on the next page provides some examples of how to do this.
- Use the website **[choosemyplate.gov](http://choosemyplate.gov)** to help you make good food choices. Or work with a registered dietitian to create a personalized meal plan.



- Exercise regularly.
- Self monitor your blood glucose as recommended by your medical provider.

## THE WHOLE FOODS SWAP

Here are a few examples of how to increase whole foods.

Eat this	Instead of
Whole Wheat Bread	White Bread
Brown Rice	White Rice
Orange	Orange Juice
Old Fashioned Oats	Instant Oats

### CANCER: BEFORE, DURING AND AFTER TREATMENT

If you are caring for someone with cancer, how you prepare meals and what you serve may depend on where that person is in his/her treatment process. Overall, the goal is to maximize the quality of a person's diet in order to make the person's treatment as successful as possible and reduce the risk of recurrence.

**Before treatment:** To prepare for whatever treatment is prescribed, eat as healthy a diet as possible to strengthen the body for the road ahead.

Eat enough calories to maintain a healthy weight.

Eat a plant based diet.

Eat a variety of fruits and vegetables daily.

Favor whole grains over refined grains.

Obtain adequate protein, including lean meats, especially poultry



and fish, along with plant-based proteins, such as beans and tofu. Limit red meat and processed meats.

**During treatment:** In this phase, the goal is to maintain weight and eat to survive. Consider easing up on the “perfect” diet to make this part of the journey manageable.

To the extent that you can, continue providing meals as above. However, the location of the cancer and the treatment process may pose some challenges. The table on the following page can help with some of these problems, but you may need to seek additional help from a registered dietitian or another member of the healthcare team.

**After treatment:** This is a time to recuperate, repair and get back to or continue a more healthy diet.

However, it may take some time to get there if the person you care for has experienced debilitation and adverse side effects during treatment. You can help get your loved one back to health by focusing on lean proteins, achieving a healthy weight and providing a balanced diet as tolerated. The diet can be advanced as your loved one regains strength and functioning.



**Problem** Nausea/vomiting, diarrhea, constipation

**Solution** See section on gastrointestinal issues, page 21.

**Problem** Difficulty chewing and swallowing

**Solution** See section on dysphagia, page 19.

**Problem** Loss of appetite or weight loss

**Solution** Use liquid or powdered meal replacements, eat 5-6 small meals per day (rather than 3 large meals), keep snacks near at hand, add extra calories to the food, offer a bedtime snack, provide soft/cool or frozen foods, offer larger meals whenever the appetite improves, and serve liquids between meals, not with the meal.

**Problem** Dry mouth

**Solution** Have water available for sipping throughout the day; serve tart foods/beverages, such as lemon or vinegar to help stimulate saliva production; provide sugar-free gum or hard candy, ice chips, popsicles or other frozen items; moisten foods with gravies, sauces, applesauce, cranberry sauce or condiments (mustard, mayonnaise, ketchup); use salad dressings. Avoid beverages or mouthwashes with alcohol.

**Problem** Mouth sores

**Solution** Prepare foods that are soft or very easy to chew; avoid acidic foods, such as oranges, orange juice, vinegar, lemon, tomato.

**Problem** Change in taste or sense of smell

**Solution** Choose foods that look and smell good to the person you are caring for; marinate meats in fruit juices, salad dressings or sweet-and-sour dressings; avoid cooking in metal pots and provide plastic ware; try tart foods/drinks.

If foods have a salty, bitter, or acid taste, add sugar or sweetener.

Add extra flavor to foods, such as garlic, basil, oregano, rosemary, and barbecue sauce.

# Managing Chewing & Swallowing Issues



Dementia, treatments, medications, and disease progression can impair the ability to chew and swallow safely. When the swallowing ability is lost (dysphagia), food can aspirate or enter the lungs, becoming a life-threatening situation. Symptoms of dysphagia include drooling, coughing during or after meals, choking or a “gurgly” voice. If dysphagia is suspected, a speech pathology evaluation may be necessary. Modifications in the consistency of food (soft, minced, puréed) and liquids (thickened liquids) can be used to maintain and improve the ability to eat. Below is a guide to various texture definitions and examples:

**Soft:** Foods that are moist, nearly a regular texture with the exception of very hard, sticky, or crunchy foods. Chewing is required.

**Examples:** moistened breads; biscuits; pancakes; well-moistened/cooked cereals; soft and peeled fresh fruits such as peaches and mangos, canned fruits and bananas; thin-sliced, tender, or ground meats and poultry; soft, canned vegetables; baked or boiled potato.

**Minced:** Foods that are moist, cut into one-quarter-inch pieces, soft-textured and easily formed into a soft rounded ball in the mouth. Texture is between puréed and solid. Chewing is required.

**Examples:** Cooked cereals including oatmeal; slightly moistened dry cereals with little texture such as Corn Flakes,



Rice Krispies, or Wheaties; pudding; moistened, ground, or cooked meat like moist meatballs and meat loaf; moist macaroni and cheese; thick pureed vegetables; chunky mashed potato; thick pureed fruits; ripe bananas; applesauce.

**Puréed:** Foods that are blended to provide a smooth, mashed potato-like consistency; can be swallowed with no chewing. No coarse textures like raw fruits, vegetables, or nuts.

**Examples:** Smooth yogurt; puréed meats, vegetables and fruits; hot cereal like cream of wheat and smooth oatmeal; pudding; applesauce; mashed potatoes; smooth cream soups.

**Thickened Liquid:** Liquids that are thicker than water. There are three main types of liquid consistency: nectar-thick, honey-thick, and spoon-thick. Thin liquids may be altered using a thickener which is usually made from an instant modified cornstarch. They can be used with hot or cold beverages and foods.

**Examples:**

*Nectar-thick liquids:* fruit nectar; maple syrup; eggnog; tomato juice; cream soups.

*Honey-thick liquids:* liquids thickened to a honey consistency; thick smooth yogurt without fruit.

*Spoon-thick liquids:* pudding; custard

# Managing Gastrointestinal Changes



Advanced age or certain medical conditions can cause changes in the gastrointestinal (GI) system, which includes the esophagus, stomach, liver, gallbladder, pancreas, intestines, and colon. Reduced levels of stomach acid and digestive enzymes, as well as weak muscles, are a few reasons why people may experience GI problems. Therefore, it is important to ask about or observe bowel function, as early symptoms, such as constipation and diarrhea, can be indicative of larger issues. Eating nutritious foods and beverages that are rich in antioxidants, vitamins, and minerals can actually help to improve and/or prevent certain GI problems.

Here are some common gastrointestinal problems with guidelines for caregivers to follow:

**Constipation** occurs when people have trouble moving their bowels. Common causes of constipation are dehydration or inadequate fiber consumption.

- Drink at least 6-8 cups of water per day.
- Aim for 25-35 grams of fiber per day, to help with bowel movements. Encourage a gradual increase in fruits, vegetables and whole grains.

**Diarrhea** has many causes and can be serious. See a medical provider to determine the cause and a registered dietitian for an individualized nutrition care plan.

- For immediate relief, avoid high fiber foods such as whole grains, raw fruits and vegetables, as well as caffeine and alcohol.



- Drink plenty of fluids and increase consumption of starchy foods like bananas, white rice, white bread, applesauce, and potatoes.

**Nausea** is associated with many different conditions and is often a sign of problems in the GI tract.

- Take medications and supplements with a meal, not on an empty stomach, unless otherwise instructed by your medical provider or pharmacist.
- Settle the stomach with natural remedies such as ginger, soda crackers, plain water, and peppermint or chamomile tea.

**Vomiting** is a natural defense mechanism of the body, but can have harmful effects. With excessive vomiting, it is important to consult your medical provider immediately.

- Do not eat immediately after vomiting, even if hungry. Instead, sip water or suck on ice chips to replenish fluids.
- When feeling a little better, offer diluted fruit juice or plain bread.

# When to Consider Home-Delivered Meals



Home-delivered meal services help many caregiving families maintain good nutrition for their loved ones at home. By relieving the stress of preparing meals, it allows the caregiver to attend to other important activities, thereby reducing the caregiver's burden.

Such services should be considered when there is an inability to meet the food and nutrition needs of the individual – i.e., when your loved one has difficulty shopping and cooking, is unable to safely use the kitchen, or requires a specific therapeutic diet. Unintentional weight loss, skin breakdown, difficulty chewing or swallowing, and lab results indicating poor nutrition are strong indicators of increased nutritional need.

Receiving home-delivered meals is important at any time, but is especially critical following hospital or long-term care facility discharge. With discharge occurring earlier than in the past, home-delivered meals can play a stabilizing role in the care of an individual. The provision of adequate food at home promotes the healing process, maintains immune function, and improves functional status, all of which lead to better health outcomes.



# Food Safety at Home

Foodborne illness (food poisoning) is caused by harmful bacteria that enter the body through food. Those at increased risk include the very young, pregnant, elderly, and those with a compromised immune system. Generally, foodborne illness occurs 1-3 days after ingesting the offending food; but it can also occur as quickly as one hour after eating. Common symptoms include stomach pain, vomiting and diarrhea. If foodborne illness is suspected, please contact your medical provider.

Here are some tips to keep your home safe:

## CLEAN

- Keep all surfaces clean and sanitized.
- Before handling food, wash your hands and the hands of the person eating.
- After preparing food, wash all cutting boards, dishes, utensils and counter tops with hot soapy water.
- Discard excessively worn cutting boards.
- Wash fruits and vegetables under clean running water.

## SEPARATE

- Raw meat, poultry or seafood should be kept separately, on the bottom shelf of the refrigerator, in order to prevent cross contamination with other foods.
- When shopping, buy perishable items last, just before checking out.

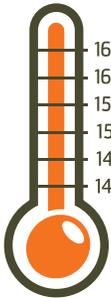


## COOK

- Cooking food properly kills bacteria; see cooking temperature guide below.
- Reheat leftovers to 165°F and bring all sauces, soups and gravies to a boil.

## CHILL

- Chill food as soon as possible. Refrigerate or freeze leftovers within 1-2 hours of serving. Divide large amounts of leftovers into shallow containers for quicker cooling.
- Thaw food on the bottom shelf of the refrigerator or in the microwave on the defrost setting.
- Marinate foods in the refrigerator.
- Once prepared or held at room temperature, foods should be eaten within 2 hours during colder months and within 1 hour in warmer temperatures.



### COOKING TEMPERATURE GUIDE

**WHOLE CHICKEN AND TURKEY:** internal temperature of 165°F

**GROUND MEATS:** internal temperature of 160°F

**STEAKS AND ROASTS:** internal temperature of 145°F

**FISH:** until it begins to flake 145°F

**EGGS:** until the yolks are firm 145°F



# End of Life Nutrition Issues

Nutrition goals during palliative care (healthcare that focuses on relieving and preventing the suffering of patients) are individual, with broad goals of maximizing enjoyment and minimizing pain. Feel free to feed your loved one the foods that they enjoy and want to eat. Continue to avoid only the foods that would cause direct harm, such as solid foods to a person with dysphagia.

As end of life approaches, it is natural for the body's need for food and liquids to lessen. How foods and liquids are tolerated and processed also shifts. Since eating and drinking is so fundamental, it is often a complicated, frustrating and misunderstood issue for caregivers. Withdrawing from food and eating does not signal starvation; it is a normal process that is neither uncomfortable nor painful. Eating and drinking can still be encouraged; however, overemphasizing it can be counterproductive. Although it may be difficult to do so, shifting the focus from the amount of food consumed can relieve pressure for everyone involved. Loving care can be demonstrated in ways other than feeding.

Decisions to begin artificial nutrition and hydration (tube feeding) are complicated by concerns of perceived suffering. Have an honest discussion about the benefits and burdens of tube feeding with your medical provider and registered dietitian. Studies have shown that the reduction of hunger and thirst that occur at the end of life can promote comfort during the dying process. There is little evidence that tube feeding prolongs life, increases comfort, or lowers rates of



aspiration pneumonia and other infections. Opting out of tube feeding can be an appropriate decision at the end of life. If a decision is made to start tube feeding, there should also be a time frame determined to evaluate if the goals of the feedings are being met.

The decision to accept or forgo artificial nutrition and hydration should ideally be made in advance. The health care wishes of the person you are caring for should be known and honored. They will speak for a person when he/she cannot speak for him or herself. Knowing the wishes of the affected individual may help reduce the burden on the family and provide optimal care and dignity.



# You, the Caregiver

The journey as a caregiver for a loved one, whether full time or part time, can be extremely rewarding. But it can also be difficult, both physically and emotionally. While focused on providing the best care possible, caregivers frequently neglect their own health. Family caregivers are twice as likely to suffer from depression than the general population. Sleep deprivation is also common among caregivers. The cumulative effects of long-term stress can be damaging to the body.

As odd as it may sound, your first task as a caregiver is to put your needs up front. Healthy caregivers are better able to serve their loved ones. If this is something you are not used to doing, start by taking a look at yourself for signs of exhaustion, depression and illness. Here are some tips for action:

- Schedule time for yourself. You have worked hard and deserve a break! Listen to music, read a book, or watch your favorite television show.
- Look for signs of depression or exhaustion. If you have stopped seeing friends and family, are turning down social invitations, are not sleeping well, feel overwhelmed most of the time or have lost your sense of humor, it may be time to seek professional help.
- Share your feelings. This is not complaining. Join a support group to share your experience with other caregivers.
- Seek help from others. Delegate tasks to family members, friends and neighbors who offer to help.



- Plan “time off.” Investigate opportunities for respite programs with community agencies, religious institutions or a local hospital.
- Don’t forget your own healthcare issues. Keep up with doctors appointments and take medications as prescribed.

As a caregiver, you perform a vital function. While this booklet primarily provides tips on how to care for someone who is ill, it is really a booklet about you – about how to make your life a little easier, while giving you some support in the heroic work you do every day. *Nutrition Tips for Caregivers* presents simple ways to approach different medical conditions and finally urges you to keep your own health in the equation as well. Think of this as a springboard for a most fulfilling and successful role as a caregiver.

# Tracking Health Information

For the Person You Care For

## PERSONAL CONTACT INFORMATION

Name  Phone #

## MEDICAL CONTACT INFORMATION

Primary Care Physician  Phone #

Specialist  Phone #

Dentist  Phone #

Eye Doctor  Phone #

Pharmacy Name  Phone #

## APPOINTMENT CHART

Date	Provider (name)	Reason for visit
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# Resources

## AARP

[aarp.org/home-family/caregiving/](http://aarp.org/home-family/caregiving/)

## Alzheimer's Association

800-272-3900

[alz.org](http://alz.org)

## Alzheimer's Disease Education & Referral

(ADEAR) Center

800-438-4380

[nia.nih.gov/health/alzheimers](http://nia.nih.gov/health/alzheimers)

## Centers for Disease Control and Prevention

[cdc.gov/aging/aginginfo](http://cdc.gov/aging/aginginfo)

## Cook for Your Life

[cookforyourlife.org](http://cookforyourlife.org)

## National Caregivers Library

804-327-1111

[caregiverslibrary.org](http://caregiverslibrary.org)

## Eldercare Locator

800-677-1116

[eldercare.gov](http://eldercare.gov)

## Family Caregiver Alliance

800-445-8106

[caregiver.org](http://caregiver.org)

## Family Caregiver 101

[familycaregiving101.org](http://familycaregiving101.org)

## God's Love We Deliver

800-747-2023

[glwd.org](http://glwd.org)

## Hospice Foundation of America

800-854-3402

[hospicefoundation.org](http://hospicefoundation.org)

## Meals on Wheels Association of America

888-998-6325

[mowaa.org](http://mowaa.org)

## National MS Society

800-344-4867

[nationalmssociety.org](http://nationalmssociety.org)

## Resources for Adaptive Equipment

### AMeds – Home Medical and Supplies &

Equipment

866-802-6337

[ameds.com](http://ameds.com)

### The Alzheimer's Store

800-752-3238

[alzstore.com](http://alzstore.com)

### Best Alzheimer's Products

877-300-3021

[best-alzheimers-products.com](http://best-alzheimers-products.com)

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### *Disclaimer*

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