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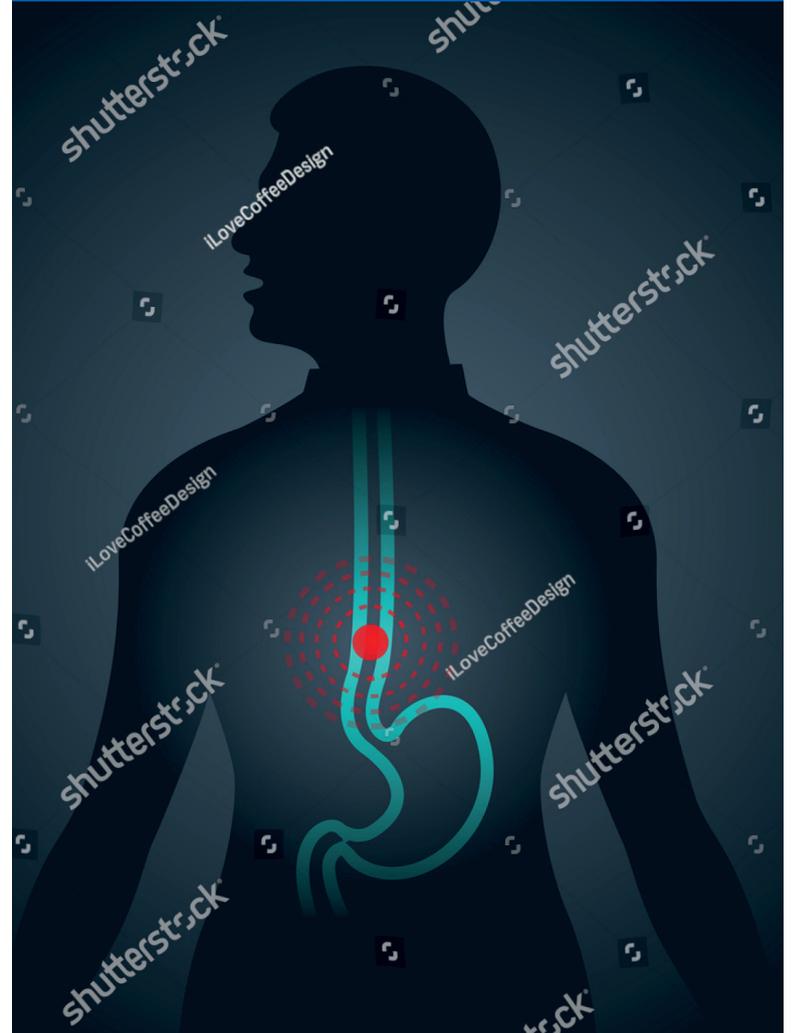
Disclaimer:

This information is intended to educate and create awareness about esophagectomy. It is not a substitute for medical advice. All decisions regarding treatment should be made in consultation with your physician or therapist.

Oct. 2025

UNDERSTANDING ESOPHAGECTOMY

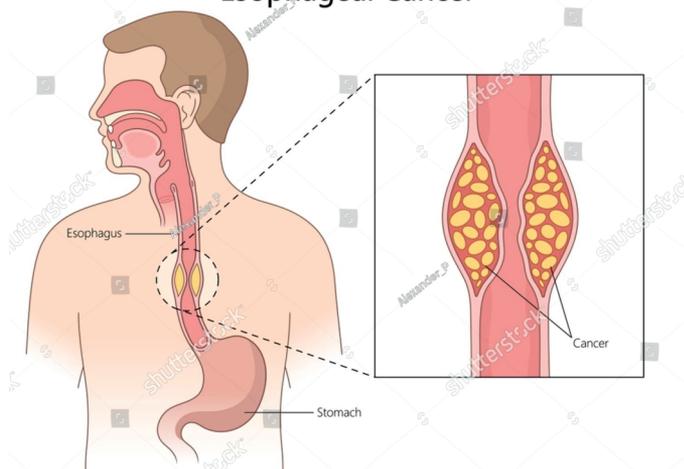
A Patient Information Guide



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Esophageal Cancer



What is an Esophagectomy?

An esophagectomy is a surgical procedure to remove all or part of the esophagus—the food pipe connecting the throat to the stomach.

After the surgery:

- The stomach is moved upward and attached to the remaining esophagus.
- The stomach's size is reduced (it functions as both stomach and esophagus), making it difficult to eat large meals and sometimes limiting tolerance to certain foods.
- Digestive problems like reflux, gas (burping) or chest discomfort may occur after surgery.
- These issues usually improve over time.

Proper nutrition is essential to support healing, prevent weight loss, and manage side effects.

Post-Esophagectomy Diet

General Guidelines

- Eat small, frequent meals (5-6) rich in calories and protein (instead of 3 large meals). Avoid drinking water during or immediately after meals.
- Drink water 10 to 15 minutes after meals (not with meals).
- Continue blenderised diet for 2 weeks after discharge, then gradually transition to a normal diet.

- Eat slowly, chew well, and take small bites.
- Choose soft, moist, easy-to-swallow foods. Avoid food which is sticky.
- Stop eating when you feel full.
- Avoid lying down right after meals (walk or sit for at least 10 minutes).
- Drink adequate fluid. Avoid caffeinated and carbonated fluids between meals. Sip water slowly—gulping may cause temporary difficulty in swallowing in initial period after surgery.
- Finish dinner 2-3 hours before bedtime. Avoid heavy dinners as it can increase chance of reflux.
- If vomiting occurs due to overeating, reduce portion size.
- Jejunostomy feeding tube is kept for minimum of three weeks after surgery. This is to supplement your oral intake in the initial period. Take minimum of two to three feeds through the tube as taught in hospital. Take more [as prescribed] if oral intake is inadequate. Flush the tube with water after every feed.
- For loose stools: reduce Oral nutrition supplement to half of what is prescribed. Diluting the feeds will help reduce loose motions. If it persists take a tablet of Lomofen once. If still persists follow up in OPD.
- For tube blockage: flush with ENO solution.
- Advisable to take multivitamin supplement during the first six months after surgery and longer if required.
- Sleep with two pillows or a wedge-shaped pillow (30° incline) to reduce reflux.
- Sleeping on the side with right chest up may cause excessive reflux.

Common Side Effects & How to Manage Them

Heartburn/GERD

Common due to altered anatomy.

Tips to prevent it:

- Eat sitting in upright position and avoid lying down for at least an hour after meals.
- Avoid tight clothes and bending forwards immediately after meals.
- Do not eat within 2 to 3 hours of bedtime.
- Raise the head of your bed by 6 inches.
- Limit: coffee, tea, cola, acidic foods (tomato, vinegar, citrus), chocolate, fatty/spicy/fried foods, peppermint, very hot/cold foods.

Gas & Bloating

Caused by disrupted digestion or swallowing air.

Avoid: beans, cauliflower, broccoli, cabbage, onions, corn, apples,

avocados, melons, carbonated drinks, straws, chewing gum, and slurping.

Dumping Syndrome

Food moves too quickly into the small intestine, leading to:

- Early symptoms: nausea, cramps, diarrhea (soon after meals)
- Late symptoms: low blood sugar 1–2 hrs after meals (dizziness, sweating, shakiness)

Tips:

- Drink fluids 30–60 min before or after meals, not during.
- Eat small, frequent meals.
- Limit sugars and sweets.
- Prefer high-protein, moderate-fat, low-sugar foods.
- Eat slowly, chew well, and remain relaxed.
- Avoid very hot or very cold foods.
- Keep sugar handy for low blood sugar (giddiness, sweating, tremors).

Food Guide After Esophagectomy

Foods Generally Well Tolerated

Food Group	Examples
Beverages	Lukewarm water, diluted lemon water (no sugar), thin buttermilk, coconut water (unsweetened), herbal teas, jeera water
Grains & Cereals	Dalia (broken wheat porridge), soft suji upma, well-cooked rice, oats, soft phulkas, curd rice, khichdi
Protein	Soft paneer, boiled eggs, moong dal, masoor dal, fish (steamed), mashed legumes, tofu, shredded chicken
Vegetables	Boiled and mashed pumpkin, carrot, lauki (bottle gourd), ridge gourd, potato (boiled), soft cooked gourd vegetables
Fruits	Banana, sapota (chikoo), papaya, stewed apple (peeled), tender guava
Dairy	Low-fat curd, paneer, diluted milk (if tolerated), buttermilk
Snacks	Steamed idli, khichdi, murmura chivda (non-spicy), roasted lotus seeds (makhana), lentil soup, vegetable dal soup

Foods to Avoid

Food Group	Avoid These
Beverages	Carbonated drinks, caffeinated drinks, sweet lassi with malai, packaged fruit juices, fresh fruit/vegetable juices
Grains	Sott bread, paratha, puri, naan, maida products
Protein	Fried meats, spicy gravies, hard or fibrous meat, tandoori preparations
Vegetables	Raw Cauliflower, broccoli, cabbage, raw onions, garlic, tomato-based curries
Fruit	Citrus fruits (orange, lime), pineapple, dried fruits, fruit juices with sugar
Snacks	Fried items (samosa, pakora), namkeen, spicy mixtures, sugar-laden desserts, sweets, bakery products (biscuits, rusk, khari)

Final Tips for a Smooth Recovery

- Maintain a food diary to track symptoms and tolerance.
- Introduce new foods one at a time and monitor how you feel.
- Consult a clinical dietitian for a personalized plan.
- Inform your doctor if you notice persistent nausea, reflux, or weight loss.

Note: Each patient is different and will tolerate different foods. Only you can decide which foods can tolerate well. The most important part to assess is how you feel after eating a food.

OUR TEAM

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Note: It is requested that patients take prior appointment by calling the hospital on 4269 6969.