Nutrition Support in COPD

You have been given this leaflet because you are having difficulty eating, may be losing weight, or becoming weaker.

- Your diet, nutritional and fluid intake are very important when you have COPD
- If you have lost weight don’t worry if you can’t gain it all back, but try to follow some of the nutrition support tips in this leaflet to help maintain your weight

Monitor Your Weight

Weigh yourself monthly if you can, or ask your doctor or nurse to weigh you at your appointments, as your weight is a good indicator of what is happening in your body

- If you are unable to weigh yourself, be aware of visual signs of your weight decreasing, for example jewellery and clothes becoming looser
- If you continue to lose weight or you struggle to eat enough during periods of illness, even if you are overweight, seek advice from your doctor or nurse

Tips for Making the Most of Your Food and Drinks

- Choose full fat or high energy options, e.g. whole milk, in place of ‘low fat’ or ‘diet’ versions
- Whilst fat and sugar are usually recommended in moderation they can help you gain weight, or avoid losing more weight when appetite is poor. Include them in your diet as often as possible as part of meals or snacks
- Examples of high energy snacks include a piece of cheese, a small handful of nuts, a slice of cake/teacake, a slice of toast with jam/peanut butter, a bar of chocolate, a pot of whole milk yogurt/fromage frais/mousse
- Add grated or cream cheese to mashed potato, soups, sauces, scrambled eggs, baked beans
- Add cream to sauces, scrambled eggs, soups, curries, mashed potatoes, desserts and porridge
- Use mayonnaise, salad cream or dressing in sandwiches and on salads
- Add extra butter, margarine or ghee to vegetables, potatoes, scrambled eggs and bread
- Fortify your usual milk: whisk 2-4 tablespoons of milk powder into one pint of milk, use for drinks, on cereals etc
- Add honey, syrup and jams to porridge, milky puddings, on bread, toast or tea cakes
- Take nourishing drinks e.g. smoothies, soups, fruit juice, milkshakes or hot chocolate
- Use convenience foods from the cupboard or freezer, e.g. long life milk, savoury snacks, biscuits, rice puddings, corned beef, baked beans, soups, tinned puddings and custard
- Powdered supplements (ask your pharmacist for further information) are available from most supermarkets and pharmacies and can be used in between meals
- Don’t fill up on drinks before or during your meal
- Eat more of the foods that you enjoy at the times of day when you feel more like eating
- The free leaflet ‘Your Guide to Making the Most of your Food’ contains lots of additional tips and ideas (available from www.malnutritionpathway.co.uk/leaflets-patients-and-carers)

If you feel too tired to shop for, prepare or cook meals:

- Ask family, friends or your carer for help with cooking, shopping or ordering food for home delivery
- Ask to be assessed for a package of care (contact your local social services department)
- Use meals on wheels services or home delivery services offering pre-prepared meals
- Arrange to eat regularly with a friend or family member or attend a local lunch club

Tips for Eating When Short of Breath

You may find it more difficult to swallow and eat enough if you are very short of breath

- It may be easier to eat softer, moist foods at these times, e.g. casseroles, curries, sauces, gravy, milky puddings, fruit smoothies, ice creams
- Aim to eat something 6 times per day, even if it is smaller meals and nutritious drinks or snacks between meals (see tips below)

For more information about living with COPD visit blf.org.uk/COPD or call the British Lung Foundation’s helpline on 03000 030 555
Tips for Coping With a Dry Mouth

Dry mouth can be caused by using oxygen, nebulisers or inhalers. It can make it difficult to chew and swallow foods, and sometimes it can lead to taste changes

- Choose softer or moist foods, e.g. minced beef in shepherd’s pie rather than pieces of dry meat
- Suck fruit sweets, ice lollies made with fruit juice or squash, or chew sugar-free gum
- Your doctor or nurse may prescribe some pastilles or saliva sprays if the problem continues
- If you are finding it difficult to swallow, are frequently coughing during meals or your voice becomes gargly ask your doctor or nurse to refer you to a speech and language therapist who will be able to advise you
- Always make sure you keep your mouth clean and moist to avoid infections. Ask your dentist for advice if needed

Tips for Coping With Taste Changes

If your taste changes you may lose your appetite and may not feel like eating your usual foods

- After using a steroid inhaler rinse your mouth and gargle with water to prevent oral thrush
- Look after your mouth: regularly clean your teeth/dentures, use water and floss
- Focus on the foods you enjoy but don’t be afraid to try new foods
- Try sharp or spicy or sugary foods, as they have a stronger taste
- Experiment with different seasonings and sauces
- If you go off a particular food, try it again regularly as your tastes may continue to change

Oral Nutritional Supplements (Nutrition Drinks)

If you are struggling to eat enough you may be given an oral nutritional supplement to try. It is recommended that if you have COPD and a low body mass index (BMI of less than 20kg/m²) your GP or Dietitian should prescribe you oral nutritional supplements

- Oral nutritional supplements provide extra energy, protein, vitamins and minerals and are usually taken in addition to your normal diet, unless advised they should not replace food, drinks or meals
- Your GP or Dietitian will tell you how many to take each day
- There are a range of types and flavours available (e.g. ready-made drinks, powders to be made up with fresh milk, savoury, puddings, milk, juice or yogurt styles). Discuss your preferences with your GP or Dietitian and find one you enjoy taking
- Some oral nutritional supplements contain more of certain nutrients, which may be helpful for some people with COPD (e.g. extra protein or energy)
- Some supplements are available in a smaller bottle, which may be easier to manage if you are breathless, have a poor appetite or struggle to eat or drink large amounts
- If taking part in pulmonary rehabilitation, you may need extra energy in your diet, or oral nutritional supplements to avoid losing weight – ask your healthcare professional for further advice
- If you are prescribed oral nutritional supplements you will be monitored. You may not need them all of the time – perhaps only after a set back with your disease or another illness
- More advice on oral nutritional supplements can be found in the free leaflet ‘Nutrition Drinks – Advice for patients and carers’ (available from www.malnutritionpathway.co.uk/files/uploads/Nutrition_Drinks_2014.pdf)

Eating and Physical Activity in COPD

It is very important to keep as active as possible to help your lungs and the rest of your body to stay strong. Ask your doctor or nurse for more advice

- Make sure you have high energy snacks throughout the day if you are becoming more active
- Activity does not have to be strenuous – try gentle exercise such as walking or cycling and ask about local activity programmes