



**Royal Berkshire**  
NHS Foundation Trust

# Dietary advice for pancreatic disease

## Information for patients

Name \_\_\_\_\_

Your Dietitian \_\_\_\_\_

Dietitian contact number: 0118 322 7116

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This leaflet is for patients diagnosed with pancreatitis and gives advice on what to eat and what to avoid eating in order to control your symptom.

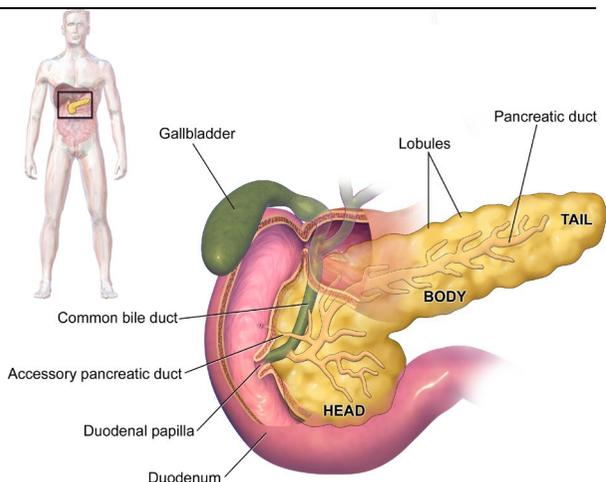
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## The pancreas

The pancreas is an organ which plays a major role in the digestion and absorption of food and nutrients. It produces enzymes to help digest your food, and hormones such as insulin, that are released directly into the bloodstream to help your

body absorb nutrients from the food.

Pancreatitis occurs when your pancreas is inflamed; it can last for a short period (acute pancreatitis) or for a long time (chronic pancreatitis). Common causes are gallstones blocking the bile duct and drinking too much alcohol. Pancreatitis can cause weight loss, steatorrhoea (fatty stools), and difficulty managing blood sugar levels.



Picture courtesy of Blausen 0699 Pancreas Anatomy2.png ([www.redtiger.com](http://www.redtiger.com))

## Acute pancreatitis

Symptoms of acute pancreatitis include: feeling or being sick, diarrhoea, indigestion, a high temperature, yellowing of the skin and eyes (jaundice), tenderness or swelling of the tummy and fast heartbeat (tachycardia).

Acute pancreatitis is commonly caused by problems with the bile duct and alcohol abuse.

Mild to moderate acute pancreatitis can last 5-7 days with little or no effect on your nutritional balance. If your symptoms continue however, it could lead to malnutrition, as you may not be able to eat and drink

enough to meet your increased nutritional requirements. Your clinical team may then recommend you taking nutritional supplements (discussed later on).

### Acute pancreatitis and diet

You may have trouble digesting some kinds of fat so your doctor might suggest that you change to a low-fat diet; however, this is not recommended without dietetic supervision. Plenty of fresh fruit and vegetables, whole grains (found in wholemeal bread, brown rice and oats) are recommended. You should gradually be able to reintroduce fat in the diet as your symptoms improve or pancreatic enzyme replacement therapy (PERT) may be suggested.

### Chronic pancreatitis

Symptoms of chronic pancreatitis include: pain in the upper belly that spreads into the back or belly pain that gets worse when you eat or drink alcohol, diarrhoea or oily stools (poo), nausea and vomiting and weight loss.

Chronic pancreatitis occurs when there is permanent damage to the pancreas, meaning that your body may no longer be as efficient at absorbing nutrients from food and drink. Your requirements for energy and protein will be higher than normal, so it is likely you will need to adapt your diet to accommodate this.

Your pancreas is responsible for producing insulin and enzymes that help break down food and drinks. If the head (top) of the pancreas is damaged, it may result in pancreatic exocrine insufficiency (PEI) or nutrient malabsorption. This can lead to malnutrition causing bone weakening diseases, and vitamin deficiency, which could lead to further complications.

If the tail (bottom) of the pancreas is damaged, your body may no longer be able to produce enough insulin (the hormone that helps your body maintain good blood sugar levels), meaning that you might then need insulin therapy.

## Chronic pancreatitis and diet

A low fat diet is not recommended and you should aim for a healthy and balanced diet to provide you the right amounts of vitamin and minerals. If your symptoms include weight loss you need to enrich your food or the dietitian will prescribe you ONS (Oral Nutritional Supplements) to boost your energy. If you are not eating well, a daily over-the-counter multi-vitamin and mineral supplement may also help. Your doctor or dietitian can advise which ones to buy.

## A balanced diet: foods and their food groups

A balanced diet contains foods from each of the following five food groups, in the correct proportions. This will mean your body gets all the nutrients that it needs.

### Potatoes, bread and cereals

Include with every meal and snack. It is recommended that you eat 7-14 portions per day. One portion includes one of the following:

- 2-4 tablespoons (tbsp) cereal
- 1 slice of bread.
- 2-3 crispbreads or crackers.
- 2-3 tbsp rice, pasta or mashed potato.
- 2 new potatoes or half a baked potato



### Fruit and vegetables

Aim for five portions per day. A portion includes one of the following:

- Banana or apple.
- 1 slice of melon.
- 2 plums.
- 1 small glass fruit juice or smoothie.
- 1 handful of grapes.
- 1 cereal bowl of salad.



- 3 heaped tbsp of vegetables.

## Meat, fish, eggs and alternatives

Have 2-3 servings daily. Alternatives include beans and pulses but avoid large portions of these if you find that they upset you or cause bloating. A serving includes one of the following:

- 2-3 oz (60-85g) meat, poultry or vegetarian alternative
- 4-5 oz (120-140g) fish
- 2 eggs
- 2 tbsp nuts
- 3 tbsp beans, lentils



## Dairy products

Try to have 3 portions of milk, cheese and yoghurt daily. Use full fat products if your appetite is poor or you are trying to gain weight. A portion of dairy includes one of the following:

- $\frac{1}{3}$  pint of milk.
- Small pot yoghurt.
- 2 tbsp cottage cheese.
- 1½ oz (40-45g, matchbox size) cheese.



## Foods containing fat and sugar

These include cooking and spreading fats, sugar, cakes, biscuits, crisps and so on. Eat more of these if your appetite is poor or if weight gain is desired. Snacks between meals are a good idea and suitable snacks include:

- Yoghurt and fruit.
- Small sandwich or cake.
- Cereal with full fat milk.
- Cheese and biscuits.



## Food fortification and nutritional supplements

If you have lost weight, or continue to lose weight you may be told to enrich your food. We would recommend that you choose high protein options from the hospital menu or if you are at home, we will discuss how to fortify your food.

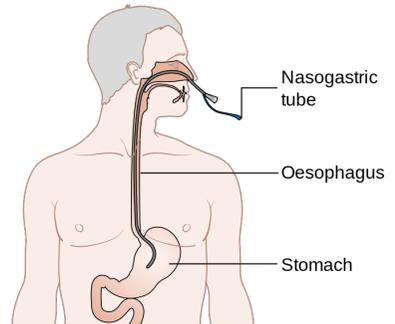


If you are unable to eat a healthy balanced diet, then the dietitian will consider prescribing you ONS which will help you to improve your nutrition and meet nutritional requirements.



## Supplementary enteral tube feeding

If you are unable to meet your nutritional requirements by eating and drinking as normal during your hospital stay, artificial tube feeding may be needed. Your body needs a higher amount of energy, protein and other nutrients when you have pancreatic disease.



To help with this, a naso-gastric (NG) or naso-jejunal (NJ) tube may be placed down your nostril and into your stomach/small intestine, so that a liquid feed can be given as a supplement to whatever food and drink you are able to manage normally.

## Alcohol

If you have been diagnosed with acute pancreatitis you should avoid alcohol completely for at least 6 months, whatever the cause of the pancreatitis. This is because alcohol can cause further damage to the pancreas during the recovery period. If you have chronic pancreatitis, aim to cut out alcohol permanently because this will stop any further damage to your pancreas.

## Pancreatic Enzyme Replacement Therapy (PERT)

If your stools have become very loose and fatty, float and difficult to flush, you may need to have PERT. PERT capsules are synthetic enzymes to help your body absorb nutrients, such as fat and protein. You need to take them with all nutritious food and drinks and your doctor or dietitian will discuss how to use them, if you need them.

A low-fat diet is not recommended (chronic pancreatitis), as this means that you may become low in essential fat-soluble vitamins that your body needs to function properly. As your nutritional requirements are high, cutting fat out of your diet will make it difficult for you to meet these, as your appetite may be poor.

The recommended dosage of \_\_\_\_\_:

\_\_\_\_\_ units per meal ( \_\_\_ x \_\_\_\_\_ capsule/g)

\_\_\_\_\_ units per snack ( \_\_\_ x \_\_\_\_\_ capsule/g)

\_\_\_\_\_ units supplement drink ( \_\_\_ x \_\_\_\_\_ capsule/g)

Remember to take these tablets before each meal. If you have multiple tablets to take and are planning on eating a main meal and a pudding, you can split the dose so that you can take half before the main meal and half before your pudding.

If your symptoms do not improve despite taking PERT correctly, try the following:

1. Increase your PERT dose by one capsule per meal/snack.
2. Repeat this after three days if no symptom improvement.
3. If symptoms continue, speak to your GP about a type of medication called a proton pump inhibitor (PPI), as this may help to reduce the stomach acid and in turn increase the effectiveness of PERT.
4. If symptoms don't get better, speak to your GP as tests can be arranged to check for other digestion problems.

## Diabetes

Diabetes, known as Type 3c diabetes, may result from pancreatic disease. When the pancreas is damaged or inflamed it produces little or no insulin. This means that your blood sugar levels will be poorly controlled and you may need to give yourself insulin. This will be discussed with you if it is needed.

If you have previously been diagnosed with Type 2 diabetes, which you managed with diet or oral medication, keep an eye on your blood sugar readings as you may now require insulin and support from the Diabetic Specialist Team to manage this.

### Notes:

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