After Stomach Cancer Treatment

Get information about how to live well after stomach cancer treatment and make decisions about next steps.

Living as a Cancer Survivor

For many people, cancer treatment often raises questions about next steps as a survivor.

- Living as a Stomach Cancer Survivor

Living as a Stomach Cancer Survivor

- Follow-up care
- Ask your doctor for a survivorship care plan
- Help with nutrition issues
- Keeping health insurance and copies of your medical records
- Can I lower my risk of stomach cancer progressing or coming back?
- Could I get a second cancer after treatment?

For some people with stomach cancer (also known as gastric cancer), treatment can remove or destroy the cancer. The end of treatment can be both stressful and exciting. You may be relieved to finish treatment, but it’s hard not to worry about cancer coming back. This is very common if you’ve had cancer.
For other people, the cancer might never go away completely. Some people may get chemotherapy, targeted therapy, or other treatments to try to keep the cancer in check for as long as possible and to prevent or limit any problems it might cause. Learning to live with cancer that does not go away can be difficult and very stressful.

Life after stomach cancer means returning to some familiar things and making some new choices.

**Follow-up care**

Even if you have completed treatment, your doctors will still want to watch you closely. It’s very important to go to all of your follow-up appointments. During these visits, your doctors will ask questions about any problems you are having and may do exams and lab or imaging tests to look for signs of stomach cancer or treatment side effects.

Almost any cancer treatment can have side effects. Some might only last for a short time, but others can last longer. Your doctor visits are a good time for you to ask questions and talk about any changes, problems, or other concerns you have.

If you have finished treatment, most doctors recommend follow-up visits every 3 to 6 months for the first few years, then less often after that. These visits usually include a physical exam and review of any symptoms you’re having. Lab tests and other exams such as upper endoscopy might also be done or ordered at this time. Imaging tests such as CT scans are not usually needed at each visit, but they might be done if you have any suspicious symptoms or physical findings on exam.

**Ask your doctor for a survivorship care plan**

Talk with your doctor about developing a survivorship care plan for you. This plan might include:

- A suggested schedule for follow-up exams and tests
- A schedule for other tests you might need in the future, such as early detection (screening) tests for other types of cancer, or tests to look for long-term health effects from your cancer or its treatment
- A list of possible late- or long-term side effects from your treatment, including what to watch for and when you should contact your doctor
- Diet and physical activity suggestions
- Reminders to keep your appointments with your primary care provider (PCP), who will monitor your general health care
Help with nutrition issues

For many people, stomach cancer and its treatment can affect how they eat and absorb nutrition. Nausea can be a problem during and after some treatments, and some people lose their appetite (as well as some weight). People also often find they need to change the way they eat, such as eating smaller, more frequent meals instead of a few larger ones each day.

Your cancer care team may refer you to a dietitian, an expert in nutrition, who can help you adjust to changes in your eating habits and can give you ideas on how to deal with some of the nutrition issues that might arise from the cancer or its treatment.

If you have lost or are losing weight, or if you are having trouble eating, do the best you can. Eat what appeals to you. Eat what you can, when you can. You might find it helps to eat small portions every 2 to 3 hours until you feel better. Try to keep in mind that these problems usually improve over time.

If part or all of your stomach has been removed, you might need to eat smaller amounts of food more often. Your doctor or dietitian may also recommend that you stay upright for some time after eating. Your health care team can help you adjust your diet if you are having problems eating.

Some people with stomach cancer have problems with nausea, diarrhea, sweating, and flushing after eating. This is called dumping syndrome. When part or all of the stomach is removed, the food that is swallowed quickly passes into the intestine, leading to these symptoms after eating. These symptoms often get better over time, although some people might still need to take medicines to help with long-term diarrhea.

People who have had surgery — especially if they had the upper part of their stomach removed (in either a subtotal or total gastrectomy) — will probably need to have blood work done regularly to check their vitamin and mineral levels. Some people might need vitamin supplements, which could include B12 injections. (The pill form of vitamin B12 isn’t absorbed into the body if the upper part of the stomach has been removed.)

Some people may need additional help to make sure they get the nutrition they need. For example, some people might need nutritional supplements. Some people may even need a feeding tube, called a jejunostomy tube (or J-tube), put into the small intestine. This is done through a small hole in the skin over the abdomen during a minor operation. A J-tube allows liquid nutrition to be put directly into the small intestine to help prevent weight loss and improve nutrition. Less often, the tube may be placed into
the lower part of the stomach instead. This is known as a **gastrostomy tube** or **G-tube**.

**Keeping health insurance and copies of your medical records**

Even after treatment, it’s very important to keep health insurance. Tests and doctor visits cost a lot, and even though no one wants to think of their cancer coming back, this could happen.

At some point after your cancer treatment, you might find yourself seeing a new doctor who doesn’t know about your medical history. It’s important to keep copies of your medical records to give your new doctor the details of your diagnosis and treatment. Learn more in [Keeping Copies of Important Medical Records](#).

**Can I lower my risk of stomach cancer progressing or coming back?**

If you have (or have had) stomach cancer, you probably want to know if there are things you can do that might lower your risk of the cancer growing or coming back, such as exercising, eating a certain type of diet, or taking nutritional supplements. Unfortunately, it’s not yet clear if there are things you can do that will help.

Eating a diet rich in fruits and vegetables, staying at a healthy weight, getting regular physical activity, and avoiding or limiting alcohol are all linked with a **lower risk of getting stomach cancer**. But we don’t know if these types of changes affect the risk of cancer progressing or coming back. However, we do know that they can have positive effects on your health that can extend beyond your risk of cancer.

Tobacco use has clearly been linked to stomach cancer, so not smoking might help reduce your risk. We don’t know for certain if this will help, but we do know that it can help improve your appetite and overall health. It can also reduce the chance of developing other types of cancer. If you want to quit smoking and need help, call the American Cancer Society at 1-800-227-2345. You can also learn more in our [Guide to Quitting Tobacco](#).

**About dietary supplements**

So far, no **dietary supplements** (including vitamins, minerals, and herbal products) have been shown to clearly help lower the risk of cancer progressing or coming back. This doesn’t mean that no supplements will help, but it’s important to know that none have been proven to do so.
Dietary supplements are not regulated like medicines in the United States – they don’t have to be proven effective (or even safe) before being sold, although there are limits on what they’re allowed to claim they can do. If you’re thinking about taking any type of nutritional supplement, talk to your health care team. They can help you decide which ones you can use safely while avoiding those that might be harmful.

**If the cancer comes back**

If the cancer does recur at some point, your treatment options will depend on where the cancer is located, what treatments you’ve had before, and your health. For more information on how recurrent cancer is treated, see Treatment Choices Based on the Extent of Stomach Cancer.

For more general information on recurrence, you may also want to see Understanding Recurrence.

**Could I get a second cancer after treatment?**

People who’ve had stomach cancer can still get other cancers. They do not get second cancers at an increased rate overall, but they do seem to have an increased risk of cancers of the thyroid and small intestine.

Experts do not recommend any additional testing to look for second cancers in people who’ve had stomach cancer. Still, it’s important to let your doctor know about any new symptoms or problems you have, because they could be caused by the stomach cancer coming back, or by a new disease or second cancer.

Like other people, survivors of stomach cancer should follow the American Cancer Society guidelines for the early detection of cancer and stay away from tobacco products, which increase the risk of many types of cancers.

To help maintain good health, survivors should also:

- Get to and stay at a healthy weight.
- Stay physically active and limit time spent sitting or lying down.
- Follow a healthy eating pattern that includes plenty of fruits, vegetables, and whole grains, and that limits or avoids red and processed meats, sugary drinks, and highly processed foods.
- Avoid or limit alcohol. If you do drink, have no more than 1 drink per day for women or 2 per day for men.
These steps may also lower the risk of some other health problems.

See Second Cancers for more information about causes of second cancers.

Hyperlinks


References


Written by


Our team is made up of doctors and oncology certified nurses with deep knowledge of cancer care as well as journalists, editors, and translators with extensive experience in medical writing.

American Cancer Society medical information is copyrighted material. For reprint requests, please see our Content Usage Policy (www.cancer.org/about-us/policies/content-usage.html).