

ASPECTOS NUTRICIONALES Y EJERCICIO FÍSICO EN CÁNCER DE PULMÓN



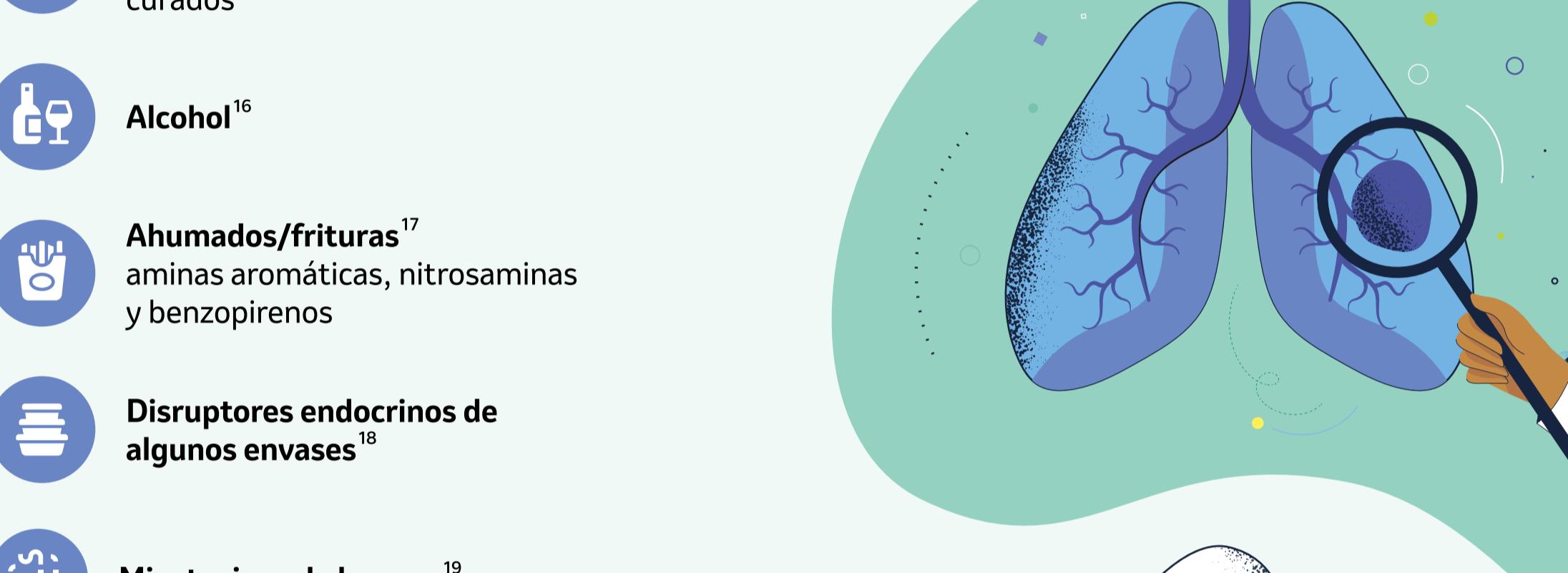
A medida que aumenta la duración de la supervivencia en oncología es importante identificar intervenciones que también mejoran la calidad de vida promoviendo conductas de estilo de vida saludable como la realización de ejercicio físico regular y una dieta saludable¹

La nutrición es un factor clave importante en la prevención y tratamiento del cáncer de pulmón²



Es recomendable la identificación y tratamiento precoz de la malnutrición para mejorar el pronóstico y la calidad de vida de los pacientes³

Una dieta antiinflamatoria individualizada podría evitar la aparición y/o progresión del tumor⁴⁻⁹

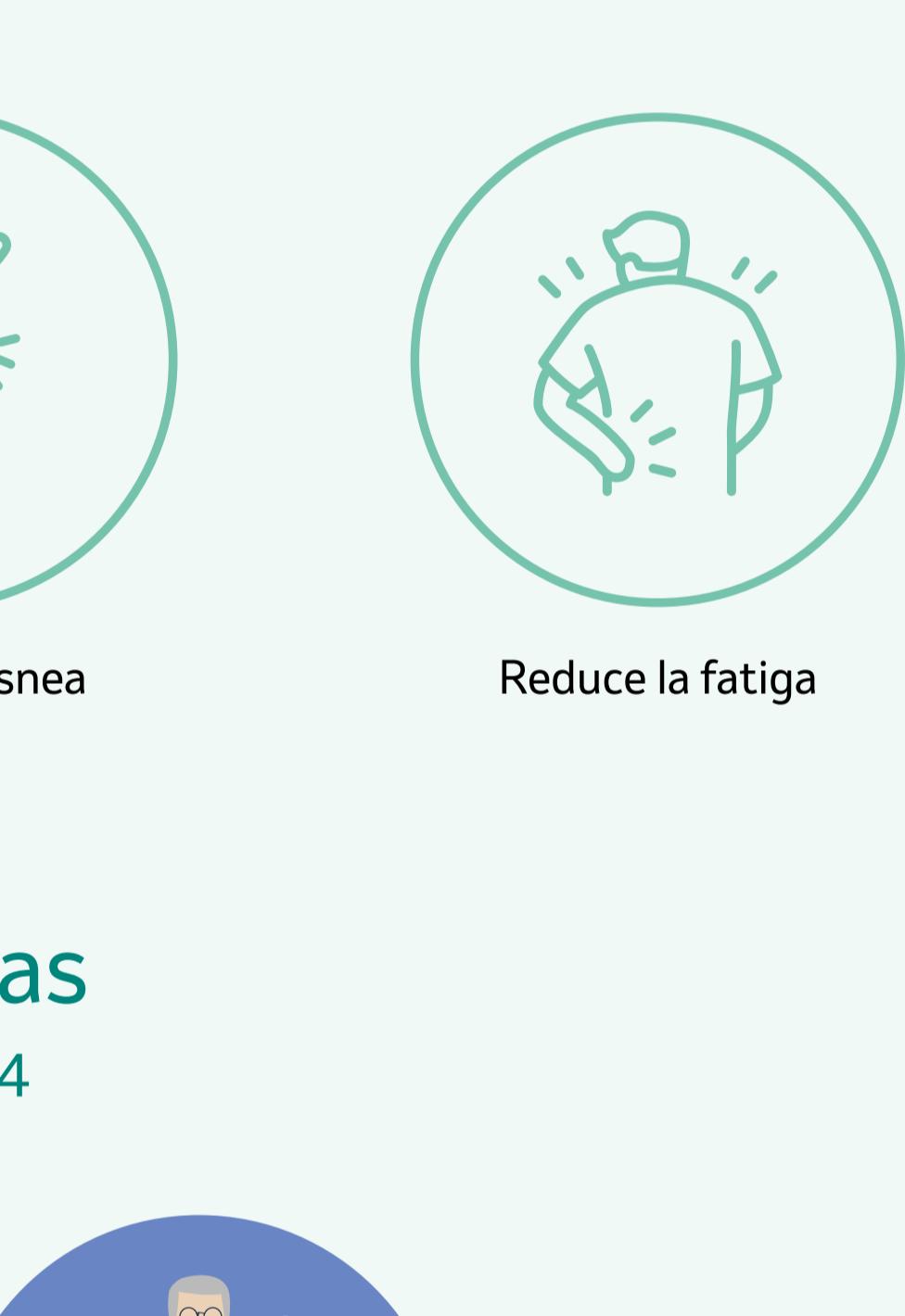


* El estudio sugiere posible asociación de beneficio solo en hombres, requiriendo más investigación para demostrar correlación también en mujeres.

Algunos componentes de los alimentos podrían estar relacionados con un efecto anticancerígeno¹¹⁻¹⁴

¿Sabías que...?

Existe una fuerte asociación entre la inflamación y la formación, progresión y pronóstico de los pacientes con cáncer de pulmón¹⁰

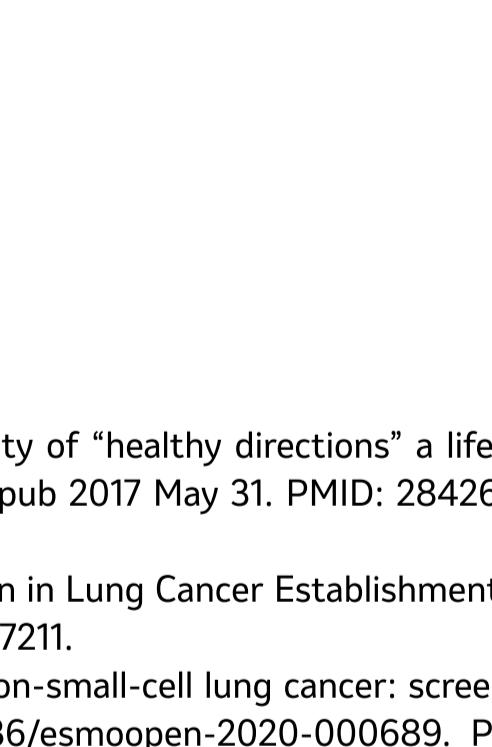


Componentes de la dieta relacionados con la progresión tumoral¹⁵⁻²⁰

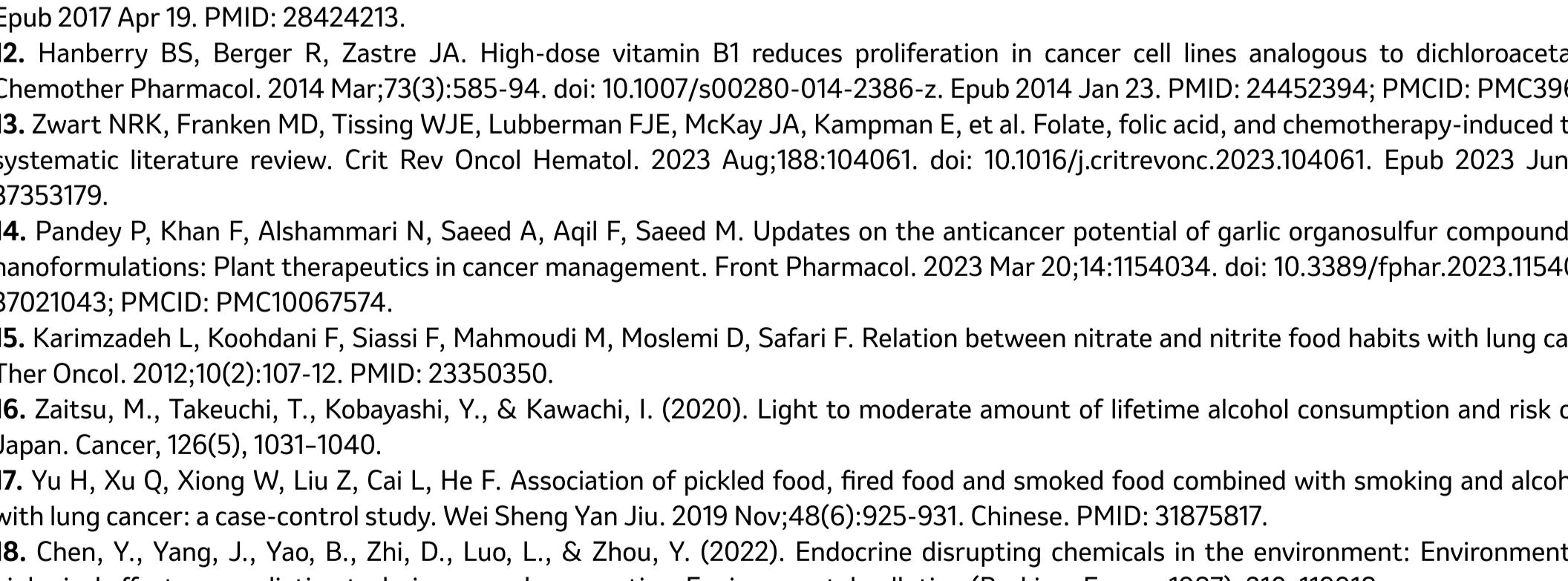
- Derivados cárnicos en exceso¹⁵: presencia de nitratos/nitritos en productos curados
- Alcohol¹⁶
- Ahumados/fruturas¹⁷: aminas aromáticas, nitrosaminas y benzopirenos
- Disruptores endocrinos de algunos envases¹⁸
- Micotoxinas de hongos¹⁹



La actividad física está relacionada con la inhibición o desaceleración del cáncer de pulmón^{20,21}



Actividad física regular: efectos antiinflamatorios^{20,21}

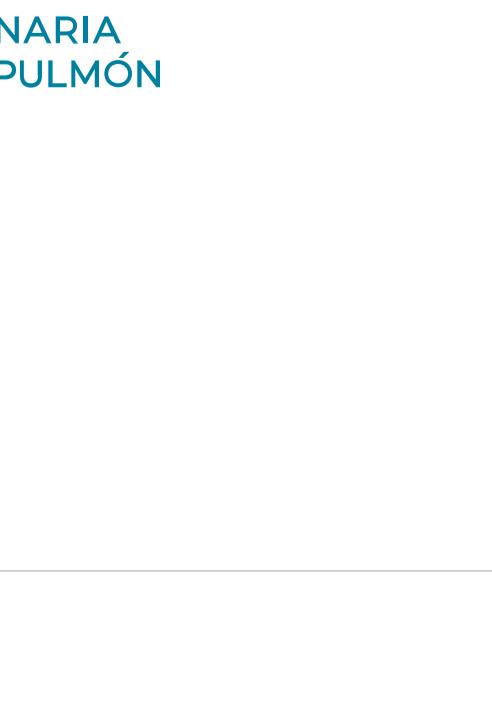


Reduce el dolor Reduce la disnea Reduce la fatiga

Ejercicios recomendados tras sesiones de tratamiento²¹⁻²⁴

- Ejercicios de respiración: Puede ayudar a mejorar la capacidad pulmonar y controlar la disnea
- Duración
- Ejercicio aeróbico: Caminar/Bicicleta/Baile/Yoga/Natación
- Intensidad progresiva

El papel de enfermería de calidad puede acelerar significativamente la recuperación de la función respiratoria en pacientes con cáncer de pulmón^{25,26}



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