

INPLASY

INPLASY2026100025

doi: 10.37766/inplasy2026.10.0025

Received: 6 October 2026

Published: 6 October 2026

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Current dietary guidelines and recommendations in managing dietary challenges in individuals who have undergone treatment for colorectal cancer: a scoping review protocol

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ADMINISTRATIVE INFORMATION**Support** - Flinders Foundation Seed Grant.**Review Stage at time of this submission** - The review has not yet started.**Conflicts of interest** - None declared.**INPLASY registration number:** INPLASY2026100025**Amendments** - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 6 October 2026 and was last updated on 6 October 2026.**INTRODUCTION**

Review question / Objective What are the current dietary guidelines and recommendations in managing dietary challenges for individuals who have undergone treatment for colorectal cancer (CRC)? What is the consistency and clarity of dietary and nutritional support messaging across these guidelines?

Background CRC remains one of the major causes of morbidity and cancer-related death, worldwide. Recurrence of CRC is the main concern for individuals who have undergone treatment for CRC. Evidence has shown that lifestyle, specifically dietary interventions or modifications can reduce the incidence of CRC recurrence and improve the prognosis, survival, and quality of life. Individuals who have undergone treatment for CRC also face several significant challenges, including persistent bowel symptoms (such as diarrhea, constipation, urgency, incontinence, and flatulence), limited and inconsistent dietary

guidance and poor adherence to dietary recommendations.

Rationale Existing dietary guidelines are generalised for overall cancer patients and do not adequately address the unique needs of people affected by CRC and with a significant bowel resection as part of the CRC treatment. Therefore, there is a need to synthesise the existing evidence on dietary guidance tailored to the unique challenges faced by individuals who have undergone treatment for CRC.

METHODS

Strategy of data synthesis A comprehensive search will be conducted across key databases and sources, including Cochrane Library, Medline, Scopus, CINAHL and Google Scholar. Grey literature (unpublished) and government publications in websites will also be reviewed. Search terms will include combinations of relevant key words such as: "colorectal cancer", "nutritional/dietary guidelines", "dietary

recommendations", "cancer survivorship nutritional care", and "nutrition/dietary support" as well as using MeSH terms. For searching databases, the MeSH terms and key words will be used both independently and in combination through Boolean operators, such as "OR", "AND", or "NOT". Searched dietary guidelines and /or recommendation will be exported to endnote for duplicate management and then to Covidence for screening.

Eligibility criteria The review will include available nutritional guidelines for individuals who have undergone treatment for CRC. All relevant dietary guidelines for cancer survivors, as well as major international guidelines from: World Cancer Research Fund, American Institute for Cancer Research, National Cancer Institute, European Society for Clinical Nutrition and Metabolism and American Cancer Society will be included. Grey literature and government publications will also be reviewed. The inclusion criteria will be based on the population, concepts (intervention and /or phenomena of interest and outcome), and contexts approach. Participants/population: Guidelines will be summarised for three survivor groups: patients undergoing active treatment, survivors within five years post-treatment and long-term survivors (more than five years post-treatment). The concept will be to assess dietary recommendation or guideline, such as a healthy diet, nutritional supplements or advice on alcohol consumption. Finally, the context element of this review will be to identify the global dietary guidelines and/or dietary recommendations without geographical location, racial or gender-based and healthcare setting or health system restrictions.

Source of evidence screening and selection The review will follow the Joanna Briggs Institute (JBI) Manual for Evidence Synthesis: Scoping Reviews framework. The review will be in corresponding with the Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist. Source selection both at title/abstract screening and full-text screening will be conducted by at least two independent reviewers. Management of the source selection will be held using an online Covidence software. Any disagreements between two reviewers will be solved by consensus or by the decision of a third senior reviewer (MMW and ELS).

Data management A data extraction table, charting table, will be prepared or reproduced based on the JBI protocol form in Microsoft Excel for data management. At least two independent

reviewers (MDM, AD and MMA) will extract relevant information from the final data included dietary guidelines or recommendation. Key information such as name of first author, title/aim, country, year of publication, setting, study participants characteristics (number of participants, age, sex, selection criteria, not included in the guideline), specified dietary items or groups recommendation, and any relevant pieces of information will be collected. Disagreements will be resolved by consensus or discussion with the senior reviewer (MMW).

Reporting results / Analysis of the evidence A narrative synthesis will be conducted to compare and contrast the content, scope, and consistency of the guidelines. The analysis will focus on identifying patterns, gaps, and areas of alignment or divergence across sources.

Presentation of the results Results will be presented in graphical, tabular, and/or descriptive formats.

Language restriction Only guidelines or recommendations prepared in English or originally translated to English by someone else will be included as the reviewer team did not have funds for language translation purpose.

Country(ies) involved Australia.

Keywords colorectal cancer; nutritional/dietary guidelines; dietary recommendations; cancer survivorship nutritional care; and nutrition/dietary support.

Dissemination plans Findings will be presented in conferences. Manuscript will be prepared for publication in peer-reviewed journals.

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