



NUTRITIONAL RISK ASSESSMENT IN ONCOLOGY PATIENT

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Background and aims

Hospital malnutrition overall prevalence is still an issue of grave concern. Therefore, it's crucial to conduct an efficient and early nutritional risk assessment. This appears essential in the oncology setting, where it's estimated that one third of patients is malnourished at the time of cancer diagnosis. The main objective of this research was comparing different validated tools for the detection and management of nutritional risk in a center Oncology Unit (Santa Maria Nuova Hospital, Florence, Italy).

Methods

The study sample involved 76 cancer patients, who were assessed both with the Malnutrition Universal Screening Tool (MUST) and the Patient-generated Subjective Global Assessment Short Form (PG-SGA SF). The results have been subsequently compared with Patient-generated Subjective Global Assessment (PG-SGA), which represents the gold standard for nutritional assessment in cancer patients.

Results

The study evaluates sensibility, specificity, ROC curve and related AUC for each test. PG-SGA SF shows higher sensibility (95%) and higher AUC=0.9250 compared to the MUST, which results show lower sensibility (38%) and most of all underestimate nutritional risk in almost 63% of patients.

Conclusions

In conclusion, malnutrition in the Oncology setting can only be reliably prevented and successfully treated through screening tools which early identify nutritional risk. The study results suggests that the PG-SGA SF is a valuable tool for early detection of malnutrition whereas in fact the MUST is likely to underestimate nutritional risk in cancer outpatients.

Bibliography

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