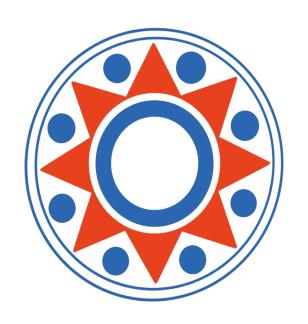




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PREVENTION OF CACHEXIA IN CANCER PATIENTS IN FOLLOW-UP AT THE DIETETICS AND CLINICAL NUTRITION SERVICE OF THE IVREA HOSTPIAL (ASL TO4)

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Background and aims

According to the Espen guidelines, malnutrition affects 20-70% of cancer patients and causes death in 10-20% of cases.

Nutritional therapy plays a crucial role in multimodal cancer care.

For this reason, the aim of this study was to evaluate:

- 1) Nutritional risk
- 2) Nutritional needs and methods of intervention
- 3) Effectiveness of the treatment after 1-3-6 months

Materials and methods

The sample was affected by solid tumors with a high risk of malnutrition. Dietitian assessed nutritional risk (MST) and sarcopenia (Sarc-F Questionnaire and Handgrip), body composition (BIA) and GLM criteria at T0-T1-T2-T3

All patients received individualized nutritional counseling and, if necessary, medical nutrition (ONS/EN/PN).

Results

13 patients /46% men and 54% women) with a mean age of 69 years were enrolled for the study. The types of cancer included in this study were: head and neck cancer (54%), stomach cancer (15%), liver cancer (8%), pancreas cancer (8%), lung cancer (8%), esophagus cancer (8%). At TO 61.5% of patients had a moderate or severe nutritional risk. 100% of the patients received individualized nutritional counseling: 85% received ONS; 23% received

EN/PN.

Only 17% of the sample finished follow-up.

Nutritional support was effective in maintaining body weight and strength and muscle mass for 50% of patients. For the other 50% it was not possible to collect further data.

Conclusions

Personalized nutritional support is effective in maintaining weight, strength and muscle mass in cancer patient.

