



Brief report

Awareness and consideration of malnutrition among oncologists: Insights from an exploratory survey



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ABSTRACT

Objectives: The attitude toward malnutrition varies considerably among oncologists and many malnourished cancer patients receive inadequate nutritional support. The aim of this brief report was to report the results of the exploratory national survey conducted by the Italian Society of Medical Oncology (AIOM) and the Italian Society of Artificial Nutrition and Metabolism (SINPE) before publication of a consensus document aimed at evaluating current attitudes toward malnutrition and management of nutrition, among Italian medical oncologists.

Methods: Between January and July 2015, the AIOM and the SINPE conducted a national web-based exploratory survey to investigate the attitude of oncologists toward malnutrition, and the management of nutritional support, before publication of an intersociety consensus document.

Results: Of the 2375 AIOM members, 135 (5.7%) participated in the survey, with a satisfactory distribution across all Italian regions. Nutritional assessment and support were routinely integrated into patient care for 38 (28%) responders. According to 66 (49%) participants, nutritional assessment was carried out only at the patients' request ($n = 62$), or not at all ($n = 4$). Availability of clinical nutritionists was reported by 88 (65%) participants. For 131 responders (97%), nutritional status was decisive ($n = 63$) or often crucial ($n = 68$) in assessing whether anticancer treatment was practicable or would be tolerated.

Conclusions: The low response rate may reflect the lack of awareness and consideration of nutritional issues among Italian oncologists. Although malnutrition and nutritional support seemed to be perceived by the responders as relevant factors for the efficacy of oncologic treatments, it seems that nutritional care practices may well be inappropriate. The lack of collaboration between oncologists and clinical nutritionists may be the first obstacle to overcome. Educational intersociety initiatives aimed at improving nutritional support management for cancer patients in Italy appear urgently needed.

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Introduction

Malnutrition is an overlooked yet frequent problem in cancer patients that is associated with a higher degree of treatment-related toxicity, a reduced response to treatment, an impaired quality of life, and a worse overall prognosis [1,2].

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Despite the availability of international guidelines for nutritional support in cancer patients [3–5], the attitude toward this issue varies considerably among oncologists [6], and many malnourished patients do not receive adequate nutritional support [7]. Another issue that may hamper the appropriate nutritional care of cancer patients is the expanding market of “alternative” hypocaloric anticancer diets, which are not supported by any scientific evidence and which may lead to insufficient protein-calorie intake.

The Italian Association of Medical Oncology (AIOM) and the Italian Society of Artificial Nutrition and Metabolism (SINPE) recently published an intersociety consensus document that provides practical recommendations for the appropriate nutritional approach for cancer patients [8]. The present article reports the results of the exploratory national survey conducted by the two societies before publication of the consensus document, aimed at evaluating current attitudes toward malnutrition and management of nutrition, among Italian medical oncologists.

Methods

A panel of experts from AIOM and SINPE, who are listed among the authors, developed a 15-item web-based multiple-choice questionnaire. A formal invitation to participate in the survey was sent via email to the 2375 oncologist AIOM members in January 2015. Data were anonymously collected from January to July 2015 through the AIOM-dedicated website.

The questions, beyond those regarding responders' age and career position, and the oncology units' characteristics, were broadly classified into four major domains:

1. The identification of malnutrition;
2. The importance of nutritional status and support;
3. The management of nutritional support; and
4. Possible strategies for improving nutrition.

The descriptive statistical analyses were carried out in September 2015.

Results

One-hundred and thirty-five AIOM members (5.7%) completed the questionnaire. A satisfactory distribution of responders across Italian regions and type of institutions was achieved. The responders' characteristics are presented in Table 1, and a detailed description of the answers is reported in Table 2.

Importance of nutritional status and support (Q1–Q2)

Although 97% of responders reported that nutritional status was decisive or crucial in assessing whether oncologic treatment was practicable or likely to be tolerated, and 83% recognized the importance of nutritional assessment and support, routine integration of nutritional practices into cancer patient care was reported by <30% of oncologists.

Identification of malnutrition (Q3–Q4)

Answers to questions addressing this domain revealed that nutritional assessment is carried out only at the patient's request, or not at all in about half of the cases. However, 63% of responders declared that nutritional assessment is currently performed using multidimensional screening tools [9] or relies on the evaluation of multiple nutritional features including body mass index, unintentional weight loss, and food intake.

Table 1
Descriptive statistics of the responders

Responders' characteristics	N (%)
Age (y)	
<30	7 (5.2)
30–40	51 (37.8)
41–55	47 (34.8)
>55	30 (22.2)
Geographic distribution	
North	80 (59.3)
Center	25 (18.5)
South	19 (14.1)
Islands	11 (8.1)
Type of institution	
University hospital	19 (14.1)
Public general hospital	99 (73.3)
Private hospital	17 (12.6)
Number of beds in the oncology unit	
<10	7 (5.2)
10–30	51 (37.8)
31–50	47 (34.8)
>50	30 (22.2)
Only day-hospital admission	26 (19.3)
Position within the oncology unit	
Head	30 (22.2)
Physician	76 (56.3)
Training physician	11 (8.1)
Other	18 (13.3)
Number of new patients treated per year	
<50	11 (8.1)
50–100	36 (26.7)
>100	88 (65.2)

Management of nutritional support (Q5–Q13)

The criteria for the identification of candidates for nutritional support appeared to be appropriate, as both the impairment of nutritional status and the risk for malnutrition associated with cancer treatment, were taken into account. Approximately 80% of the oncologists reported the availability of all the possible types of nutritional support in their institutions. Regardless of the clinical setting (hospital, home care, or palliative care), nutritional counseling and the use of nutritional supplements appeared to be the most common forms of nutritional support. However, although clinical nutritionist specialists were reported to be available by 65% of participants, nutritional support appeared to be variably managed. In particular, about 40% of oncologists declared that nutritional support and its follow up is not directly managed by nutrition specialists, neither inside nor outside the hospital.

Possible strategies for improving nutritional support management (Q14–Q15)

Finally, 70% of oncologists reported that specific protocols or practical recommendations—either at regional or national level—are needed to obtain an improvement of nutritional support management. This is perceived as a critical factor, in view of the frequent and increasing tendency of patients to adhere to hypocaloric dietary regimens with a putative anticancer effect, which are surprisingly prescribed or suggested by health professionals.

Discussion

AIOM and SINPE recently initiated a structured collaboration, with the aim of increasing oncologists' awareness of nutritional

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