



COMPARISON OF NRS AND MST NUTRITIONAL SCREENING IN LUNG CANCER PATIENTS

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Background and aims

Up 70% of lung cancer (LC) patients suffer from malnutrition. Several nutritional screening instruments can be used in oncology. The aim of this study was to assess the concordance between Nutritional Risk Screening - 2002 (NRS-2002) and Malnutrition Screening Tool (MST) in LC patients.

Methods

MST, NRS-2002, quality of life (QoL) assessment and HandGrip Test were performed sequentially to LC patients at time 0 (T0), after 30 (T1), 60 (T2) and 90 (T3) days. The Edmonton Symptom Assessment System (ESAS) was used for QoL. Statistical comparisons of variables between T0 and T3 were performed with α error = 5%.

Results

From October 2019 to December 2020, the nutritional counselling intervention was offered to 198 LC patients of these 117 were males. The average age was 67 years, 181 had advanced/metastatic stage and 17 in early stage. At T0 NRS-2002 screening identified 138 patients at moderate/high risk of malnutrition and MST screening 127 patients. A concordance was observed between the two screening tests throughout the observation period with a correlation coefficient of 0.7 ($p < 0.001$). Both NRS and MST depend to sex and handgrip. Patients with weight loss $\geq 5\%$ at T0, age > 65 years, severe inappetence are more likely to have $NRS \geq 3$ while $MST \geq 3$ in patients with weight loss $\geq 5\%$, inappetence, malaise and depression.

Conclusions

In LC patients a good correlation between NRS-2002 and MST was observed. Several QoL items are associated with malnutrition status and require special attention from physicians.

