



THE ROLE OF DIETITIAN IN THE MULTIDISCIPLINARY TEAM OF THE CANCER PATIENT. EXPERIENCE OF ASL TO4 IN THE NUTRITIONAL MANAGEMENT OF SUBJECTS WITH HEAD AND NECK CANCER DURING ANTICANCER TREATMENTS

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Background and aims

Subjects with head-neck (H&N) tumors are those at greatest risk of malnutrition, for symptoms of nutritional impact present before the start of anticancer therapies, and for their worsening following treatments.

Weight loss is often observed and results in less response to treatments, greater risk of stopping them and / or reducing the dose. Multidisciplinary work is fundamental.

Methods

Observational study on subjects with H&N candidates for Chemotherapy (CT) / radiotherapy (RT): results relating to the impact of the variation in nutritional status on the practicability of treatments.

Results

83 adult patients were enrolled from 2014 to 2021. Nutritional management started before starting CT-RT. Risk of malnutrition was found in 41% of subjects. 40% received Nutritional Counseling (CN) plus the use of Oral Nutrition Supplements (ONS). In 18%, prophylactic Enteral Nutrition (NE) was started, 25% refused it. Parenteral Nutrition (PN) was started in 3 patients.

CN + ONS has an efficacy equal to the prophylactic NE on tolerance to cancer treatments and nutritional status.

Refusal of prophylactic NE has a major impact on interruption of treatment, dose reduction and on increased weight loss. Weight loss worsens response to treatments and leads to a greater decline in nutritional status.

Conclusions

Nutritional support must play a major role in the management of cancer patients, with early nutritional management and regular follow-ups. For the future, the goal must include the creation of extended collaboration networks between Oncologists and Dietetics and Clinical Nutrition Services (SDNC).

