

NUTRITIONAL INTAKE, NUTRITIONAL STATUS, SYMPTOMS AND INFLAMMATION IN ELDERLY ONCOLOGIC PATIENTS

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INTRODUCTION

Cancer is a highly prevalent disease among elderly: 60% of new cases are diagnosed in the elderly and this is the leading cause of death in this age group. In these patients, systemic inflammation, nutritional status and symptoms affect the nutritional intake.

OBJECTIVES

To determine the nutritional intake, nutritional status and inflammation of elderly patients starting chemotherapy and/or radiotherapy.

METHODS

The participants were 91 oncologic patients admitted in an out-patients clinic of Nutrition-Oncology at Centro Hospitalar São João (Porto). Nutritional intake was calculated from Food Frequency Questionnaire, applied before treatment; nutritional status was assessed using BMI and weight lost during the previous month; inflammation through the modified Glasgow Prognostic Index (mGPS) and symptoms through Cancer Appetite and Symptom Questionnaire (CASQ).

RESULTS

Of the total sample, 91 (25%) had more than 70 years, the median BMI was 26.6 kg/m², median weight lost was null and median CASQ was 18. Median albumin and CRP were, respectively, 38.9 g/L and 17.8 g/L and 53.6% were in a state of inflammation. Regarding the nutritional intake, the median energy intake was 1315 kcal or 18.9 kcal/kg (of current weight) and protein 51.4 g or 0.74 g/kg, both much lower than the recommendations. There was an association between age, BMI and symptoms and nutritional intake, *i.e.*, the older, with more symptoms and higher BMI have lower intake. Those who lost weight and widowers also consumed less alcohol. Men consumed more saturated and trans fatty acids than women.

CONCLUSION

Even before beginning treatment, elderly cancer patients have nutritional intake below the recommendations and are symptomatic (CASQ) and with inflammation. An early nutritional assessment and intervention is essential.

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