European survey of 907 people with cancer about the importance of nutrition

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Background
Nutritional and metabolic disorders are highly prevalent among cancer patients. We aimed to analyse the dimension of nutritional alterations among cancer patients and survivors in Europe by using a structured questionnaire encompassing the perspectives of patients and their physicians on nutritional issues.

Methods
A structured questionnaire was designed to analyse the importance of nutrition for people with cancer. The questionnaire was subdivided in specific areas of interest, such as the presence of feeding problems, perception of nutrition importance, role of food supplements, and their view of their physician's approach to nutrition. All cancer patients and survivors were eligible to answer the questionnaire, except for people diagnosed with brain and breast cancer.

ECPC ensured the dissemination of questionnaire to its Members in 10 countries who translated and disseminated the questionnaire including: Italy, Czech Republic, Greece, Spain, Romania, Poland, Bulgaria, Slovenia, Denmark, and Finland. ECPC Members also ensured sufficient participation of target audience.

SurveyMonkey® online platform was used to circulate the questionnaires from ECPC to its affiliates. On their turn, the affiliates used individual methods to submit the questions to their national audiences. In particular, personal interviews during treatments, Facebook protected pages, paper and online mailing, WhatsApp® and phone calls were variously used, in relation to specific channel affinity of national audiences and local privacy regulations.

In all communications from ECPC to its affiliates, it was specified that all types of cancer patients or survivors were eligible to answer the questionnaire, except for brain and breast cancer.

Results
907 cancer patients and survivors replied. The majority of the sample (59.2%; n=537) was affected by cancer since less than 3 years, and treated from less than 1 year (46.2%; n=419).

Weight loss and cachexia: 69.7% (n=566) of respondents reported that they lost weight after the cancer diagnosis, and for 36.7% (n=309) this loss was moderate to severe. More than half of physicians (54.3%; n=457) did pay attention to weight loss, but 2/3 (62.7%; n=520) did not provide any advice to improve appetite. 72.9% (n=603) of the respondents didn’t know the meaning of the term “cachexia”, and 92.4% (n=764) did not receive any information about cachexia from their health professionals. Almost 2/3 of the patients (69.4%; n=574) knew that persistent loss of appetite could be caused by the tumour.

Feeding problems: More than 70% of the participants experienced feeding problems during the disease and/or therapy and all the responders declared to be aware about feeding importance. More than 80% of the responders believed that their feeding problems were linked to illness or therapy and that avoiding weight loss during therapy was important.

Despite this, almost 30% of the sample had no information on nutritional support, including artificial nutrition. The majority of physicians (53.9%; n=467) did not check the nutritional status of their patients, including their body weight, or did not refer patients with feeding problems to a nutrition specialist (76.7%; n=462).

Supplements: About a half of the patients (56.9%; n=472) know nothing about the potential negative effects on therapy of taking vitamins or antioxidants, or were informed about the need to make the therapist aware if they do so (43.6%; n=362).

Physical activity: 1 year or less (46.2%; n=419). 82.4% of respondents knew nothing about the potential negative effects of activity on body weight and other health. 40.2% (n=363) did not receive any information about physical activity from their health professionals. Almost 2/3 of the patients (69.4%; n=574) knew that physical activity could improve their quality of life.

Conclusions
Most people with cancer surveyed reported that they would like to receive more information about how to improve their nutrition during and after treatment. There is a need to empower individual patients and patient associations by producing more information on cancer patients’ nutritional needs. Such information material should be produced by patients in close collaboration with medical oncologists and other healthcare professionals.

This survey demonstrates that medical oncologists are not giving the appropriate importance to nutrition and physical activity when interacting with cancer patients.

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