

10 TOP TIPS

Managing complex symptoms: anorexia-cachexia syndrome

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- 1** Loss of appetite and weight are important subjects for patients and carers. Good communication is essential in understanding the problems and managing expectations
- 2** Nutritional care has physical, social, cultural and emotional aspect
- 3** Treat the treatable. Consider potentially reversible causes for poor nutritional statusⁱ
- 4** Cancer patients are nutritionally at risk for many reasons. Give individualised advice taking into account type of cancer and stage of illness. Recognise changes in stage of illness
- 5** Explain the complexity of ACS to patients and relatives. This can help alleviate feelings of guilt and reduce pressure to 'eat more' when patho-physiologically it is not possible
- 6** In earlier stages of ACS, consider a combined approach to treatment:

A) anti-inflammatory drugs, such as dexamethasone 4-6 mgs in the morning, withdraw if ineffective after a week or on loss of effect. NB steroids often have a transient effect – does the patient want to pursue this course of action?

B) anti-inflammatory diet and lifestyleⁱⁱ
- 7** Advise regular, small portion sizes and soft foods. Eating with relatives rather than alone encourages increased intake. Some patients find cooking smells make them feel nauseous
- 8** There is no evidence that food supplements/sip foods improve outcomes. They have no benefits over 'ordinary
- 9** Have an 'advanced discussion' with patient and carers to sensitively prepare them for stage of not eating and drinking. This may facilitate management if or when it occurs
- 10** At the end of life, nutritional care calls for a sensible, sensitive and compassionate approach. Priority is comfort and quality of life. Removing anxieties about food and fluid intake can provide relief and comfort to patients and carers

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Possible treatable causes

- Infection
- Radiotherapy and chemotherapy
- Co-existing symptoms - pain, nausea and vomiting, constipation, breathlessness, fatigue, anxiety
- Food allergies and intolerances, such as lactose intolerance (common, especially after surgery, chemo- and radio-therapy)
- Drugs causing side effects such as dry mouth, nausea, constipation etc
- Social isolation
- Metabolic disorders (think potassium, calcium, magnesium, phosphate and vitamin D)

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Anti-inflammatory dietary and lifestyle suggestions

- Basically, the Mediterranean diet: seasonal fruit and vegetables, higher intake of whole grains, pulses, little meat, more fish, olive oil and herbs.
- Avoid pro-inflammatory foods, such as those containing trans -fats and omega-6 fatty acids, fried foods, meats cooked at high temperature and barbecued
- Avoid smoking
- Supplementation with omega-3 fatty acids, especially in lung and pancreatic cancers
- Exercise
- Exposure to sunshine!
- Stress management techniques, such as group therapy, meditation, art therapy, music etc

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