

**1732P** Unidentified cachexia patients in the oncologic setting: Cachexia UFO's do exist

E. De Waele<sup>1</sup>, J. Demol<sup>1</sup>, R. Caccialanza<sup>2</sup>, P. Cotogni<sup>3</sup>, H. Spapen<sup>1</sup>, M. Malbrain<sup>1</sup>, J. De Grève<sup>4</sup>, J.J. Pen<sup>5</sup>

<sup>1</sup>Intensive Care, UZ Brussel, Brussels, Belgium, <sup>2</sup>Clinical Nutrition and Dietetics Unit, Fondazione IRCCS Policlinico San Matteo, Pavia, Italy, <sup>3</sup>Pain Management and Palliative Care, Department of Anesthesia and Intensive Care, S. Giovanni Battista Hospital, University of Turin, Turin, Italy, <sup>4</sup>Medical Oncology, UZ Brussel, Brussels, Belgium, <sup>5</sup>Diabetes Clinic, UZ Brussel, Brussels, Belgium

**Background:** Cachexia is an important outcome-modulating parameter in cancer patients. In the context of a randomized controlled trial on cachexia and nutritional therapy, the TiCaCONCO trial (NCT03058107 on Clinicaltrials.gov), the contacts between cancer patients and health care practitioners/oncologists were screened. The aim of this retrospective study is to identify in the charts the input of data on body weight (necessary to identify cachexia stage), relevant nutritional data and nutritional interventions triggered or implemented by oncologists and dietitians.

**Methods:** In a tertiary, university oncology setting, over a time span of 8 months (34 weeks), the charts of patients admitted to an oncology, gastroenterology or abdominal surgery unit were screened for the presence of information contributing to a cancer cachexia diagnosis. Data (patient characteristics, tumor type and location) was gathered.

**Results:** We analyzed 9694 files. In > 90% of patients, data on body weight was present. 118 new diagnoses of cancer were present in 9694 screenings (1.22% of patient contacts). Information on weight evolution or nutritional status was absent in 46% of cases. In contacts between oncologists and cancer patients, at the time of diagnosis, the prevalence of cachexia was 42%. In 14% of these patients, no nutritional information was present in the notes. In those 50 patients with cachexia, a nutritional intervention was initiated by the physician in 8 patients (16%). Nutritional interventions were documented in the medical note in 9% of the overall study population. Dietitians made notes regarding nutrition and weight in 42% of patients.

**Conclusions:** Newly diagnosed cancer patients are not systematically identified as being cachectic and if they are interventions in the field of nutrition therapy are largely lacking. Important barriers exist between Oncologists and Nutritionists, the former being mandatory to the success of a nutrition trial in cancer.

**Clinical trial identification:** NCT03058107.

**Legal entity responsible for the study:** Elisabeth De Waele.

**Funding:** Baxter, Nutricia.

**Disclosure:** All authors have declared no conflicts of interest.