

XXXIII CONGRESSO NAZIONALE AIRO

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PALAZZO DEI CONGRESSI

Radioterapia Oncologica: l'evoluzione al servizio dei pazienti

Impact of nutritional counselling for head and neck cancer patients undergoing radiochemotherapy: a pilot prospective study

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35-60% of HNSCC pts are **malnourished** at diagnosis



We aimed to evaluate the impact of dietary counselling in a cohort of patients with HNSCC treated with RT (+/-CT)

Unplanned treatment delays

Poor oncological outcomes

- (1) Nutrition intervention in patients receiving radiotherapy to head or neck area, Isenring E et al, 2004
- (2) Effect of chemoradiotherapy on nutrition status of patients with nasopharyngeal cancer, Hong JS et al, 2015

Single-centre, prospective study (AOU Careggi)

November 2020 and March 2021

Assessments:

- Baseline nutrition risk according the Malnutrition Universal Screening Tool (MUST)
- Mean body weight, BMI, variation in energy and protein intake
- At the start of treatment (T0); at mid-treatment (T1); at the end (T2); one month after (T3)



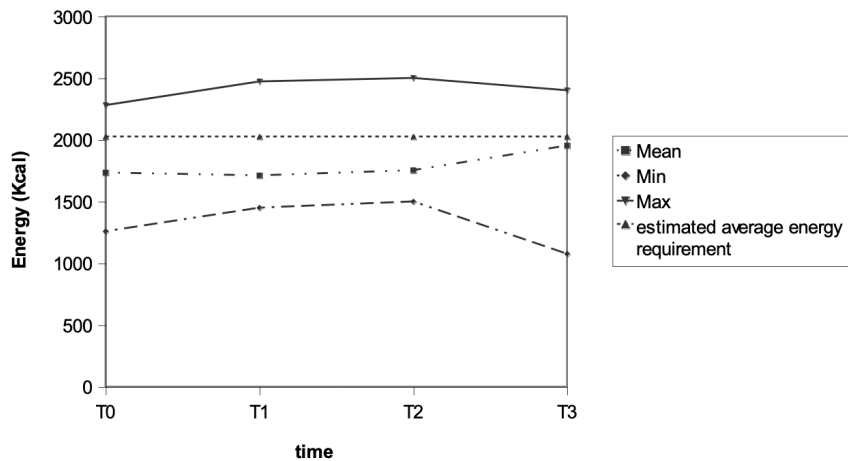
Patients' characteristics

	N°	%
Patients	17	100
Age		
mean	66,6	
range	56-81	
Male	13	77,5
Female	4	23,5
Performance Status (ECOG)		
0	15	88
1	2	12
2	0	
Tumor Site		
Oral Cavity	3	17,65
Salivary gland	2	11,76
Larynx	3	17,65
Oropharynx	7	41,17
Rhynopharynx	1	5,88
Unknown Primary	1	5,88
Treatment		
Adjuvant	4	18
Radical	13	82
Radiotherapy	6	35
Chemo-Radiotherapy	11	65
Treatment completed	17	100
Treatment delays	2	12

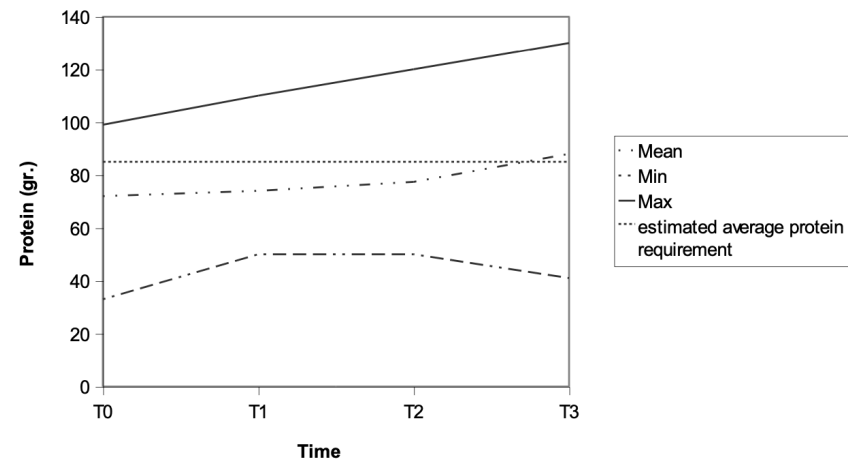
Nutrition baseline characteristics

	Value
Weight (kg)	
Mean	75,2
Range	55,5-94,5
BMI T0	
Mean	25,7
Range	18,7-32,4
Type of nutrition	
Oral	15 (88%)
Artificial	2 (12%)
MUST Scale	
0	7 (41%)
1	5 (29,5%)
≥2	5 (29,5%)
Involuntary weight loss	
≤ 5%	9 (53%)
5-10%; ≥ 10%	8 (47%)
Energy Need (Kcal)	
Mean	2026
Range	1500-2500
Protein Need (gr.)	
Mean	85
Range	67-109
INTAKE T0 (Kcal)	
Mean	1734
Range	1258-2280
INTAKE T0 (gr. Prot)	
Mean	72
Range	33-99

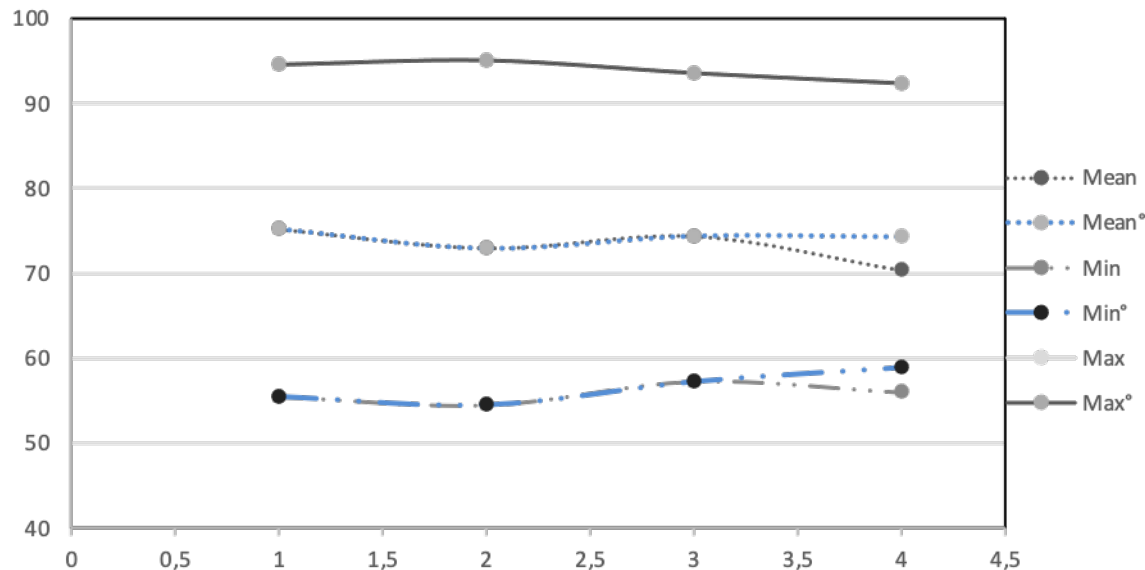
Energy intake



Proteic Intake



Parameters	Baseline (T0) n (%)	T 1	T2	T3
ONS (% pz)	5 (29)	11 (65)	13 (76)	2 (12)



At mid-treatment (T1), mean body weight showed a reduction from baseline, with a little increase at the end of therapy. Globally, we observed body weight stability during the treatment period and a recovery from the observed minimum weight (mean 74.3 vs 74.4 kg).

Symptoms/toxicities with a nutritional impact

NIS		T0 (n ; %)	T1 (n ; %)	T2 (n ; %)	T3 (n ; %)
Mucositis					
	G0	15 ; 88	6 ; 35	7 ; 41	15 ; 78
	G1	1 ; 6	7 ; 41	5 ; 29	0
	G2	1 ; 6	4 ; 23	5 ; 29	0
	G3	0	0	0	2 ; 12
Dysphagia					
	G0	13 ; 76,5	6 ; 35	1 ; 7	12 ; 71
	G1	3 ; 17,5	8 ; 47	13 ; 72	5 ; 29
	G2	1 ; 6	3 ; 18	3 ; 21	0
Xerostomia					
	G0	10 ; 59	4 ; 23	7 ; 42	9 ; 53
	G1	5 ; 29	8 ; 47	5 ; 29	6 ; 35
	G2	2 ; 12	5 ; 30	5 ; 29	2 ; 12
Anorexia					
	G0	12 ; 70	10 ; 58	5 ; 29	11 ; 64
	G1	4 ; 24	4 ; 24	8 ; 50	4 ; 24
	G2	1 ; 6	3 ; 18	4 ; 21	2 ; 12
Dysgeusia					
	G0	8 ; 47	2 ; 12	0	3 ; 18
	G1	7 ; 41	7 ; 41	8 ; 47	9 ; 53
	G2	2 ; 12	8 ; 47	9 ; 53	5 ; 29
Odynophagia					
	G0	12 ; 71	6 ; 35	6 ; 36	9 ; 53
	G1	5 ; 29	8 ; 47	6 ; 36	6 ; 35
	G2	0	3 ; 18	5 ; 28	2 ; 12

In our cohort, baseline risk and nutritional status were consistent with literature data

Mean body weight drops slightly at mid-treatment, with a recovery after 1 month.

It was necessary to increase nutritional support (ONS) during treatment to ensure adequate energy and protein intake.

All patients successfully completed the treatment.

**THANK YOU FOR YOUR
ATTENTION!**



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Associazione Italiana
Radioterapia e Oncologia clinica