ABSTRACT

Cachexia-anorexia (CA) is a weight-loss/appetite loss syndrome that commonly affects cancer patients. It is characterized by progressive sarcopenia (loss of muscle mass) accompanied by weight and appetite loss. Cachexia-anorexia is common in lung cancer patients, especially in patients with advanced-stage disease. These physiological changes lead to decreased ability to perform daily activities and a reduction in the QoL of the patient. CA also impairs the efficacy of chemotherapy and other types of treatment. Typically, oncologists focus on palliation of the symptoms of cachexia-anorexia and the reduction of distress of patients and families rather than on cure. Standard methods of treatment, such as increase in nutritional uptake, do not reverse loss of appetite and weight loss. Recently, newer treatment approaches that target the ghrelin axis have been shown to be successful in clinical trials. However, the willingness of lung cancer patients to adopt such treatment strategies is unclear.

RESEARCH QUESTIONS

We surveyed 335 lung cancer patients through an online questionnaire. Major research questions included: 1. What is the burden of cachexia in lung cancer patients? 2. What are some of the major issues associated with weight and appetite loss? 3. What are some of the QoL issues associated with weight and appetite loss? (inability to work, inability to climb stairs, inability to function independently) 4. What are some of the social issues associated with weight and appetite loss? (body image, stigma of attending social occasions) 5. How are patients managing their symptoms? What types of treatment options for weight and appetite loss would patients consider?

MAJOR FINDINGS

Patients who have already experienced unintended weight loss or other physical changes are significantly more concerned about these kinds of changes than those who have not.