Ayesh W, Adel Ibrahim Hassan A, Jaafar H, Ola Khorshid Laviano A, Lovey J, Mahrous M, Mogawer E, Molla H, Morsy A, Ouaijan K, Middle East Panel for the Optimal Nutritional Management of Patients with Cancer , Unmet needs in cancer patients: creating recommendations to overcome geographical disparities in economic growth, Clinical Nutrition ESPEN, https://doi.org/10.1016/j.clnesp.2023.03.009.



### **Nutritional support of cancer patients**

- The importance of nutritional support has become recognized by international scientific societies in cancer patients.<sup>1</sup>
- In the Middle Eastern region, malnutrition in cancer patients is estimated to range from 30-40% of the Middle Eastern cancer population. The application of the latest oncology nutritional recommendations in the region faces many challenges with the current escalating burdens of healthcare.<sup>1</sup>

## Nutritional targets of cancer patients

- Aiming at a stable nutritional status, the patient's diet has to meet the
  energy requirements which are the sum of the resting energy
  expenditure (REE), physical activity, and, in a small percentage, of
  diet-induced thermogenesis.<sup>1</sup>
- If not defined individually using indirect calorimetry, cancer patients' diet should be between 25 and 30 kcal/kg/day as stated in the ESPEN guidelines.<sup>1</sup>
- The energy requirements should be measured rather than estimated.<sup>1</sup>
- Medical fasting and ketogenic diet should not be implemented and in the optimal setting, the patient's energy expenditure should be measured by indirect calorimetry.<sup>1</sup>
- Monitoring should be used to define the requirements for vitamins and trace elements.<sup>1</sup>



# The oncologist's role in setting and implementing nutritional targets

- The oncologist should work closely with the dietician regarding energy requirements, protein targets, the optimal ratio of carbohydrates and fat and vitamins and trace elements requirements maintaining consistency between his and the dietician's recommendations.<sup>1</sup>
- In the **essential setting**, the oncologist should **set the treatment plan** and try to reach the dietician or the clinical pharmacist regarding these issues.<sup>1</sup>
- In the **optimal setting**, the oncologist should confer with the dietician and the clinical pharmacist (the MDT team) to **tailor the requirements** according to the patient's needs.<sup>1</sup>
- The oncologist should make sure the patient is following the nutritional plan.<sup>1</sup>

MDT: multidisciplinary team

## Other health professionals' role

- The **dietician's role** is to **set the nutritional plan** of the patients according to the nutritional status and targets.<sup>1</sup>
- The **nurses' role** should revolve around monitoring the patients and referring them to the dietician if needed.<sup>1</sup>
  - o The nurses should be able to **discuss the diet with the patient** and gain information that would help in planning and keeping track of his personal nutritional plan.<sup>1</sup>
    - o The nurses should carry out what is requested from them by the dietician or the oncologist.<sup>1</sup>
- The main role of the clinical pharmacist is to plan the parenteral nutrition plan.<sup>1</sup>

Physical therapists should follow the patient's muscle status and general function.<sup>1</sup>



- Improving oncology patients' access to nutrition care throughout the journey of their treatment, can be only achieved by aligning a holistic and resilient strategy for complete cancer patients' nutritional screening, assessment, referral and treatment.1
- The development of nutrition awareness programs is crucial for the early prevention and treatment of nutritional cancer-related risks.<sup>1</sup>



## References 1. Ayesh W, Ade

Ayesh W, Adel Ibrahim Hassan A, Jaafar H, Ola Khorshid Laviano A, Lovey J, Mahrous M, Mogawer E, Molla H, Morsy A, Ouaijan K, Middle East Panel for the Optimal Nutritional Management of Patients with Cancer , Unmet needs in cancer patients: creating recommendations to overcome geographical disparities in economic growth, Clinical Nutrition ESPEN, https://doi.org/10.1016/j.clnesp.2023.03.009.