

Elderly patients with cancer cachexia experience different levels of symptom burden when compared to middle-aged and young patients

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INTRODUCTION

- · Cancer cachexia (CC) is a syndrome characterized by muscle wasting and carries a heavy symptom burden. It is currently unknown whether or not elderly patients have similar symptom burden, nutritional issues, and distress as younger patients¹
- AIM: To provide critical information on the status of elderly cancer patients with cachexia and compare differences between patients considered of different age groups

Design/participants

- Comparison between patients of different age groups; young (Y; < 50 y, middle-aged (M; 50 - 69 y), and elderly (E; \geq 70 y).
- Patients with cancer cachexia

METHODS

Questionnaires:

- Revised Edmonton Symptom Assessment System (ESAS-r): cancer symptoms²
- Abridged Patient-Generated Subjective Global Assessment (aPG-SGA): nutritional and performance status³

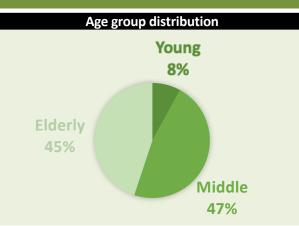
Measures

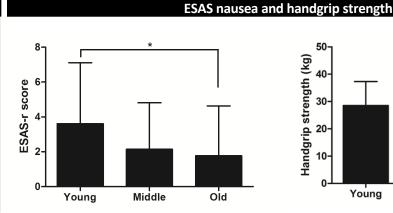
Distress Thermometer (DT) and Canadian Problems Checklist (CDC): sources of distress⁴

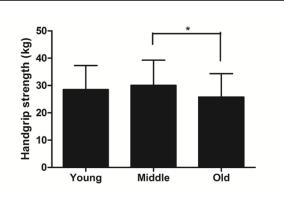
ESAS

• A 1x3 ANOVA was conducted on the dependent variables among the age ranges⁵

RESULTS







Canadian problem checklist: practical, informational and spiritual domains Young Knowing about available resources Accommodation -Questioning relationship to God -Getting to/from appointments Making treatment decisions Finances Talking with the healthcare team Understanding my illness/treatment Work/school Percent of patients reporting problem (%) Percent of patients reporting problem (%) Percent of patients reporting problem (%)

Significant Statistical Differences Mean (SD) Relative Middle Elderly Difference Young

3.61 (3.50) 2.14 (2.67) 1.77(2.86) Y>E; M=Y,E Nausea Handgrip Strength 28.52 (8.8) 30.05 (9.2) M>E. Y=M.E (8.57)

CONCLUSIONS

- CC patients of different age groups reported different burden levels of symptom and different percentages of patients reporting specific problems.
- These age-related disparities should be considered when conducting patient assessments and specialized treatment.

REFERENCES

¹Kasvis et al., 2019; ²Hui et al., 2017; ³Vigano et al., 2014; ⁴Ownby, 2019; ⁵Kim et al., 2014