

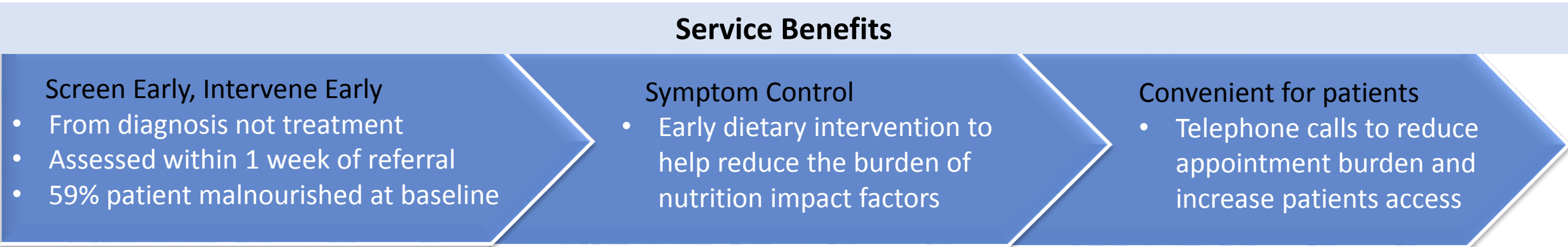


# Introducing an outpatient dietetic service to the Lung Cancer Rapid Access Service

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| Introduction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Methodology                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Results                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
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| <ul style="list-style-type: none"><li>Weight loss is one of the main presenting complaints at diagnosis, with 60% of lung cancer patients having reduced appetite and significant weight loss.<sup>(1)</sup></li><li>Patients with malnutrition are at increased risk of mortality and poor outcomes from surgery and chemotherapy.<sup>(2)</sup></li><li>Sarcopenia was seen in 52% of patients prior to chemotherapy which is associated with reduced response to chemo and poor outcomes <sup>(2)</sup></li></ul> <div><div>DIETETIC INTERVENTION</div><div><div>■ Oral Nutrition Support &amp; Dietary Advice</div><div>■ Dietary Advise Only</div></div></div> | <ul style="list-style-type: none"><li>Data collected prospectively on patients with suspected lung cancer attending the Rapid Access Clinic (RAC).</li><li>Patients were screened using a Malnutrition Screening Tool, and referrals to dietetics generated for scores <math>\geq 2</math> were referred to a dietitian.</li><li>All patients considered for surgical intervention were referred to dietetics. Dietetic assessments and interventions were completed virtually in a phone clinic due to appointment burden.</li><li>Data collected included anthropometrics, % of estimated energy requirements, malnutrition diagnosis, nutritional intervention, treatment pathway and follow up plan.</li></ul> <div><div>Aim: evaluate the first six months of outpatient dietetic service provision to this cohort.</div></div> | <p>Referrals were received for 29 outpatients in the first 6 months.</p> <div><ul style="list-style-type: none"><li>86% accessed a dietetic assessment within five working days.</li><li>59% of patients were diagnosed with malnutrition.</li><li>83% of patients achieved weight maintenance or regain post dietetic intervention.</li><li>Only 41% of patients were meeting &gt;75% requirements at their initial assessment compared to 86% in there last assessment.</li></ul></div> <div><div>TREATMENT PATHWAY FOR LUNG CANCER OPD PATIENTS</div></div> |



| Conclusion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Reflections & future work                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
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| <ul style="list-style-type: none"><li>This service provided patients with early access to a dietitian at diagnosis to optimise nutritional status pre-treatment.</li><li>Previously, patients could only access dietetics if referred as an inpatient and assessed pre-discharge, or on commencing chemotherapy.</li></ul> <div><div>Limitation</div><div>A limitation of the service included the scope of RAC service getting patient consent for a dietetic referral when they were also potentially facing a new lung cancer diagnosis.</div></div> | <ul style="list-style-type: none"><li>Patients accepting a referral early whilst also coming to terms with a new diagnosis.</li><li>Telephone consults have been beneficial and I have been able to do in person appointments when necessary.</li><li>The amount of information the patient took on board varied depended on how accepting they were of their diagnosis</li><li>Patients that are not yet placed on a treatment pathway (surgical/ chemotherapy/radiotherapy/palliative) previously could not access timely outpatient dietetic input and may have been directed to primary care services yet</li></ul> |

References

1. Cancer Research UK <https://www.cancerresearchuk.org/about-cancer/coping/physically /diet-problems/types/weight-loss>

2. Bossi, P. *et al.* (2021) ‘The spectrum of malnutrition/cachexia/sarcopenia in oncology according to different cancer types and settings: A narrative review’, *Nutrients*, 13(6), p. 1980. doi:10.3390/nu13061980.