

IDENTIFICATION OF CACHEXIA IN ONCOLOGICAL PATIENTS WITHOUT THE POSSIBILITY OF CURATIVE TREATMENT IN A REFERENCE HOSPITAL IN BELÉM/PA

Bruna Macedo Lopes¹, Jamille Jheniffer Nascimento Auzier², Marcelo Pio da Silva Tavares¹, Lorena Modesto da Silva², Sofia Yurie Ribeiro Ishigaki², Alyne França da Silva², Patricia Rodrigues Portugal¹, Marianne Rodrigues Fernandes¹.

¹Federal University of Pará (UFPA)

²State University of Pará (UEPA)

Introduction: Oncological cachexia is characterized as the most serious complication of malnutrition, with high loss of muscle mass, accompanied or not by loss of adipose tissue, associated with biochemical changes, lack of positive response to treatment and progressive organic impairment. Failure to identify this condition early can significantly worsen the clinical picture and impair adequate nutritional management. Without a timely diagnosis, the loss of muscle mass and the decrease in physical strength become more intense, which can lead to systemic complications. **Objectives:** To identify the presence of cachexia in oncology patients receiving palliative care admitted to a referral hospital in Belém-PA. **Methods:** Descriptive study involving 24 cancer patients with no possibility of curative treatment, admitted to a reference hospital in the North Region of Brazil over a period of 6 months, approved by the Human Research Ethics Committee under CAEE number 77133424.3.0000.5550. To assess cachexia, the nutritional screening tool Subjective Global Assessment – Produced by the Patient - ASG-PPP, current weight, usual weight, percentage of weight loss, height and Body Mass Index were used. The stratification of oncological cachexia was established in four categories: symptomatic pre-cachexia (weight loss <10% with at least 1 symptom such as anorexia, fatigue or early satiety), asymptomatic pre-cachexia (weight loss <10%, without symptoms), symptomatic cachexia (weight loss >10% with at least 1 symptom) and asymptomatic cachexia (weight loss >10%, without symptoms). **Results:** All patients were diagnosed with cachexia (100%). Of these, 83.3% had this condition in its symptomatic form. Furthermore, according to the percentage of weight loss, all individuals presented severe weight loss (100%), 91.7% were severe malnutrition according to ASG-PPP and 87.5% were malnutrition according to the Body Mass Index. **Conclusion:** The main results reinforce that cachexia is present daily among the nutritional diagnoses of cancer patients in palliative care. This condition hinders the effectiveness of specific treatment and increases susceptibility to infections, resulting in greater suffering and a shorter life expectancy. The psychological impact is also significant, as weight loss and physical weakening can affect the patient's self-esteem and perception of control over their

condition. In relation to nutritional treatment, cachexia becomes an additional challenge, making it difficult to adequately manage symptoms and promote comfort, essential elements for care when a clinical cure is impossible. Therefore, early identification of this syndrome in this target audience is of utmost importance, in order to contain the progression to refractory cachexia, and promote comfort, quality of life and dignity for these people.

Keywords: Severe malnutrition; cancer; palliative care.