

POCKET BOOKS FOR CANCER SUPPORTIVE CARE

Cancer Cachexia

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Author biographies

David Blum MD obtained his medical degree from the University of Zürich in 2002 and received the Swiss board certification of Internal Medicine in 2009 and Medical Oncology in 2011. He was a resident doctor and research fellow (EPCRC) at Oncology DIM Kantonsspital St. Gallen in Switzerland and is currently undergoing EURO IMPACT - Marie Curie PhD training fellow at European Palliative Research Center NTNU in Trondheim, Norway. His main research interests include symptom assessment and the role of computer assistance, cancer cachexia, physical activity, end of life care, and integration of oncology and palliative care.

Dr. Egidio Del Fabbro (MD) obtained his medical degree from the University of the Witwatersrand in South Africa. He completed his residency in Internal Medicine at Barnes-Jewish Hospital, Washington University. He was co-founder of the Cachexia Clinic at MD Anderson Cancer Center and is currently Director of the Palliative Care Program at Virginia Commonwealth University. Dr. Del Fabbro's research interest lies in developing clinical trials for cancer-related cachexia and fatigue. He is the senior editor for the textbook, *Nutrition and the Cancer Patient*.

Professor Akio Inui (MD, PhD) is the Chairman of the department of Psychosomatic Internal Medicine of Kagoshima University Graduate School of Medical and Dental Sciences, Kagoshima, Japan. Professor Inui completed his MD and PhD degrees at Kobe University, Japan. Professor Inui is recognized for his studies in elucidating the role of gut-brain peptides in the regulation of gastrointestinal motility, feeding, and body weight, and the identification of the ghrelin-neuropeptide Y pathway from stomach to brain in the pathogenesis of obesity and cachexia. Professor Inui has authored more than 250 peer-reviewed publications. His efforts are now focused on translational research on peptides that bridges the gap between basic and clinical disciplines for better understanding and management of human behavioral disorders, including obesity, cancer cachexia, and eating disorders.

Dr Florian Strasser is medical doctor with board certification in internal medicine, medical oncology, and palliative medicine. His clinical and research activities focus involve integrated oncology and palliative care. His focus is on the development of clinical models to integrate oncology and palliative care in the primary and secondary sector. His work is also affiliated with international organizations such as the European Society of Medical Oncology (ESMO), Multinational Association of Supportive Care and Cancer (MASCC), European Association of Palliative Care (EAPC), American Society of Clinical Oncology (ASCO), and International Association of Hospice and Palliative Medicine (IAHPC). In addition, his research is in oncological rehabilitation with a focus on cachexia and nutrition. He is the first oncologist in Switzerland with a *Venia Legendi* (Privatdozent) on specialist palliative care, awarded from the University of Bern.

Dr. Hajime Suzuki (DDS) belongs to the department of Psychosomatic Internal Medicine of Kagoshima University Graduate School of Medical and Dental Sciences, Kagoshima, Japan. He completed Doctor of Dental Surgery (DDS) degrees at Kagoshima University. His research interest lies in the field of cancer cachexia, obesity, and related metabolic syndromes, with the specific focus on the neuroendocrine and metabolic effects of feeding regulatory peptides in the coordinated regulation of energy balance. His research also focuses on the role of complementary and alternative medicine in the palliative care of patients with cancer.

Overview of cancer cachexia

Introduction

Cachexia (uncontrolled, unintentional weight loss, and muscle wasting) is common in patients with advanced cancer and can have a profound impact on quality of life, symptom burden, and a patient's sense of dignity. It is a very serious complication, as weight loss during cancer treatment is associated with more chemotherapy-related side effects, fewer completed cycles of chemotherapy, and decreased survival rates [1,2]. Although cachexia is often under-recognized by health care providers, there is a growing awareness of the positive impact of supportive care measures [3] and development of promising novel pharmaceutical agents for cachexia. While there has been great progress in understanding the underlying biological mechanisms, health care providers must also recognize the psychosocial and biomedical impact cachexia can have. The high prevalence of cachexia among cancer patients suggests that health care providers will increasingly be expected to carefully assess and manage patients with this condition.

There is research to suggest that patients and their families view poor appetite as the most distressing symptom they encounter during cancer treatment [4]. Fortunately, the body of evidence focusing on the effective management of cachexia (with both pharmacological and non-pharmacological intervention) is growing and has raised awareness of the condition. In fact, if physicians do not proactively address concerns regarding nutrition and weight loss in cancer, they might be perceived by patients and their families as guilty of 'selective neglect.'