



# Western Sydney Nutrition & Dietetics Newsletter

## Radiation Therapy; Ensuring Nutrition

### **Nutritional Management of Patients Receiving Radiation Therapy**

A decline in the nutritional status of patients with a cancer diagnosis, in conjunction with weight loss, can impact upon the management of patients undergoing radiation therapy; malnutrition worsens the responsiveness and tolerance to anti-cancer drugs. The prevalence of cancer-related malnutrition ranges from 30-64% in inpatients and can increase risk of adverse clinical outcomes, poor quality of life, and lower survival rates<sup>1</sup>. As many as 20% of cancer patients die from effects of malnutrition, rather than from the malignancy<sup>1</sup>.

### **Nutrition Screening**

Early and adequate nutrition intervention for those patients identified as malnourished can improve outcomes for the patient<sup>1</sup>. Nutritional issues should be addressed from the time of diagnosis throughout cancer care<sup>1</sup>. Either assessing nutritional status OR screening those who may be at risk of malnutrition using validated tools such as a PG-SGA (patient-guided subjective global assessment), SGA (subjective global assessment) OR MST (malnutrition screening tool); all of which have been validated for patients receiving radiation therapy.

### **Referring to a Dietitian**

Patients at nutritional risk can be identified using a nutrition screening tool which has been validated in patients receiving radiation therapy (e.g. Malnutrition Screening Tool). All patients receiving radiation therapy to the gastrointestinal tract (GIT) or head and neck area should be referred to the dietitian (and/or nutrition support).

### **Nutrition intervention & Goals**

The main aim for many patients undergoing radiation therapy is to minimise weight loss and maintain quality of life and symptom management; this may include nutrition counselling and/or medical nutrition therapy. Total energy and protein intake targets should be developed.

Frequent dietitian contact (at least fortnightly) is known to improve outcomes in radiation therapy patients<sup>1</sup>. Nutrition follow-ups are recommended for at least the initial 6 weeks after ceasing radiation therapy, and a minimum of 6 months for those requiring nutrition support<sup>1</sup>.

The dietary management options offered at Western Sydney Nutrition and Dietetics involve creating a sustainable eating program, tailored to individual requirements.

**Please do not hesitate to contact us if you have any queries or if we can assist you in any way.**

I can be contacted via;

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Reference;

1. DAA; 2008; Evidence Based Practice Guidelines for the Nutritional Management of Patients Receiving Radiation Therapy, Nutrition & Dietetics 2008 (suppl. 1):S1-S20

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