Nutritional assessment of non-small cell lung cancer patients undergoing treatment with Osimertinib

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Background Importance

Non-small cell lung cancer (NSCLC) accounts for approximately 85% of all lung cancer cases and is a major cause of morbidity and mortality globally

35% to 65%
NSCLC patients

Present nutritional such as malnutrition or sarcopenia (characterized by the loss of skeletal muscle mass and strength)

Important negative impacts

- Treatment response
- Prognosis
- Quality of life

Identifying the nutritional status and body composition of patients receiving targeted therapies like osimertinib is essential to optimize treatment and manage adverse effects

Objetives

1. Study the **nutritional status** and **body composition** of NSCLC patients with **osimertinib**
2. Evaluate **the prevalence of sarcopenia** and examine the relationship between **low muscle mass, malnutrition** and the occurrence of **dose-limiting toxicities**

Materials and Methods

Observational, descriptive, cross-sectional treated with osimertinib

Analize

- **Body composition**
  - **Bioelectrical impedance (BIA)**
- **Muscle functionality**
  - **Dynamometry**
- **Anthropometric measurements**
  - **Weight, height, IMC, ...**

Results

25 patients (60% women)

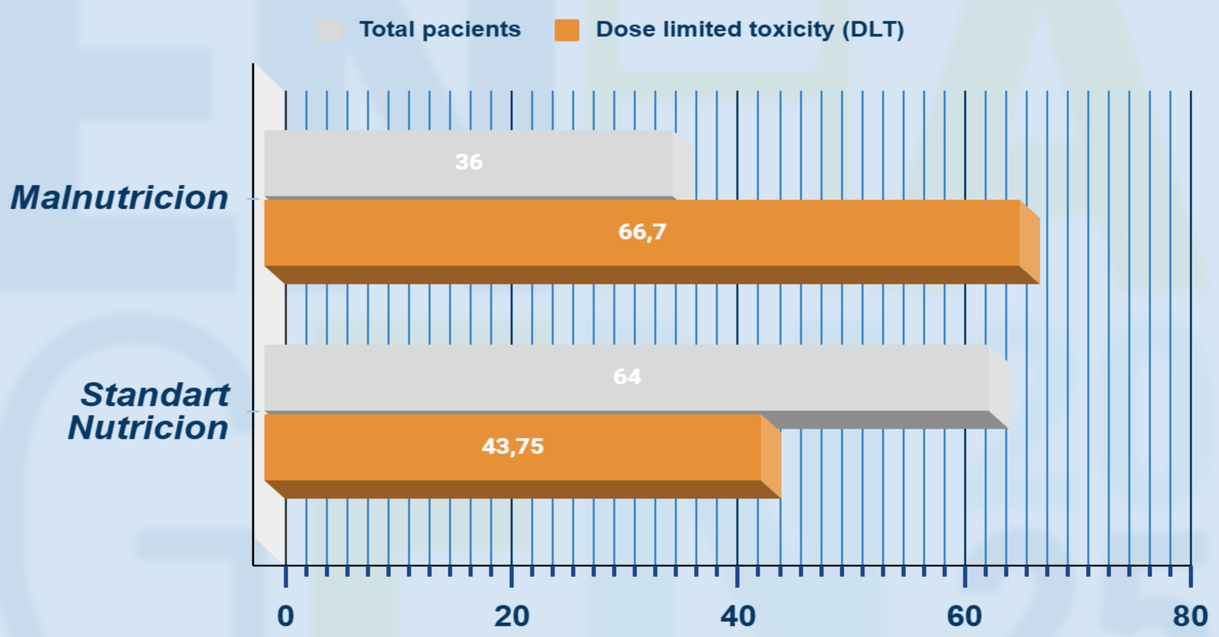
Age: 72 (33-87) years

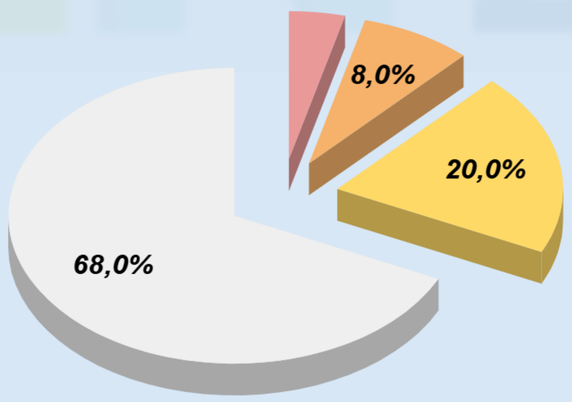
Patients who developed dose-limiting toxicities

showed

- **Lower fat-free mass fat-free mass index**
- **Reduced muscle mass**

Associated higher toxicities





No statistically significant association was found between malnutrition and toxicities, patients with malnutrition tended to experience more adverse effects

Conclusions

These findings emphasize the importance of early and individualized nutritional interventions in NSCLC patients receiving osimertinib to enhance their nutritional status, optimize cancer treatment, and reduce dose-limiting toxicities. Future research involving larger patient cohorts and longitudinal designs is needed to validate these results and investigate the efficacy of nutritional interventions.