Anorexia, Cachexia & Mouth Care

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Learning Outcomes

By the end of the session participants will have an understanding of :-

- Anorexia and cachexia within the palliative population
- Principles of assessment
- Management strategies
Physiological needs: food, water, warmth, rest

Safety needs: security, safety

Belongingness and love needs: intimate relationships, friends

Esteem needs: prestige and feeling of accomplishment

Self-actualization: achieving one’s full potential, including creative activities

Self-fulfillment needs
Background

• Cachexia & Anorexia
  Prevalent in advanced cancer and chronic disease
  Common symptoms
  Not self inflicted
  Linked with fatigue

“The flesh is consumed and becomes water,...the shoulders, clavicles, chest and thighs melt away...the illness is fatal “ (Katz & Katz 1962)
Does it matter?

- Body image
- Perception of self
- Confidence
- Psychological issues
- Survivorship
Physical signs and symptoms of malnutrition

- Changes in condition of hair
- Changes in skin
- Poor delayed wound healing
- Muscle wasting
- Weakened hand grasp
- Depressed mood
- Loss of balance
- Altered heart rate, rhythm or blood pressure

(Dudek 2010)
Anorexia and Cachexia
Anorexia

• Common symptom
• Loss of appetite
• Aversion to food
• Multiple factors associated with anorexia
• Anorexia-cachexia syndrome
Causes of anorexia

- Pain
- Dysphagia
- Nausea and vomiting
- Infection
- Obstruction
- Altered taste
- Dyspepsia/gastritis
- Constipation
Causes of anorexia

- Low mood/ depression
- Secondary causes
- Sore mouth
- Altered biochemistry
Cachexia

- Derived from Greek *Kaxos* and *Hexis* meaning *bad* and *condition*
- Complex metabolic syndrome
- Associated with poorer outcomes
- Impacts on survival
  - 20% of pts will die from cachexia (Tisdale 2002, Muscaritoli et al 2006)
- Frequently seen in pts with solid tumours
- Most prevalent in cancer
• Present in chronic disease COPD, CKD, HIV, AIDS
• Psychological and social impact
• Unexplained weight loss defines cachexia
• Fundamental difference between cachexia and secondary weight loss
  – Cachexia does not reverse with nutritional intervention
Anorexia Cachexia syndrome

• Top 5 most distressing symptoms
• Shorter prognosis
• Respond poorly to chemotherapy
• Experience more toxicity from chemo
• Psychological distress
Assessment of Anorexia Cachexia

- Thorough history
- Weight loss
- Nutritional intake
- Symptoms
- Severity of symptoms
Nursing role in management of anorexia cachexia

- Assessment
- Treatment
- Education
- Evaluation
- Reporting
- Assistance
- Nursing care
- Referrals to other HCP
Nutritional supplements

• Milk based – nutritionally complete
• Fibre enriched
• Maintain bowel function
• Juice based – supplement
• Powered – can add to foods/ fluids
• Puddings – useful in dysphagia
• Soups – savoury option
Try some supplements
# Management of Anorexia Cachexia

<table>
<thead>
<tr>
<th>Pharmacological interventions</th>
<th>Non pharmacological interventions</th>
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</thead>
<tbody>
<tr>
<td>• Aimed at stimulating appetite</td>
<td>• OT input – meal planning, adaptation aids</td>
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<tr>
<td>• Steroids</td>
<td>• Physiotherapy-</td>
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<tr>
<td>• Prokinetics</td>
<td>• Counselling</td>
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<tr>
<td>• Hormones</td>
<td>• Education</td>
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<tr>
<td>• ACE inhibitors – found to help reduce weight loss in CHD patients</td>
<td>• Exercise</td>
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<tr>
<td>• Thalidomide</td>
<td>• Nutritional supplements</td>
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Food and the dying process

- Anorexia upsetting for patient and family
- Artificial/forced nutrition will not prolong life
- Natural process
Xerostomia

- Subjective feeling of a dry mouth
- Causes:
  - Medication
  - Oral thrush
  - Mouth breathing
  - Anxiety
  - Oxygen therapy
  - Radiotherapy
  - Dehydration
Management of Xerostomia

• Local measures
• Saliva substitutes
  – Water
  – Saliva Orthana
  – Glandosane - acidic, can increase dental caries
• Salivary stimulants
  – Sugar free chewing gum
  – Pilocarpine
  – Accupuncture
  – Salivix
Mouthcare

• Aims of mouth care are
  – Minimise infection
  – Minimise halitosis
  – Alleviate discomfort
  – Moisten oral mucosa & lips
  – Small soft toothbrush most effective
  – Gentle scrubbing with gentle pressure
  – Involve family
Further reading/ references

• Oxford Handbook of Palliative Care. 2005
• Dudek, S. (2010). Nutrition Essentials for Nursing Practice.. Lippincott Williams & Wilkins