



# Malnutrition prevalence in regional oncology patients

GV Health participation in the Victorian Malnutrition in Cancer Services Point Prevalence Studies (2012 – 2018)

## Background

Malnutrition is generally prevalent in cancer patients <sup>1</sup>. Specific regional prevalence rates have previously been unknown. GV Health dietitians have participated in four repeat state-wide Malnutrition in Cancer Services prevalence studies in 2012, 2014, 2016 & 2018. Data obtained has informed service delivery and will be used to advocate for dietetic workforce increases.

## Method

Study design involved dietitians consenting, screening and assessing malnutrition prevalence in cancer patients over a common data collection period. Methodology for assessing malnutrition in Phase I & II was a validated tool (pG SGA) and for Phases III & IV; IDC Malnutrition criteria.

## Results

Similar patient numbers, demographics and tumour streams were recruited in all phases. Malnutrition risk has reduced from 48 percent in Phase I to 33 percent in Phase IV. Malnutrition prevalence has also reduced from 43 to 29%. In Phase I, GVH dietitians were involved in nutritional care of just under half (47 percent) of malnourished patients whereas in phase IV this had increased to three quarters (73 percent). The majority of patients identified as malnourished in Phase IV were within or above the healthy weight range.

## Implications to practice

- Dietitians are the key workforce to lead malnutrition assessment and nutritional intervention. This is facilitated by early malnutrition screening and identification of risk.
- Within the GV Health Oncology population, malnutrition risk and prevalence have declined over time. Despite the decline, there has been a trend for increasing malnutrition risk and prevalence over the past three point prevalence studies.
- The involvement of dietitians in the care of malnourished patients has increased.
- There remains a cohort of patients with a healthy or above healthy weight who are not identified by staff as at risk of malnutrition and are therefore not referred for dietetic input.

<sup>1</sup> Marshall K, Loeliger J 2012, *Investigating Practices Relating to Malnutrition in Victorian Cancer Services' – summary report*,

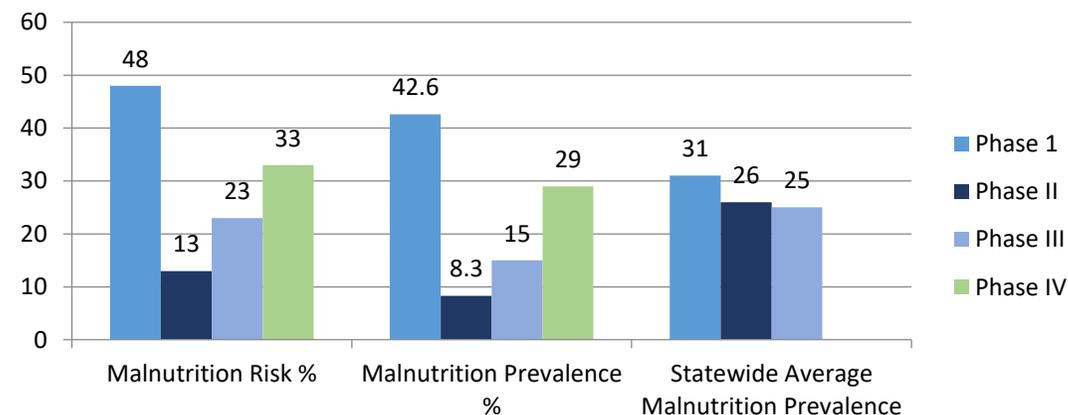


Figure 1: Comparison of VCS Point Prevalence studies: Malnutrition risk and prevalence at GV Health (2012 – 2018)

**One in three GV Health Oncology patients are at malnutrition risk and one in four are malnourished.**

Malnutrition can occur at **any** age, **any** weight and in **any** tumour stream.