In cancer, malnutrition is highly prevalent and negatively affects outcome (1-3). Nevertheless, integration of nutrition therapy into routine care of cancer patients is still to be achieved. Understanding the reasons for the discrepancy between what the evidence suggests and current clinical practice is key to enhancing the relevance of nutrition therapy in oncology and in other specialties as well. Indeed, the current article “Expert consensus on the nutritional therapy for patients with malignancies” gathers the recommendations and guidelines from the major Professional Societies in Clinical Nutrition, and with this, does demonstrate that the recognition by medical oncologists about the importance of optimal nutrition as adjuvant to anti-neoplastic treatments is increasing.

There is excellent evidence that undernutrition is an independent risk factor for higher morbidity, increased length of hospital stay, higher readmission rates, delayed recovery, lower quality of life as well as higher hospital costs and higher mortality (2-5). Similarly the evidence about the effectiveness of nutritional support has grown considerably within the last decades (2). Thus, the expert consensus guidelines now published represent the most comprehensive evaluation of nutrition yet. In order to better understand these guidelines, it is worth mentioning that nutritional support was evaluated according to the validity of relevant endpoints; these were systematically considered by ESPEN (1):

- How can clinically relevant undernutrition be diagnosed?
- Does nutritional support improve nutritional status in a specific situation?
- Does nutritional support affect prognosis in a specific situation?
- Do short periods of starvation (i.e. <7 days) matter in terms of outcome?
- What is the preferred feeding method in a given situation?
- What is the most appropriate enteral or parental formula, composition and amount for each condition?
- Does feeding beneficially affect or alternatively exacerbate the underlying pathological process?

After careful evaluation, evidence-based benefits of nutritional support were outlined. Another major step forward is the clear need for integration of nutritional support in the therapeutic strategy in cancer patients. Nutritional support is therapy: it prevents the deleterious effects of starvation while the underlying condition resolves naturally or in response to treatment. It should therefore be clear that nutritional support is indispensable for cancer patients not fulfilling their energy and substrate needs (6-8).

These guidelines do provide evidence-based information about specific problems like timing, dosing, composition and route of application. They also show where additional studies are needed and under which conditions limitation or withdrawal of nutritional support like other therapies might be adequate.

It is acknowledged that nutrition therapy has become a key component of the multimodal treatment of patients with malignancies (2-7). To standardize nutritional therapy in cancer patients, and to guarantee a feasible, effective and efficacious care, the Experts Committee on Nutritional...
Therapy for Cancer Patients of Chinese Society of Clinical Oncology (CSCO) developed the expert consensus after consultation and public opinion research in accordance with the specific situation in China. For this it included the latest guidelines for nutritional treatment by the European Society for Clinical Nutrition and Metabolism (ESPEN) and the American Society for Parenteral and Enteral Nutrition (ASPEN).

In this Editorial it is worth mentioning that oncologists feel more confident with outcome measures like response rate, dose-limiting toxicity, disease-free progression and survival. Therefore, it is likely that they are more prone to react to nutrition intervention studies showing a reduction of chemo- or radiotherapy associated toxicity, or any other hard outcome measure. Following this line of thought, evidence does show that nutrition support is a beneficial and relatively cheap adjuvant therapy that enhances the efficacy and effectiveness of anti-tumour therapies (8,9); this fact is supported by this Expert consensus, that hopefully will contribute to the implementation of nutritional care into daily clinical practice, and in had contribute to improve cancer patients’ outcomes (10).

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References
