

综合营养干预对晚期大肠癌化疗患者营养状况及生存质量的影响

《现代肿瘤医学》[ISSN:1672-4992/CN:61-1415/R] 期数: 2019年05期 页码: 800-804 栏目: 论著(消化·泌尿系肿瘤) 出版日期: 2019-02-01

Title: The effect of comprehensive nutritional intervention on the nutritional status and quality of life of advanced colorectal cancer patients undergoing chemotherapy

作者: 李竟长¹; 蒋志雄²; 张志红¹; 刘秋梅¹; 李敏¹; 卫青青¹; 倪秉强¹

1.柳州市人民医院肿瘤内科; 2.营养科, 广西 柳州 545006

Author(s): Li Jingzhang¹; Jiang Zhixiong²; Zhang Zhihong¹; Liu Qiumei¹; Li Min¹; Wei Qingqing¹; Ni Bingqiang¹

1.Department of Oncology; 2.Department of Nutrition, Liuzhou People's Hospital, Guangxi Liuzhou 545006, China.

关键词: 大肠癌; 化疗; 综合营养干预; 营养状况; 生存质量

Keywords: colorectal cancer; chemotherapy; comprehensive nutrition intervention; nutritional status; quality of life

分类号: R735.3

DOI: 10.3969/j.issn.1672-4992.2019.05.021

文献标识码: A

摘要: 目的: 探讨综合营养干预对晚期大肠癌化疗患者营养状况及生存质量的影响。方法: 选择晚期大肠癌患者100例, 随机分为对照组和观察组各50例, 对照组给予常规饮食, 观察组在常规饮食基础上给予个体化膳食指导、教育及肠内肠外营养治疗等综合营养干预, 对比治疗前后两组患者近期疗效、营养状况、免疫功能、生存质量及治疗依从性等结果变化。结果: 经综合营养干预后, 两组化疗有效率与毒副反应比较, 差异均无统计学意义 ($P>0.05$); 观察组在营养状况、免疫功能、生存质量及治疗依从性等方面优于对照组 ($P<0.05$), 差异有统计学意义。结论: 综合营养干预可有效改善晚期大肠癌化疗患者的营养状况、免疫功能、生存质量及治疗依从性, 效果明显, 值得临床推广应用。

Abstract: Objective: To investigate the effect of comprehensive nutritional intervention on the nutritional status and life quality of patients with advanced colorectal cancer underwent chemotherapy. Methods: A total of 100 patients with advanced colorectal cancer were randomly divided into 2 groups, including the control group and the observation group, with 50 cases in each group. Patients in the control group were treated with a regular diet, while patients in the observation group were treated with extra personalized dietary guidance, education, enteral and parenteral nutritional therapy and other nutritional interventions. The short-term efficacy, nutritional status, immune function, life quality, and treatment compliance before and after treatment were compared between the two groups. Results: After comprehensive nutritional interventions, there was no significant difference between the two groups in the efficacy of chemotherapy and side effects ($P>0.05$). The observation group was better than the control group in terms of nutritional status, immune function, life quality, and treatment compliance ($P<0.05$), and the difference was statistically significant. Conclusion: Comprehensive nutritional interventions can effectively improve the nutritional status, immune function, quality of life, and treatment compliance of patients with advanced colorectal cancer underwent chemotherapy. The effect is obvious and worthy of clinical application.

参考文献/REFERENCES

- [1] Siegel RL, Miller KD, Jemal A. Cancer statistics, 2018 [J]. CA Cancer J Clin, 2018, 68(1): 7-30.
- [2] Hebuterne X, Lemaire E, Michallet M, et al. Prevalence of malnutrition and current use of nutrition support in patients with cancer [J]. J Parenter Enteral Nutr, 2014, 38: 196-204.
- [3] Lopes JP, Pm DCCP, Af DRBV, et al. Nutritional status assessment in colorectal cancer patients [J]. Nutr Hosp, 2013, 28(2): 412-418.
- [4] Salas S, Mercier S, Moheng B, et al. Nutritional status and quality of life of cancer patients needing

- exclusive chemotherapy: A longitudinal study [J]. *Health & Quality of Life Outcomes*, 2017, 15(1): 85.
- [5] Ye Xianghong, Zhong Qianwen, Dong Lu, et al. Investigation and analysis of malnutrition status of patients undergoing postoperative adjuvant chemotherapy for gastrointestinal tumors [J]. *Intestinal And Enteral Nutrition*, 2017(6): 336-340. [叶向红, 衷倩雯, 董露, 等. 胃肠道肿瘤术后辅助化疗病人营养不良现状调查与分析 [J]. *肠外与肠内营养*, 2017(6): 336-340.]
- [6] Ihara K, Yamaguchi S, Shida Y, et al. Poor nutritional status before and during chemotherapy leads to worse prognosis in unresectable advanced or recurrent colorectal cancer [J]. *International Surgery*, 2015, 17: 67-71.
- [7] Zi□tarska M, Krawczyk-lipiec J, Kraj L, et al. Nutritional status assessment in colorectal cancer patients qualified to systemic treatment [J]. *Contemporary Oncology*, 2017, 21(2): 157.
- [8] Lochs H, Allison SP, Meier R, et al. Introductory to the ESPEN guidelines on enteral nutrition: Terminology, definitions and general topics [J]. *Clinical Nutrition*, 2006, 25(2): 180.
- [9] Wan Chonghua, Chen mingqing, Zhang Canzhen, et al. The EORTC QLQ-C30 Chinese version of the quality of life measurement scale for cancer patients [J]. *Journal of Applied Oncology*, 2005, 20(4): 353-355. [万崇华, 陈明清, 张灿珍, 等. 癌症患者生命质量测定量表EORTC QLQ-C30中文版 [J]. *实用肿瘤杂志*, 2005, 20(4): 353-355.]
- [10] Arends J, Bachmann P, Baracos V, et al. ESPEN guidelines on nutrition in cancer patients [J]. *Clin Nutr*, 2017, 36(1): 11-48.
- [11] Loan BTH, Nakahara S, Tho BA, et al. Nutritional status and postoperative outcomes in patients with gastrointestinal cancer in Vietnam: A retrospective cohort study [J]. *Nutrition*, 2017, 48: 117-121.
- [12] Hasenberg T, Essenbreis M, Herold A, et al. Early supplementation of parenteral nutrition is capable of improving quality of life, chemotherapy-related toxicity and body composition in patients with advanced colorectal carcinoma undergoing palliative treatment: Results from a prospective, randomized clinical trial [J]. *Colorectal Dis*, 2010, 12(10): e190-199.
- [13] Zi□tarska M, Krawczyk-Lipiec J, Kraj L, et al. Chemotherapy-related toxicity, nutritional status and quality of life in precachectic oncologic patients with, or without, high protein nutritional support. A prospective, randomized study [J]. *Nutrients*, 2017, 9(10): 1108.
- [14] Baracos VE, Martin L, Korc M, et al. Cancer-associated cachexia [J]. *Nat Rev Dis Primers*, 2018, 4: 17105.
- [15] Peltz G. Nutrition support in cancer patients: A brief review and suggestion for standard indications criteria [J]. *Nutr J*, 2002, 30(1): 1-5.
- [16] De CM, Panarello G, Fantin D, et al. Parenteral nutrition in cancer patients receiving chemotherapy: Effects on toxicity and nutritional status [J]. *J Parenter Enteral Nutr*, 1993, 17 (6): 513 - 518.
- [17] Maruyama M, Nagahama T, Sugano N, et al. Loco-regional chemotherapy at the outpatient clinic for gastric cancer patients with home enteral nutrition [J]. *Gan To Kagaku Ryoho*, 2011, 38(12): 2366-2368.
- [18] Zheng Guoliang, Zheng Zhichao, Zhao Yan, et al. The clinical application of strengthening low nitrogen and low calorie parenteral nutrition support of glutamine in the postoperative stress period of gastric cancer with nutritional risk [J]. *Advances in Modern Biomedicine*, 2013, 13(13): 2479-2484, 2492. [郑国良, 郑志超, 赵岩, 等. 强化谷氨酰胺的低氮低热量肠外营养支持在存在营养风险的胃癌术后应激期的临床应用 [J]. *现代生物医学进展*, 2013, 13(13): 2479-2484, 2492.]
- [19] Zhong HJ, Ying JE, Ma SL, et al. Effect of Supportan on nutritional status and immune function of late-staged gastric cancer patients undergoing chemotherapy [J]. *Chinese Journal of Gastrointestinal Surgery*, 2006, 9(5): 405-408.
- [20] Qiang Caoxia. Systematic nutritional intervention in gastric tumor patients with chemotherapy [J]. *Modern Oncology*, 2016, 24(03): 436-439. [羌曹霞. 系统营养干预在胃癌化疗患者中的应用 [J]. *现代肿瘤医学*, 2016, 24(03): 436-439.]
- [21] Caro MM, Laviano A, Pichard C, et al. Relationship between nutritional intervention and quality of life in cancer patients [J]. *Nutr Hosp*, 2007, 22(3): 337-350.
- [22] Abu-Saad Huijjer H, Abboud S, Doumit M. Symptom prevalence and management of cancer patients in Lebanon [J]. *J Pain Symptom Manage*, 2012, 44(3): 386-399.
- [23] Sharma A, Walker LG, Monson JR. Baseline quality of life factors predict long term survival after elective resection for colorectal cancer [J]. *Int J Surg Oncol*, 2013, 2013: 269510.
- [24] Xie FL, Wang YQ, Peng LF, et al. Beneficial effect of educational and nutritional intervention on the nutritional status and compliance of gastric cancer patients undergoing chemotherapy: A randomized trial [J]. *Nutr Cancer*, 2017, 69(5): 762-771.

备注/Memo: 广西卫生厅资助课题 (编号: Z2012587)

更新日期/Last Update: 2019-02-01