

3. Evaluation de l'état nutritionnel

Elle doit être intégrée au dispositif d'annonce et des informations nutritionnelles adaptées à la pathologie du patient doivent être fournies au patient.

Cette évaluation peut comprendre (107,108) :

- Dépistage de l'état nutritionnel lors du diagnostic avec notamment poids actuel et perte pondérale, calcul de l'IMC.
- Identification rapide des signes et symptômes d'anorexie, de cachexie et de sarcopénie. La détermination de la masse musculaire par un bilan d'imagerie (exemple : scanner) pour identifier précocement la malnutrition/sarcopénie pourrait être utile.
- Utilisation de biomarqueurs spécifiques pour évaluer l'état inflammatoire lié au cancer (CRP, albumine).
- Utilisation de la calorimétrie indirecte pour estimer la dépense énergétique au repos afin de personnaliser les besoins en énergie et protéines.
- Mesure de la circonférence musculaire brachiale (CMB) en cas de 3ème secteur.
- Evaluation systématique des ingesta :
 - Par échelle visuelle ou verbale analogique (EVA).
 - Par une consultation diététique avec évaluation de la prise alimentaire sur 2 à 7 jours.
 - En cas d'utilisation de score multidimensionnel de dépistage pour évaluer le statut nutritionnel, il est recommandé d'utiliser le *subjective global assessment* (SGA) (109) ou le *patient generated subjective global assessment* (PG-SGA) (110) ou le *mini nutritional assessment* (MNA)^N pour les patients de gériatrie.

La prise en charge nutritionnelle dépend des besoins nutritionnels et métaboliques du patient, qui sont liés au stade et à l'état nutritionnel du cancer (Tableau 25).

Type	Précachexie	Cachexie	Cachexie réfractaire
Caractéristiques	Perte de poids ≤ 5% Anorexie Modifications métaboliques	Perte de poids >5% OU IMC <20kg/m ² avec perte >2% OU sarcopénie avec perte de poids >2%	Catabolique, aucune réponse au traitement, survie attendue < 3 mois
Traitement	Conseils nutritionnels Alimentation enrichie Compléments Nutritionnels Oraux	Compléments Nutritionnels Oraux Ou Nutrition Entérale	Nutrition palliative pour soulager les sentiments de faim et de soif

Tableau 25 – Prise en charge de la dénutrition (Adapté de (108))

^N Accessible sur: www.mna-elderly.com/forms/MNA_english.pdf

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