Nutritional status and psychiatric disorders among elderly lung cancer patients: special attention for better disease management

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Introduction:

Prevalence of weight loss and depression and/or anxiety among lung cancer (LC) patients is high. Aim of this study was to examine malnutrition risk and presence of psychiatric disorders among geriatric LC patients as well as its influence on overall survival (OS).

Methods:

This study was conducted at the Institute for Pulmonary Diseases of Vojvodina, Serbia. Assessment of malnutrition risk was done by the Malnutrition Universal Screening Tool (MUST) and for assessment of psychiatric disorders Hospital Anxiety Depression Scale (HADS) was used. Survival follow-up was 5 years.

Results:

Out of total 119 observed patients with diagnosed LC 39 (32.8%) were aged over 65 (Mean 69.97) and included in further analysis. Majority of this patients were male (71.8%) in ECOG PS 1 (79.5%). We observed psychiatric disorders in 43.6% of patients and 23.1% of patients had combined anxiety with depression. Malnutrition risk was observed in 41.0% of patients, out of those high risks in 30.8%. Combined psychiatric disorder and malnutrition risk was observed in 25.6% of patients. Median OS was 17.8 months.

Gender	
Female	28.2% (11/39)
Male	71.8% (28/39)
Smoking habits	
Never smoker	20.5% (8/39)
Ex smoker	20.5% (8/39)
Smoker	59.0% (23/39)
PCKY	
42.54	
ECOG PS	
0	15.4% (12/39)
1	79.5% (31/39)
2	5.1% (2/39)
Psychiatric disorder	
43.6% (17/39)	
Anxiety	5.1% (2/39)
Depression	15.4% (6/39)
Anxiety and depression	23.1% (9/39)
Malnutrition risk	
41.0% (16/39)	
Medium risk	10.2% (4/39)
High risk	30.8% (12/39)
Combined burden	
26.5% (10/39)	

Survival

Significantly lower OS was observed in patients with combined malnutrition risk and psychiatric disorders ($p=0.010$). One-year survival was 64.1% (25/39), 3-year 15.4% and 5-year 2.6%.

Overall Survival (OS)

Conclusion:

Using easy-to-use questionnaires should be of great importance in everyday practice with the aim of early recognition of psychiatric disorders and prevention of cachexia. Considering decreased physiological reserve and other health conditions in the elderly special attention and personalized treatment approach should be made for each of those patients in order to improve their QoL.

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