MASCC Summary Review
Expert Opinion/Guidance in the Use of Clinically Assisted Nutrition in Patients with Advanced Cancer

PALLIATIVE CARE STUDY GROUP
Citation

Publication History

• Date of final search of literature: July 2020
• Date on-line publication: October 2021
# Levels of Evidence

<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Evidence obtained from meta-analysis of multiple, well-designed, controlled studies; randomized trials with low false-positive and false-negative errors (high power)</td>
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<tr>
<td>II</td>
<td>Evidence obtained from at least one-well designed experimental study; randomized trials with high false-positive and/or false-negative errors (low power)</td>
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<tr>
<td>III</td>
<td>Evidence obtained from well-designed, quasi-experimental studies, such as nonrandomized, controlled single-group, pretest-posttest comparison, cohort, time, or matched case-control series</td>
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<tr>
<td>IV</td>
<td>Evidence obtained from well-designed, non-experimental studies, such as comparative and correlational descriptive and case studies</td>
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<tr>
<td>V</td>
<td>Evidence obtained from case reports and clinical examples</td>
</tr>
</tbody>
</table>
# Categories of guidelines

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Reserved for guidelines that are based on Level I or Level II evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suggestion</td>
<td>Used for guidelines that are based on Level III, Level IV, and Level V evidence; this implies panel consensus on the interpretation of this evidence</td>
</tr>
<tr>
<td>No guideline possible</td>
<td>Used when there is insufficient evidence on which to base a guideline; this implies (1) that there is little or no evidence regarding the practice in question, or (2) that the panel lacks consensus on the interpretation of existing evidence</td>
</tr>
</tbody>
</table>
Recommendation 1

“All patients with advanced cancer should have regular nutritional assessments”

• Level of evidence – V
• Category of guideline - suggestion
Recommendation 2

“Patients with nutritional problems should be reviewed by a specialist dietitian (with / without other members of the nutrition support team)”

• Level of evidence – V
• Category of guideline - suggestion
Recommendation 3

“Any decision to initiate clinically assisted nutrition should be made by an appropriately constituted multidisciplinary healthcare team together with the patient and their family”

- Level of evidence – V
- Category of guideline - suggestion
Recommendation 4

“Clinically assisted nutrition should be considered in patients with an inability (reversible / irreversible) to ingest sufficient nutrients”

• Level of evidence – V
• Category of guideline - suggestion
Recommendation 5

“Clinically assisted nutrition should be considered in patients with an inability (reversible / irreversible) to absorb sufficient nutrients”

• Level of evidence – V
• Category of guideline - suggestion
Recommendation 6

“Clinically assisted nutrition should be considered in patients at risk of dying from malnutrition before dying from their cancer”

• Level of evidence – V
• Category of guideline - suggestion
Recommendation 7

“Clinically assisted nutrition is not indicated for the treatment of cancer cachexia”

- Level of evidence – V
- Category of guideline - suggestion
Recommendation 8

“Protocols / processes should be in place to deal with conflicts over the initiation (or withdrawal) of clinically assisted nutrition”

- Level of evidence – V
- Category of guideline - suggestion
Recommendation 9

“Patients receiving clinically assisted nutrition should have a nutritional care plan which defines the agreed objectives of treatment, and the agreed conditions for withdrawal of treatment”

• Level of evidence – V
• Category of guideline - suggestion
Recommendation 10

“Enteral tube feeding is generally preferable to parenteral nutrition (if possible)"

• Level of evidence – I
• Category of guideline - recommendation
Recommendation 11

“Clinically assisted nutrition should be available in all settings, including the home setting”

• Level of evidence – IV
• Category of guideline - suggestion
Recommendation 12

“All patients receiving clinically assisted nutrition should be regularly reassessed”

• Level of evidence – V
• Category of guideline - suggestion
Other References

