Aim: Weight loss is a common problem in cancer patients. Cancer-related weight loss is associated with inferior response and tolerance to treatment, and can have a negative impact on patients’ quality of life (QOL). Intervention with oral nutritional supplements may reduce or stabilize weight loss and positively influence QOL. However, appreciation of the effective use of oral nutritional supplements in oncology patients is suboptimal. Research into cancer-related weight loss does not receive high impact on patients’ quality of life (QOL). Intervention with oral nutritional supplements may reduce or stabilize weight loss and positively influence QOL. However, appreciation of the effective use of oral nutritional supplements in oncology patients is suboptimal. Research into cancer-related weight loss does not receive high priority and analyses suggest the number of published congress abstracts on this topic is disproportionate to the unmet need. This survey, among health care professionals, evaluated awareness surrounding weight loss in cancer patients and the role of supportive nutritional care during treatment.

Methods: ECCO-ESMO-ESTRO 2013 congress delegates participated in the survey. The following were evaluated: current weight loss monitoring practices; perception of the link between weight loss and treatment adjustment; and whether sufficient education was available on nutritional supportive care during chemo/radiotherapy, and before/after surgery.

Results: In total there were 565 survey respondents. Their demographics were representative of the meeting attendees, with the majority (67%) being medical oncologists and from Europe (52%). Overall, 90% of participants stated they monitor weight loss throughout treatment. The most frequently reported links between weight loss and a need for cancer treatment adjustment (eg, dose reduction) were noted to occur at the start of treatment (37%) and/or when weight loss becomes visible (cachexia) (36%). The vast majority of respondents stated that there was a need for more education concerning the use of nutritional care during chemo/radiotherapy (92%) and before/after surgery (85%).

Conclusions: In current oncology practice, weight loss appears to be measured routinely and the requirement for weight loss-triggered cancer treatment adjustment is recognised. However, there is a need for more education on supportive nutritional care in the management of cancer-related weight loss in the chemo/radiotherapy and perioperative setting.