

Nutritional status and associated factors among cancer patients attending Teaching Hospital, Karapitiya: Identifying the opportunities for nursing interventions

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Introduction

Cancer is a global health problem. Increasing incidence of cancer is observed both in developed and developing countries, including Sri Lanka. All cancer treatment options carry nutrition risk and may lead to malnutrition. Thus, it is critical to identify cancer patients at risk for malnutrition in order to improve the patient outcome.

Aim

To evaluate the nutritional status and associated factors among cancer patients attending Teaching Hospital, Karapitiya (THK) and to identify the opportunities for nursing interventions to improve their nutrition

Methods

A descriptive, cross-sectional study was conducted among 300 cancer patients. Their nutritional status were assessed using Body Mass Index (BMI), Mid Upper Arm Circumference (MUAC) and 24-hour dietary recall. Data on associated factors were collected using an interviewer-administered questionnaire. Data were analyzed using SPSS statistical software.

Results

Study participants had a mean age of 56.5 ± 12.0 years and 71.0% of them were females. Approximately 49% had normal BMI, 25.0% were underweight and 26% were overweight/obese. According to MUAC, 27.3% were at risk of undernutrition. Carbohydrate, protein and fruit intake were inadequate in over 40% of the sample according to 24 hour dietary recall. Over 60% reported an adequate intake of vegetables and dairy products. Presence of disease/treatment related side effects ($p < 0.01$), cancers in gastrointestinal tract ($p < 0.001$), shorter duration since diagnosis ($p < 0.01$) and having other chronic diseases ($p < 0.05$) were significantly associated with poor nutritional status. Older age ($p < 0.05$), low level of education ($p < 0.01$) and low income ($p < 0.05$) were also associated with undernutrition among cancer patients. Over 85% reported satisfaction regarding nurses' contribution towards their nutritional health. Majority agreed that nurses can facilitate their nutritional health by appropriate nutrition education (>63%), providing satisfactory answers for patients' questions about nutrition (84.4%) and considering about their mental well-being (85.3%).

Conclusion

A considerable proportion of cancer patients attending THK is malnourished. Several factors related to malnutrition and opportunities for nursing interventions to improve nutrition were identified in this study. Contribution of nursing staff towards nutritional well-being of cancer patients appears to be satisfactory. Further studies are needed in other regions of Sri Lanka to verify above findings.