

AB096. 141. Altered appetite, body weight and quality of life after curative oesophagectomy

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Background: Improved oncologic outcomes in oesophageal cancer have resulted in increased survivorship, and a focus on long-term health-related quality-of-life (HR-QL). Gastrointestinal symptoms are common among patients after oesophagectomy, but data regarding the postoperative trajectory of nutrition-related symptoms and their relation to body weight loss (%BWL) and HR-QL are lacking. This study aimed to characterise the prevalence of gastrointestinal symptoms and altered appetite, and their impact on postoperative HR-QL in survivorship.

Methods: Consecutive disease-free patients who underwent oesophagectomy for oesophageal cancer from 2010 to 2015 were invited to participate. Validated EORTC QLQC30, OG25, OES18, modified gastrointestinal symptom rating scale and Sigstad questionnaires were administered by postal survey.

Results: Among a representative cohort of 89 patients (75% response rate), %BWL was 13.8%±10.0% (P<0.0001), which did not correlate with median time since surgery [4.4 (2.2–7.6) years]. Eating-related symptoms were present in 76% of respondents, with 42% described ongoing worries about their weight. Reflux (64%), early satiety (47%), diarrhoea (45%), and appetite loss (42%) were the most prevalent individual symptoms reported. Forty-six percent of patients scored >7 on Sigstad score, indicative of post-prandial dumping syndrome. Clinically severe weight loss (≥15% BWL) was associated with reduced global HR-QL (P=0.04), while eating symptom score (r²=0.23, P<0.0001) and appetite loss (r²=0.24, P<0.0001) were significant predictors of HR-QL in survivorship.

Conclusions: Nutritional symptoms are common among disease-free patients after oesophagectomy, and are key predictors of HR-QL in survivorship. Further study is needed to facilitate the development of targeted approaches to optimise HR-QL in recovery, and into survivorship, following curative surgery for oesophageal cancer.

Keywords: Health-related quality of life (HR-QL); oesophagectomy; appetite; survivorship

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