



Cancer malnutrition point prevalence study (PPS) 2016: final results

The biennial cancer malnutrition point prevalence study (PPS) has been conducted in 2012, 2014, 2016 and 2018 data collection will be completed in October.



	2012	2014	2016
No. patients	1677	1913	1340
No. inpatients	337	350	321
No. ambulatory patients	1340	1563	1019
No. participating sites	17	27	16

OVERALL MALNUTRITION RISK

Overall patients at risk of malnutrition (%) 2012: **36** 2014: **33** 2016: **37**

Malnutrition prevalence – overall (%)

2012: **31** 2014: **26** 2016: **23**

Malnutrition prevalence – inpatients (%)

2012: **57** 2014: **57** 2016: **37**

Malnutrition prevalence – ambulatory patients (%)

2012: **25** 2014: **19** 2016: **18**

Those with malnutrition were more likely to:

Be an inpatient in hospital



Be older (>65 yrs)



Live alone

Malnourished patients have poorer outcomes than well-nourished patients:

Higher mortality rate at 30 days



4 times more likely to be re-admitted to hospital within 30 days

What does this mean?

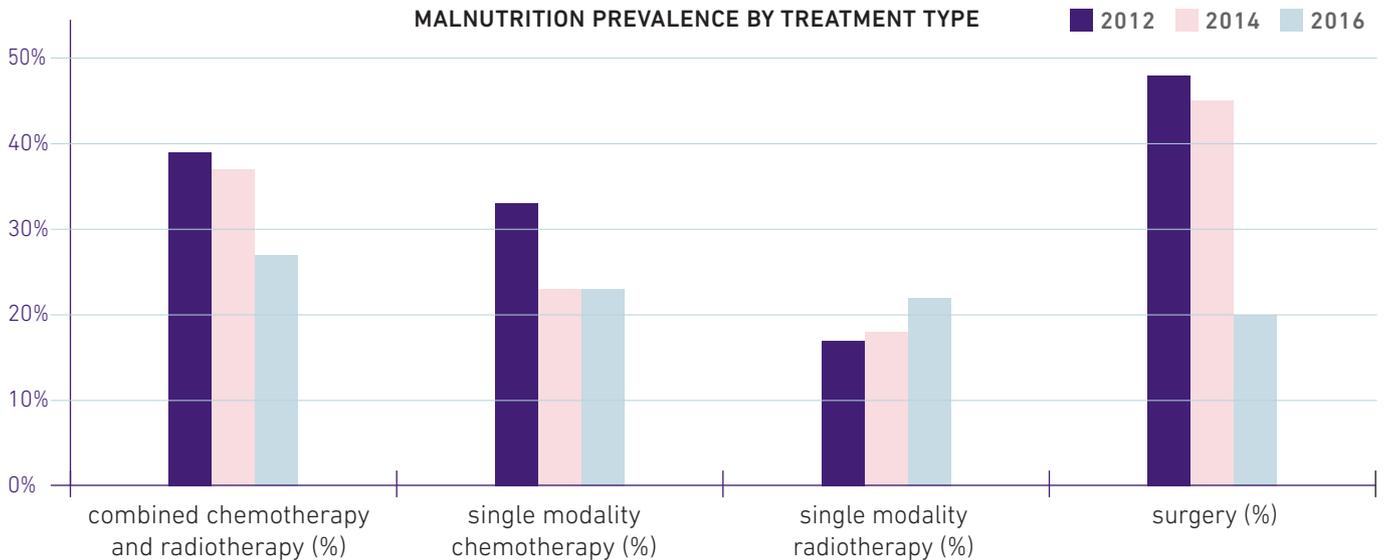
Overall, malnutrition prevalence is trending downward within Victorian health services

This is a reflection of:

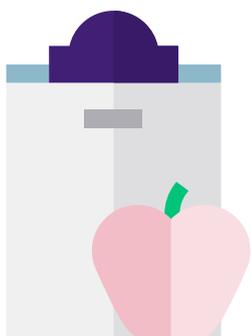
- Increased awareness of cancer malnutrition
- Likely improved malnutrition screening rates and referrals to the dietitian
- A greater proportion of those with malnutrition under the care of a dietitian
- Areas for improvement have been identified and work targeted through the VCMC program of work – including improvements specifically to clinical care, quality improvement initiatives, education supporting health professionals and system-wide improvements that benefit a large proportion of the cancer population.



MALNUTRITION PREVALENCE BY TREATMENT TYPE



	2012	2014	2016
Tumour Stream			
Highest malnutrition prevalence (tumour stream, %)	UGI 61%	UGI 48%	UGI 43%
	H&N 40%	H&N 36%	Lung 29%
	Lung 37%	Lung 33%	H&N 28%
Lowest malnutrition prevalence (tumour stream, %)	Breast 14%	Breast 13%	Breast 8%, Skin & melanoma 8%
Dietetic Intervention			
Proportion of malnourished patients receiving dietitian intervention	56%	56%	68%



Further work

The biennial cancer malnutrition PPS is important to help monitor changes over time and help identify gaps both locally and at a state level

Ongoing suite of projects within the VCMC program of work

Targeted improvements from the 2016 PPS results should be:

Early identification of malnutrition risk in vulnerable groups

Sustainable and effective nutrition care/intervention models to manage the high volume of malnourished patients, high risk tumour streams that continue to have high rates of malnutrition despite high rates of dietetic intervention and nutrition care regardless of location.