

PREOPERATIVE NUTRITIONAL STATUS AND LENGTH OF ICU STAY OF PATIENTS SUBMITTED TO CRS AND HIPEC: DATA FROM A SOUTHERN BRAZILIAN HOSPITAL

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INTRODUCTION

Malnutrition is prevalent in cancer patients and is often present in patients with peritoneal carcinomatosis at preoperative admission. Preoperative malnutrition is associated with adverse outcomes, such as morbidity and mortality, longer length of stay and higher healthcare costs.

OBJECTIVE

The aim of this study was to associate preoperative nutritional status with length of stay in intensive care units (ICU) in patients undergoing CRS and HIPEC at a southern Brazilian hospital complex.

METHODS

We performed a retrospective analysis of patients who had been submitted to CRS and HIPEC between 2015 and 2023. Nutritional assessment was evaluated before surgery using Nutritional Status by Patient Generated Subjective Global Assessment (PS-SGA). Length of ICU stay was also taken into account.

RESULTS

A total of 50 patients were included (55.1 ±11 years, 80% females). Pseudomyxoma was the most common type of cancer (60%) in our sample and malnutrition was found in 60% of patients (52% moderate, 8% severe). There was no association between nutritional status and length of stay ($p=0.865$). However, a higher ICU length of stay was observed in severe malnourished patients when compared to moderate malnourished and well-nourished patients (median of 14 days IQR 7.75-39; vs 6 days IQR 5-11; vs 6 days, IQR 4.25-6.75 respectively; $p=0.017$).

CONCLUSION

Routine preoperative nutritional assessment is important prior to CRS and HIPEC in order to reduce unfavorable outcomes, such as longer ICU length of stay.