



# Ernæring ved palliativ behandling

Klinisk professor, overlæge Mette Asbjørn Neergaard  
Enhed for Lindrende Behandling, Kræftafdelingen, AUH



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**”Man SKAL da have noget at spise!”**

**”Hun skal da ikke dø af sult!”**

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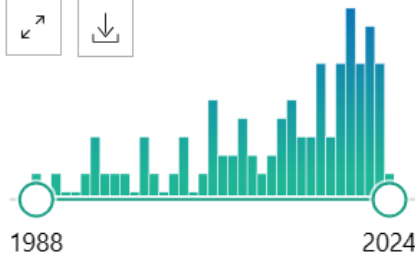
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RESULTS BY YEAR



Routine laboratory parameters to support decision on parenteral **nutrition** in **palliative** care.

1

Cite

Kum L, Zeilinger EL, Vohla D, Kitta A, Brunevskaya N, Adamidis F, Ecker F, Masel EK, Mayr-Pirker B, Meyer AL, Sturtzel B, Kreye G, Unsel M.

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SPECIAL ARTICLE

## Cancer cachexia in adult patients: ESMO Clinical Practice Guidelines<sup>☆</sup>

J. Arends<sup>1</sup>, F. Strasser<sup>2,3</sup>, S. Gonella<sup>4,5</sup>, T. S. Solheim<sup>6,7</sup>, C. Madeddu<sup>8</sup>, P. Ravasco<sup>9,10,11</sup>, L. Buonaccorso<sup>12</sup>, M. A. E. de van der Schueren<sup>13,14</sup>, C. Baldwin<sup>15</sup>, M. Chasen<sup>16,17,18</sup> & C. I. Ripamonti<sup>19</sup>, on behalf of the ESMO Guidelines Committee<sup>\*</sup>

<sup>1</sup>Department of Medicine I, Medical Center — University of Freiburg; Faculty of Medicine, University of Freiburg, Freiburg, Germany; <sup>2</sup>Integrated Cancer Rehabilitation and Cancer Fatigue Clinic, Klinik Gais/Kliniken Valens; <sup>3</sup>Clinic Medical Oncology and Hematology, Cantonal Hospital St Gallen, St Gallen, Switzerland; <sup>4</sup>Direction of Health Professions, Azienda Ospedaliero Universitaria Città della Salute e della Scienza of Turin, University of Turin, Turin; <sup>5</sup>Department of Public Health and Pediatrics, University of Turin, Turin, Italy; <sup>6</sup>Department of Clinical and Molecular Medicine, Faculty of Medicine and Health Sciences, Norwegian University of Science and Technology (NTNU), Trondheim; <sup>7</sup>Cancer Clinic, Trondheim University Hospital, Trondheim, Norway; <sup>8</sup>Medical Oncology Unit, Azienda Ospedaliero Universitaria Cagliari, Department of Medical Sciences and Public Health, University of Cagliari, Cagliari, Italy; <sup>9</sup>Immuno-Hemotherapy and Oncology, University Hospital of Santa Maria, CHULN, Lisbon; <sup>10</sup>Center for Interdisciplinary Research in Health, Universidade Católica Portuguesa, Lisbon; <sup>11</sup>University of Lisbon, Portugal; <sup>12</sup>Psycho-Oncology Unit, Azienda USL—IRCCS, Reggio Emilia, Italy; <sup>13</sup>Department of Nutrition, Dietetics and Life Style, School of Allied Health, HAN University of Applied Sciences, Nijmegen; <sup>14</sup>Division of Human Nutrition and Health, Wageningen University & Research, Wageningen, The Netherlands; <sup>15</sup>Department of Nutritional Sciences, King's College London, London, UK; <sup>16</sup>Department of Medicine, University of Toronto, Toronto; <sup>17</sup>Department of Family Medicine, McMaster University, Hamilton; <sup>18</sup>William Osler Health Services, Brampton, Canada; <sup>19</sup>Oncology-Supportive Care in Cancer Unit, Department of Onco-Haematology, Fondazione IRCCS Istituto Nazionale dei Tumori Milano, Milan, Italy



Available online 28 April 2021

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RESULTS BY YEAR



1988



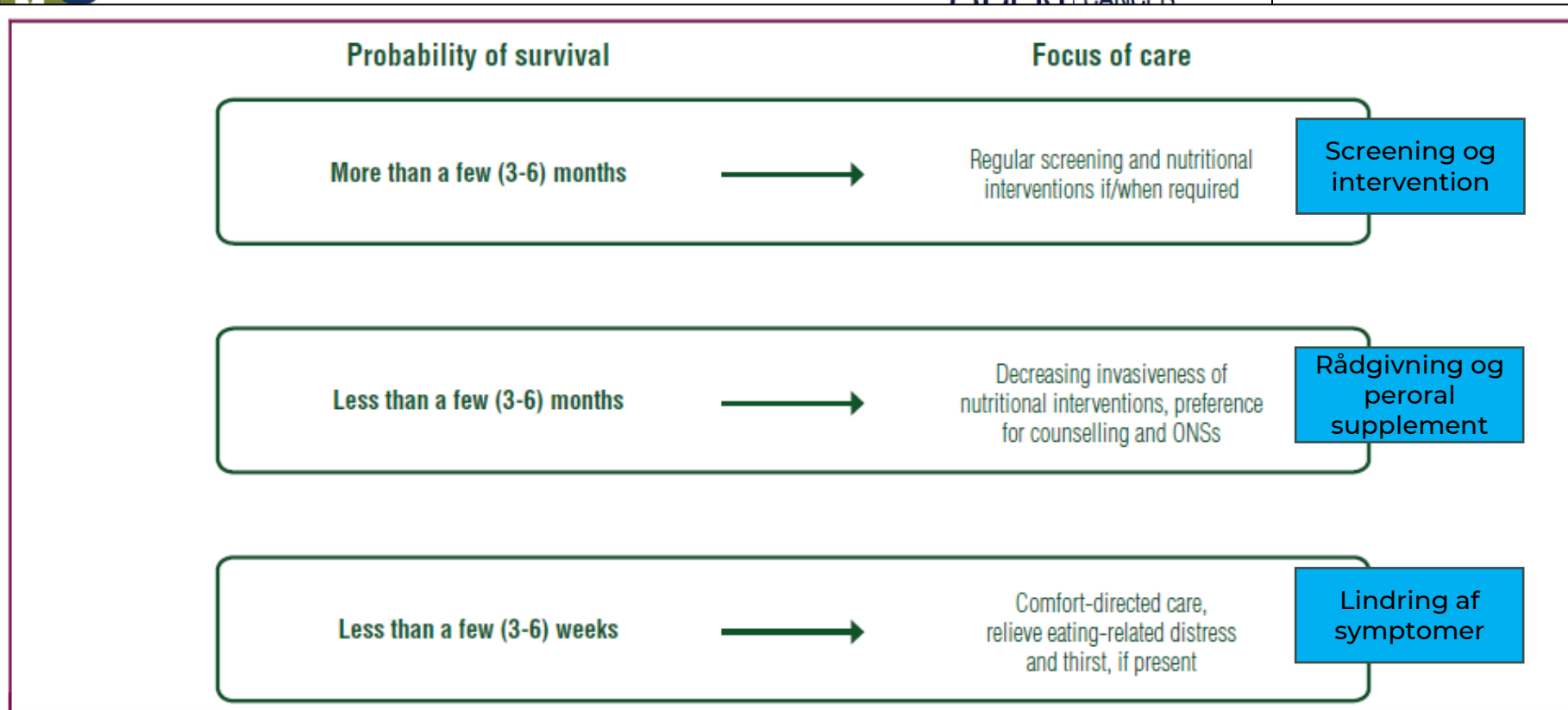
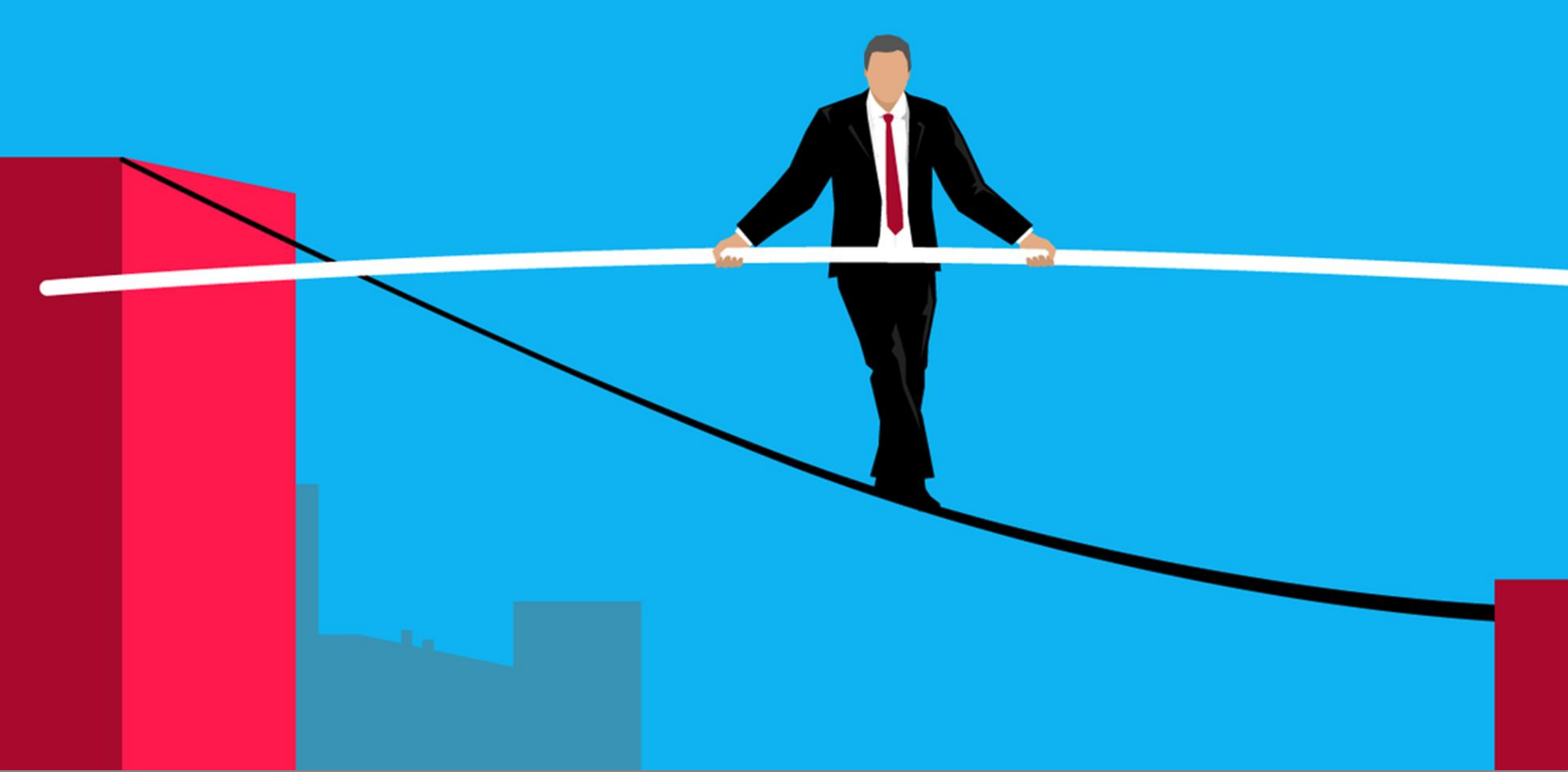


Figure 1. Invasiveness of interventions relative to expected survival. ONS, oral nutritional supplement.



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# Kunstig ernæring er en behandling!

## INDIKATIONER

- Sult
- Træthed
- Ønske om livsforlængelse

## SYGDOMSSTATUS

- Forventet restlevetid
- Sygdomsudbredning
- Performancestatus
- Forløbet hidtil
- Funktion af tarm

## BIVIRKNINGER

- Kvalme
- Ødemer (Perifert / Centralt)
- Praktiske udfordringer
- Problemer m IV-adgang/sonde
- Pris

## FÆLLES BESLUTNINGSTAGEN

- Hvad ønsker patient / pårørende?
- Hvad er målet?
- Information om virkning / bivirkning
- Information om fremtidsscenarier

# Kunstig ernæring skal:

- **Overvejes**  
(restlevetid, sygdomsudbredning og forløb, patientens ønsker, tarmfunktion)
- **Ordineres**
- **Monitoreres (HVEM?)**
- **Reduceres (HVEM?)**
- **Seponeres (HVEM?)**





**VÆLG  
KLOGT**

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