

PALLIATIVE CARE TIPS - Doreen Oneschuk, MD. Tertiary Palliative Care Unit, Grey Nuns Community Hospital, Edmonton, AB. Issue #24 (Collect them all). Revised October 2004

Total parenteral nutrition (TPN): may be considered in selected patients with advanced cancer.

TPN is not indicated in the management of cancer-related anorexia and cachexia which is the most common cause of decreased appetite and weight loss in cancer patients. Cancer-related anorexia/cachexia arises secondary to the secretion of pro-inflammatory cytokines that leads to a hypercatabolic state.

However, in the smaller number of cases where malnutrition has/or will occur due to a patient's inability to eat because of a non-functioning gastrointestinal tract, TPN may be of value. The primary goal would be to maintain or restore the patient's nutritional status and to correct or prevent malnutrition-related symptoms.

Examples for which TPN may be indicated: patients with ovarian carcinoma with bowel obstruction; patients with head and neck cancers when enteral nutrition is not possible.

Relative Patient Selection Criteria:

1. Life expectancy in order of months and a present high quality of life
2. Medically stable and can be easily monitored
3. Physically functional, Karnofsky score >50
4. Adequate venous access
5. For home TPN, the patient and/or family should be cognitively and psychologically capable of administering the TPN
6. For home TPN, the patient and/or family should be compliant and show a willingness to participate in the administration and medical follow-up of the TPN

Effectiveness of TPN:

To date, the effectiveness of TPN has been derived from case reports and retrospective surveys versus prospective studies.

Reports on quality of life (QOL) are mixed although patients and families occasionally report greater improvements in QOL than assessed by health care providers.

Survival may be prolonged in some individuals.

Potential TPN Side Effects:

Promotion of bacterial translocation across the gastrointestinal tract, metabolic disturbances, and hepatic dysfunction.

Home TPN:

Is a viable option for some patients but is labor intensive and in Edmonton the TPN program has a limited capacity. A duration of treatment is expected to be at least 6 weeks.

For further information about Home TPN and Cancer and selection criteria for patients with advanced cancer contact: The Northern Alberta Home TPN Program (Capital Health Authority) at (780) 477-4236.

REMEMBER: For referrals, questions, or telephone consultations call 496-1300 weekdays and weekends.

Palliative Care Tips are now available on our Website: www.palliative.org