Aim: The majority of cancer patients develop cancer cachexia (CC). CC is a debilitating and life-threatening, multifactorial condition that is characterized by altered metabolism and reduced food intake, contributing to weight loss (mainly lean body mass). Existing treatment approaches are limited in their ability to treat CC, while too little is currently done to prevent it. Surveys were carried out to gain insights on the current perspectives of health care professionals (HCPs) on CC.

Methods: Three surveys were conducted globally amongst HCPs involved in the management of CC (N=541 for S1; N=159 for S2; and N=76 for S3). Topics evaluated included: term associations with CC; factors leading to drug treatment consideration and initiation; primary goals of CC treatment and the desired improvements.

Results: Most participants were oncologists (95%). Unaided, respondents defined CC simply as weight loss; other terms considered synonymous were decreased appetite and wasting/cancer wasting. In S1, the most common factors given for the consideration of drug treatment were weight loss >5% (69% of respondents), unresponsive and procatabolic cancer (50%), and BMI <20 plus weight loss >2% (46%). When asked in S2, at what percent of weight loss CC would be diagnosed and treated, almost half (46%) responded with 10%, over one-third with 15–20%, and more than 10% would wait until ≥25% weight loss. In S3, HCPs indicated that their primary goals of CC therapy were to promote weight gain/stabilization, improve quality of life (QoL), and minimize side effects. To address the need for improvements in CC management, respondents expressed the desire for treatments that would be CC specific, enhance patients’ QoL, show a rapid benefit, could be used early and/or be preventative, and have acceptable cost.

Conclusions: The results of these surveys indicate that, although CC is still not equally defined among HCPs, it is perceived as a condition which negatively impacts on QoL and risk of side effects, and is in need of new, effective, preventative, and therapeutic strategies. Furthermore, increasing awareness of CC and its detrimental consequences appears mandatory among HCPs in order for new treatments to be cost-effective.

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