

## Policy Brief

# NUTRITION CARE IS AN INTEGRAL PART OF PATIENT-CENTRED MEDICAL CARE:

## A EUROPEAN CONSENSUS.

What are the next steps?

This policy brief has been derived from the collaborative efforts of the consortium within the thematic network 'Integrated Nutrition Cancer Care' which was presented at the Health Policy Platform of the European Commission.





## Setting the scene

While healthcare is becoming more patient-centred, evidence-based nutrition interventions are still not accessible to all patients with cancer. As nutrition interventions directly improve clinical and socioeconomic outcomes, patient-centred care is not complete without nutrition care.

While awareness of the negative impact of malnutrition on clinical outcomes, quality of life, and functional and emotional well-being in cancer is growing, there is relatively poor awareness amongst patients, clinicians, policymakers, and payers that nutrition interventions -particularly those begun in the early stages of the disease course- are an effective method for improving such outcomes.

The aim of this policy brief and the underlying article is to inform policymakers on the clinical evidence, the ethical considerations, the patient perspectives, and the economic advantages with respect to nutrition care as an integral part of the cancer care continuum.



## Patient-centred care means listening to patient voices

In order to practice patient-centred care, it is essential to listen to and understand what is important to patients. Many studies have shown that patients are not getting the nutrition care they need, and desire.

Patients' insights, from direct patient interviews conducted by the European Cancer Patient Coalition (ECPC), highlight the fact that patients recognize the need for nutrition care, but are unfortunately, not consistently receiving the personalized nutrition counselling required to implement meaningful changes in their daily life.



# The Consortium

In 2021, the European Nutrition Health Alliance (ENHA), the European Federation of the Associations of Dietitians (EFAD) and the European Society for Clinical Nutrition and Metabolism (ESPEN) won the bid to lead one of the three 2022 "Thematic Networks" of the European Union's Health Policy Platform (HPP), on Integrated Nutrition Cancer Care.

The Thematic Network was then led by a consortium of more than 10 European and regional level organisations that co-signed the Joint Statement presented on May 5th, 2022, at the European Health Policy Platform annual event at the European Commission's headquarters in Brussels.

The following consortium partners have now endorsed this policy brief.



THE EUROPEAN SOCIETY FOR CLINICAL NUTRITION AND METABOLISM



# Nutrition care is an integral part of patient-centred medical care: a European consensus



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PERSPECTIVES IN ONCOLOGY



## Nutrition care is an integral part of patient-centred medical care: a European consensus

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### Abstract

While healthcare is becoming more patient-centred, evidence-based nutrition interventions are still not accessible to all patients with cancer. As nutrition interventions directly improve clinical and socioeconomic outcomes, patient-centred care is not complete without nutrition care. While awareness of the negative impact of malnutrition on clinical outcomes, quality of life, and functional and emotional wellbeing in cancer is growing, there is relatively poor awareness amongst patients, clinicians, policymakers, and payers that nutrition interventions—particularly those begun in the early stages of the disease course—are an effective method for improving such outcomes. The European Beating Cancer Plan recognises the need for a holistic approach to cancer but lacks actionable recommendations to implement integrated nutrition cancer care at member state level. When considering nutrition care as a human right, the impact on quality of life and functional status must be prioritized, as these may be equally as important to patients, especially in advanced cancer where improvements in clinical outcomes such as survival or tumour burden may not be attainable. We formulate actions needed at the regional and the European level to ensure integrated nutrition care for all patients with cancer. The 4 main Take Home Messages are as follows: 1. The goals of Europe's Beating Cancer Plan cannot be achieved without integrating nutrition across the cancer care continuum. 2. Malnutrition negatively impacts clinical outcomes and has socioeconomic consequences for patients and healthcare systems. 3. Championing integrating nutrition care into cancer care is therefore the duty and ethical responsibility of clinicians (Hippocratic Oath—*primum non nocere*) and 4. Nutrition care is a cost effective, evidence-based therapy.

Nicole Erickson and Erin Stella Sullivan are joint first authors.

**Endorsements from the following organisations** The European Nutrition Health Alliance (ENHA), The European Federation of Associations of Dietitians (EFAD), The European Society for Clinical Nutrition and Metabolism (ESPEN), The European Cancer Patient Coalition (ECPC), The European Association for the Study of Obesity (EASO), The European Oncology Nursing Society (EONS), Lung Cancer Europe (LuCE), The German Clinical Nutrition Society (DGEM), The European Network of Dietetic Students (ENDietS).

**Note regarding professional terminology** Please note that due to variable legislative protections and differences in professional roles across the European Union, there exists significant variability in the titles and educational backgrounds of clinicians who are appropriately trained and licensed to provide specialist nutrition care in a clinical setting. Throughout this article, the term dietitian is used for consistency, but to avoid uncertainty, this should be interpreted as including the equivalent, accredited professional who is responsible for clinical nutrition care in the relevant jurisdiction. For example, this may include local translations of 'Registered Dietitian', or the protected title of a specialist physician responsible for clinical nutrition support.

Extended author information available on the last page of the article

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# KEY INSIGHTS

## Nutrition care: an integral part of the cancer care continuum

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### Improving nutrition status directly impacts clinical outcomes

Consistent evidence derived from randomized controlled trials shows that integrating nutrition care into cancer care positively impacts clinically relevant outcomes including reduction of toxicities, reduced post-operative complications, increased progression free survival and overall survival. Clinicians, patients, and stakeholders at every level need to understand that evidence-based patient-centred care includes nutrition and as such, its omission is a disservice to people living with and beyond cancer.

### Integrating nutrition into cancer care is economically advantageous

Quality of life, costs of treatment and survival can be significant and lead to further inequalities. Effective cancer control programs and policies should therefore consider economic aspects for all cancer patients, survivors, and their carers.





### **Accessible patient-centred nutrition information empowers patients to take action and improves their quality of life**

To ensure improved outcomes, it is essential that nutrition education addresses patients' weight management goals during and after treatment, to ensure patients do not fall prey to inappropriate, non-evidence-based nutrition advice which is widespread, and easily accessible online. Patient-centred consultations utilizing effective communication strategies are thus essential for increasing awareness about the consequences of cancer diets and encouraging informed decision-making.

### **Nutritional care as a human right**

The "Vienna Declaration - The International Declaration on the Human Right to Nutritional Care" signed in 2022 stresses the urgent need to promote and defend the recognition of nutritional care as a human right.

According to Europe's Beating Cancer Plan, all cancer inequalities should be reduced across the EU.

### **Integrating nutrition into cancer care is evidence-based**

A growing body of evidence reflects that nutrition status has a significant effect on clinical outcomes and quality of life. Physicians and other members of the multidisciplinary team (MDT) should therefore regularly prescribe nutrition care to patients with cancer at all stages of care, whether it be providing first-line advice, or referring to specialists such as oncology dietitians.

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# Implementing recommendations for integrated nutrition cancer care requires a plan

To support national and regional policymakers, service providers, and patient advocates we call for:

## 1. WIDESPREAD ADVOCACY

Widespread advocacy is required to raise awareness amongst clinicians and patients. It should be communicated (to clinicians, patients and policymakers), that nutrition care in cancer has a significant impact on both clinically relevant outcomes and health-related quality-of-life issues which are central to patient-centred care (PCC).

## 2. NUTRITION ASSESSMENT & SCREENING

Cancer services should urgently incorporate key performance indicators (KPIs) into their regular quality assurance systems to benchmark and audit adherence to evidence-based nutrition recommendations. EU regional and national governments should allocate budgets to initiatives aimed at identifying the most effective implementation strategies.

## 3. NUTRITION SPECIALISTS IN THE MULTIDISCIPLINARY TEAM (MDT)

At the European level, several of the actions of the European Commission's Beating Cancer Plan should include nutrition, notably, the plan mentions the role of diet and exercise in cancer prevention but does not focus on the specific role of nutrition within the management of cancer. In order to maximise the effect of a number of the flagship initiatives arising from the European Commission's Beating Cancer Plan, 'National Comprehensive Cancer Centre' accreditation should be associated with a minimum acceptable level of nutrition and dietetic service provision, in which all cancer patients are nutritionally screened, the dietitian is a core part of the multidisciplinary team, and all members of this team receive basic and regular nutrition training.



# The Journey

## GAINING EU SUPPORT

ENHA, EFAD and ESPEN pitched a proposal on integrated nutrition cancer care and won the bid to lead one of the three 2022 'Thematic Networks' of the European Union's Health Policy Platform (HPP).



September 2021

## FORMATION OF THE CONSORTIUM

An alliance of more than 10 European level stakeholder organisations was forged to ensure integrated nutrition care for all patients with cancer.



## PRESENTING THE JOINT STATEMENT

The Joint Statement, the main outcome of the Thematic Network, was co-signed and endorsed by all consortium stakeholders and presented at the European Health Policy Platform annual event.



May 2022

## PUBLICATION OF OUR CONSENSUS

The paper Nutrition care is an integral part of patient-centred medical care: a European consensus was published, championing and demanding integrating nutrition care into cancer care.



March 2023

## POLICY BRIEF

Following up on all previous actions, this policy brief draws clear links and suggests possibilities to the next steps that should be accomplished.




April 2023

## REALISING IMPACT

This includes wide dissemination through EU, regional, and local stakeholder networks, as well as dedicated efforts towards translation and adaptation to cater to diverse audiences, promoting its relevance and fostering its effective implementation.





A large, stylized graphic of the European Union flag, showing a blue field with twelve yellow stars arranged in a circle. The flag is partially obscured by large, light blue circular shapes on the left and right sides of the page.

This policy brief presents research findings and policy lessons identified in a paper prepared by researchers and European-wide organizations focused on the field of nutrition and cancer care.