#3330 FATIGUE AND MALNUTRITION MEASURES: CLINIMETRICS FOR CANCER SYMPTOM SCIENCE



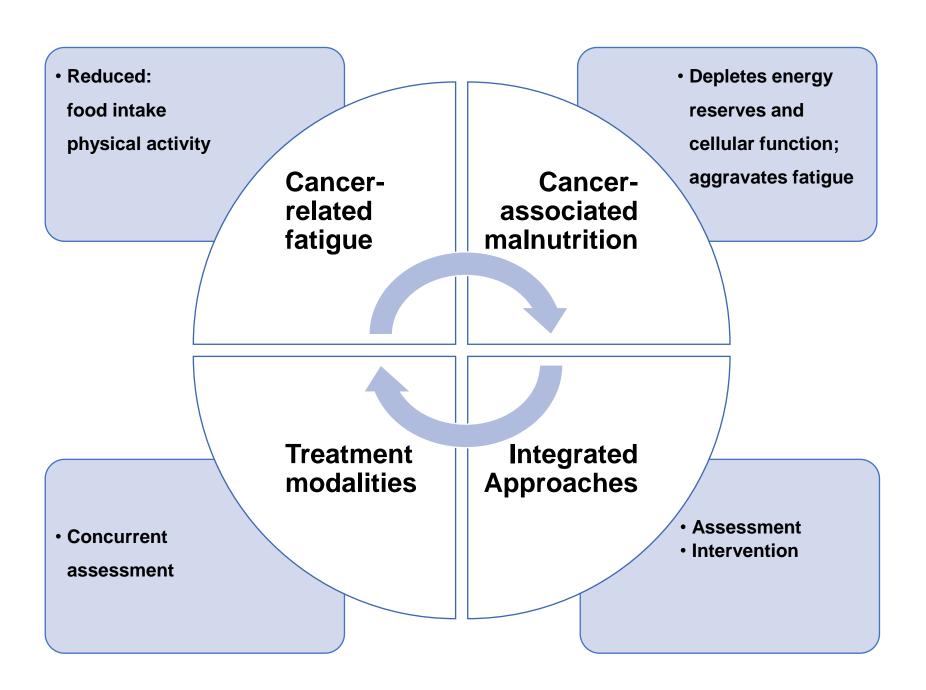
Aynur Aktas^{1,2}; Dori M. Beeler^{1,2}; Kunal C. Kadakia^{1,2,3}; Declan Walsh^{1,2}

¹Department of Supportive Oncology, Atrium Health Levine Cancer, Charlotte, NC ²Atrium Health Wake Forest Baptist Comprehensive Cancer Center, Charlotte, NC ³Department of Solid Tumor Oncology, Atrium Health Levine Cancer, Charlotte, NC ⁴Itrium Health Levine Cancer, Charlotte, NC ³Itrium Health Levine Cancer, Charlotte, NC ⁴Itrium Health Levine Cancer, Charlotte, NC ⁴Itrium

Now part of ADVOCATEHEALTH

INTRODUCTION

Cancer-related fatigue (CRF) and cancer-associated malnutrition (CAM) are highly prevalent and negatively impact quality of life and treatment outcomes.



- Previous studies have explored the clinical utility of symptom measures, but they often address these symptoms separately. This is despite their inextricable ties based on the high correlation between pathophysiology and symptom occurrence.
- We have addressed this artificial separation and the clinical utility of measures that assess both CRF and CAM concurrently.

RESULTS

Cancer Fatigue Scale, Edmonton Symptom Assessment Scale (ESAS), and ESAS-revised had strong performance scores, supporting their potential role for effective clinical use.

Clinimetric Domain	Measurement Name		
	CFS	ESAS	ESAS-r
Format score (0 out of 16)	15	14	15
Sensibility score (0 out of 16)	13	13	13
Transferability score (0 out of 4)	3	4	4
Composite Clinical Utility Score (0-36)	31	31	32

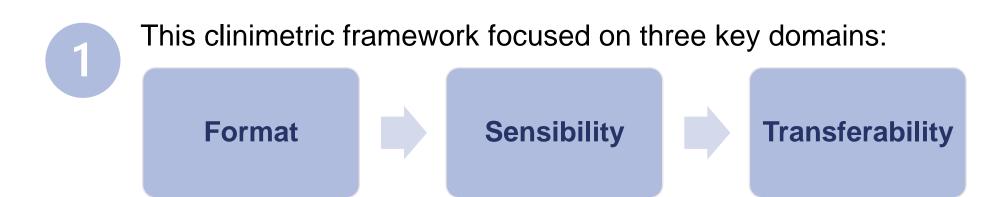
Table: Top Three Fatigue And Malnutrition Measures Based On Composite Clinimetric Scores

Ten measures were evaluated:

- the top three (Table) scored "exemplary" (31-36)
- three "good" (19-24)
- four "excellent" (25-30)

ABBREVIATIONS: CFS: Cancer Fatigue Scale; ESAS: Edmonton Symptom Assessment System; ESAS-r: Edmonton Symptom Assessment System revised.

METHODS



- A Medline search identified relevant measures, which were scored independently by two researchers (AA, DB) based on the clinimetric framework.
- The evaluation focused on: 1) format: assessment length, item wording, response format, and item calibration,
 - 2) sensibility: ease of use in clinical research and practice,
 - 3) transferability: consistency across diverse cancer populations.
- An empirically developed composite clinimetric score (range 0-36) represented a global evaluation. The final score was achieved by consensus with clinician input (DW, KK).

CONCLUSION

A clinimetric framework is an innovative approach and supports the concurrent assessment of CRF and CAM. Future research should focus on linking these measures to clinical outcomes and assessing their impact on decision-making and clinician-patient collaboration.