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Nutritional Risk Screening and Risk Factors Analysis in Patients with Lymphoma Undergoing Chemotherapy: A Prospective Study

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Background: The Nutrition Risk Screening 2002 Scale (NRS 2002) was developed in 2002 by the European Society of Enteral and Parenteral Nutrition as an objective tool for nutritional risk screening. It has strong practicability and guiding significance in clinical practice. Relevant studies have shown that the incidence of under nutrition in cancer patients is generally high. With the increasing incidence of lymphoma in China, more and more attention has been paid to the related studies. Inadequate nutrition can prolong hospitalization time, increase hospitalization costs, increase infection and other complications and affect the prognosis of patients. Therefore, the nutritional status of lymphoma patients is a concern.

Objective: To investigate the nutritional status of patients with lymphoma during chemotherapy by NRS2002 scale and to study the influencing factors of the risk of under nutrition in patients with lymphoma during chemotherapy, so as to guide clinical nursing work.

Methods: 208 patients with lymphoma admitted to hospital during chemotherapy from May 2018 to May 2019 were selected by random sampling. Age, education level, tumor stage, chemotherapy cycle, diabetes mellitus and psychological distress scores were collected by self-made questionnaire. BMI, white blood cell count and blood were recorded. Objective nutritional indicators of hemoglobin and albumin. The nutritional status of patients was investigated by NRS2002. The NRS2002 score and the criteria for judging nutritional status were as follows: there was no nutritional risk in NRS2002 < 3, that is, good nutritional status and there was nutritional risk in NRS2002 < 3, that is, there was nutritional deficiency. The correlation between different demographic characteristics, psychological and disease status, objective nutritional indicators and nutritional status was analyzed.

Results: During chemotherapy, 64.9% (135/208) of patients with lymphoma had good nutritional status and 35.1% (73/208) had nutritional risk. Multivariate regression analysis showed that age, stage of cancer, diabetes mellitus, psychological distress score, BMI, white blood cell count, hemoglobin and albumin were independent influencing factors of nutritional status, but there was no significant correlation between education level, chemotherapy cycle and the occurrence of nutritional risk. The incidence of nutritional risk was positively correlated with age, tumor stage and psychological pain score (P < 0.05) and negatively correlated with BMI, WBC count, hemoglobin and albumin (P < 0.05).

Conclusion: The incidence of nutritional deficiency in lymphoma patients undergoing chemotherapy is higher. Age, stage of cancer, diabetes mellitus, psychological distress score, BMI, white blood cell count, hemoglobin and albumin are the influencing factors of nutritional risk. Nurses should screen patients nutritional status in time and strengthen nutritional intervention according to patients' condition so as to improve patients quality of life and prolong their life cycle.