

loss in patients with gastric and gastro-oesophageal junction (GOJ) cancer based on the FAACT A/CS.

Methods: Newly diagnosed gastric and GOJ adenocarcinoma patients of all stages, attending outpatient clinics at The Christie Hospital NHS Foundation Trust, from September 2016 to December 2017 completed the FAACT A/CS at initial consultation. BMI and weight change over the last 3-6 months were recorded as standard of care. SPSS was used for statistical analysis.

Results: Based on the FAACT A/CS questionnaire, 127 (69%) out of the 182 patients included in this analysis had anorexia. The mean anorexia score of all the patients was 29.5 (4-48). The incidence of anorexia was greater in metastatic compared to non-metastatic patients (82% vs 52%; $p < 0.01$). Overall, the metastatic group achieved lower mean anorexia scores than the non-metastatic group (25.9 vs. 34.7, $p < 0.01$). Patients in the metastatic group had lower mean body weight compared to those in the non-metastatic group (74 vs 79 kg, $p = 0.069$). Their mean BMI was also lower (25 vs 27, $p = 0.05$). 76% of the metastatic group and 33% of the non-metastatic group had $\geq 5\%$ of weight loss that may classify them as high risk for cancer cachexia, despite their normal or high BMI ($p < 0.01$).

Conclusions: 69% of the patients with gastric/GOJ cancer who attended clinic were anorexic on initial consultation. The incidence of anorexia was higher in patients with metastatic disease (82%). Assessment of anorexia using the FAACT A/CS along with classification of weight loss prior to treatment should be integrated into nutritional assessment. BMI used independently may be unsuitable for identifying patients at nutritional risk.

Legal entity responsible for the study: The Christie NHS Foundation Trust.

Funding: Has not received any funding.

Disclosure: All authors have declared no conflicts of interest.

1728P Assessment of anorexia and weight loss in newly diagnosed upper gastrointestinal cancer patients with localised and metastatic disease, using the functional assessment of anorexia cachexia therapy anorexia/cachexia subscale (FAACT A/CS)

M. Abraham¹, Z. Kordatou², W. Mansoor³

¹Nutrition & Dietetics, The Christie NHS Foundation Trust, Manchester, UK, ²Medical Oncology, Bank of Cyprus Oncology Center, Nicosia, Cyprus, ³Medical Oncology, The Christie NHS Foundation Trust, Manchester, UK

Background: Anorexia often predisposes to weight loss, leading to poor outcomes in cancer patients. Therefore early recognition is clinically important. Although no gold standard exists to diagnose anorexia, the FAACT A/CS has been suggested to identify cancer patients with anorexia. A previous study has validated the cut-off score of ≤ 37 to diagnose anorexia. In our study we assessed the incidence of anorexia and weight