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The impact & experience of cardiac cachexia in patients with advanced heart failure & caregivers

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Background

Cardiac cachexia has been identified in 15% of patients with advanced HF in the UK¹, and is characterised by unintentional weight loss, a reduction in skeletal muscle mass, and poor quality of life². Evidence on the experience of patients living with HF and cardiac cachexia is needed to build knowledge on how best to treat and support patients and their caregivers.

Purpose

To explore the experience of cardiac cachexia in people with advanced HF and their caregivers.

Methods

Semi-structured interviews were conducted separately in patients with advanced HF and cardiac cachexia ($n=8$) and caregivers ($n=5$).

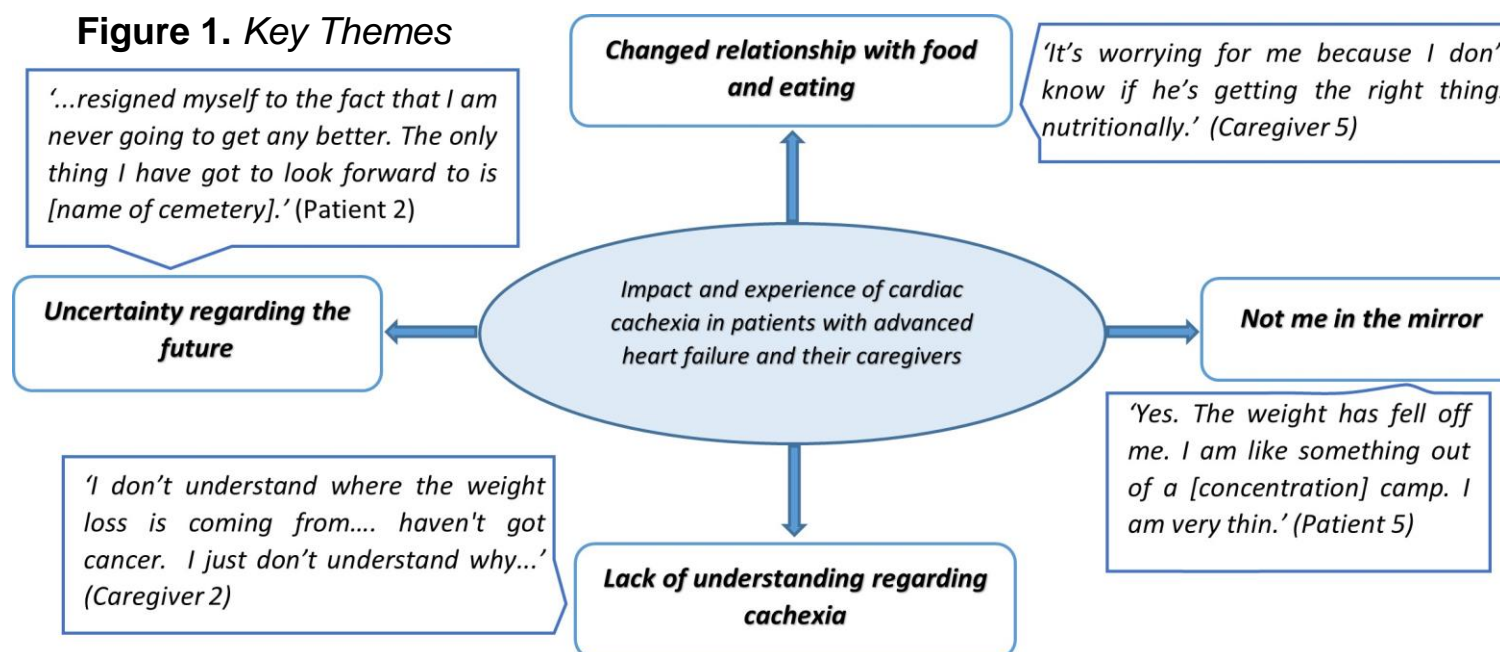
Table 1. Inclusion Criteria

Patient Inclusion Criteria				
At least 5% weight loss in ≤ 12 months or BMI < 20 kg/m ² plus 3 of the 5 diagnostic criteria as per Evans et al. ³ :				
1) Decreased muscle strength	2) Fatigue	3) Anorexia	4) Low fat-free mass index	5) Abnormal biochemistry: <ul style="list-style-type: none"> • \uparrow inflammatory markers (CRP & IL-6) • Anaemia (Hb < 12 g/dL) • \downarrow serum albumin (< 3.2 g/dL)
Caregiver Inclusion Criteria				
Weekly contact with patient > 20 hours				

Methods cont.

Interviews ($n=13$) were recorded and transcribed verbatim before thematic analysis⁴ was performed to identify key themes.

Results



Conclusion

Cardiac cachexia causes psychosocial and practical concerns for patients and their caregivers. This may have been associated with their limited understanding of the syndrome. Professionals need to improve clinical recognition of cachexia and open up discussions with patients and caregivers, to develop their understanding of the condition and support them with managing symptoms and accepting prognostic implications.

References

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