



Introduction and Aim

- Quality of Life (QoL) assessment and anorexia diagnosis are pivotal in cancer care and may independently predict survival.
- Cachexia research suggests that **biomarkers** of cachexia are related to a decline in QoL and increase in anorexia.
- The **ideal biomarker** for cachexia assessment, prognosis and blockade remains to be identified.
- Emerging biomarkers require **baseline research** of their relationships to both QoL and anorexia.
- The aim of the study was: i) to **establish differences** in biomarkers of cachexia, QoL and anorexia between patients with cancer cachexia and healthy matched controls, ii) to explore the relationships and correlations of these markers to QoL and appetite.

Long-term aim: to improve knowledge of the relationships between emerging biomarkers of cancer cachexia, QoL and appetite so that future treatments may target cachexia and ultimately prognosis.

Methods

- Prospective case-control study: including 40 patients with advanced cancer, mixed diagnoses and 40 gender, age-matched controls.
- QoL measured using the the European Organization for the Research and Treatment of Cancer Quality of Life-C30 assessment (EORTC-QLQ-C30) and anorexia assessed using the Functional Assessment of Anorexia / Cachexia Therapy assessment (FAACT A/CS-12).
- Biomarkers assessed: albumin, haemoglobin (Hb), neutrophils, lymphocytes, platelets, C-reactive protein (CRP), tumor necrosis factor alpha (TNF α), Interleukin-6 (IL-6), Interleukin-8 (IL-8), C-X-C motif chemokine ligand 5 (CXCL5) and citrullinated histone H3 (H3Cit).
- Descriptive statistics and regression analyses for correlations were undertaken.

Results

- The cases scored significantly lower FAACT A/CS-12 scores than the controls, $p < 0.01$, with 30% of cases scoring an overall "poor" appetite (**Figure 1**).
- For all sectors of QoL [Global Status (QL-G), Functional Scales (QL-FS) and Symptom Scales (QL-SS)] cases scored significantly different ($p < 0.01$) compared to reference values. Lower scores for QL-G and QL-FS and higher scores doe QL-FS.
- Albumin, lymphocytes, platelets, Hb, platelet to lymphocyte ratio (PLR), systemic immune-inflammation index (SII), CRP, TNF α (all at $p < 0.01$) and neutrophil to lymphocyte ratio (NLR) ($p = 0.02$), IL-6 ($p < 0.04$) and IL-8 ($p = 0.02$) were significantly different between cases and controls.
- No difference was found for CXCL5 ($p = 0.22$) or H3Cit ($p = 0.99$) between the groups.
- Albumin ($p = 0.03$) and CRP ($p = 0.002$) were significantly associated to appetite categories "good", "moderate" and "poor" (**Figure 2**).

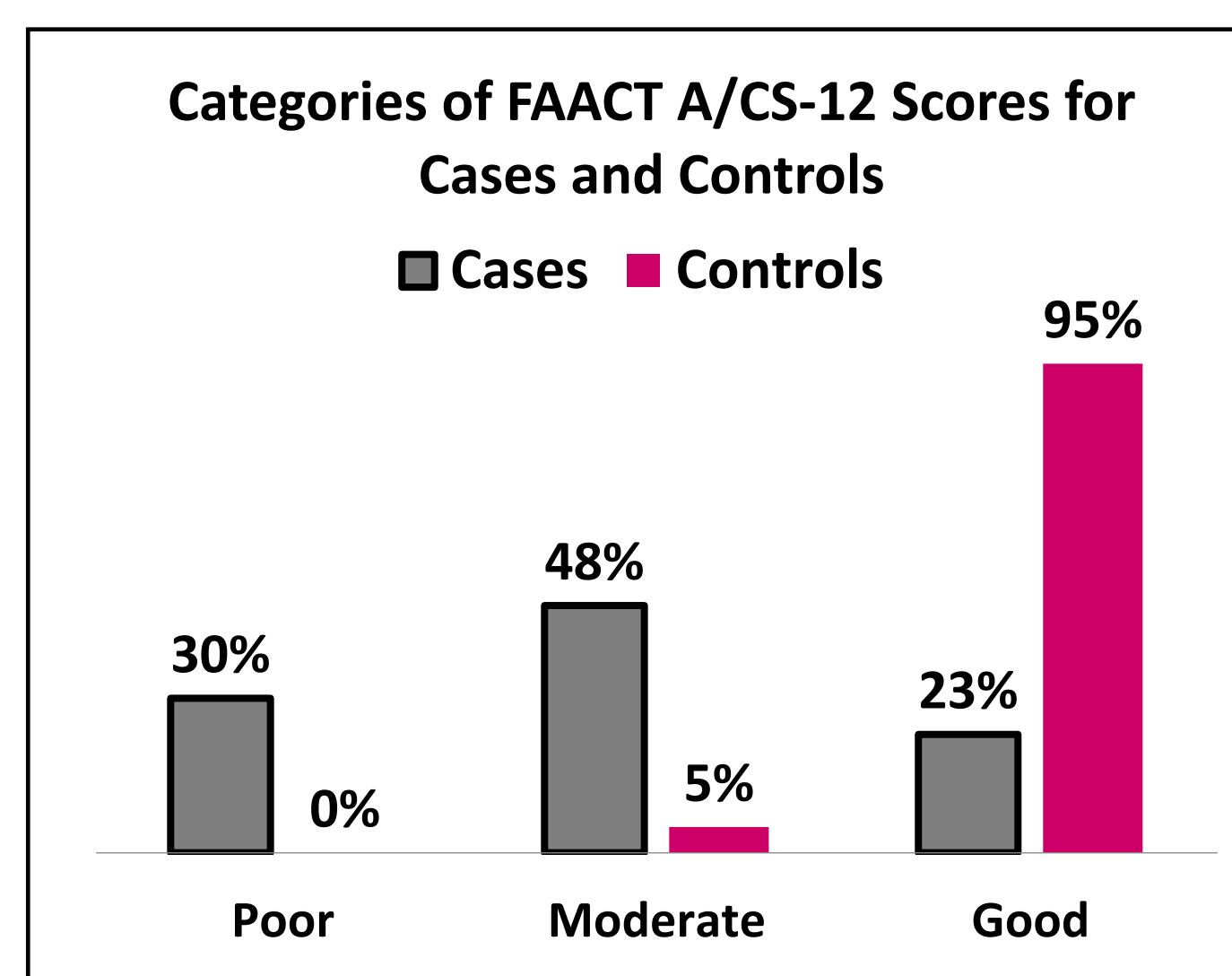


Figure 1: FAACT A/CS-12 Categories

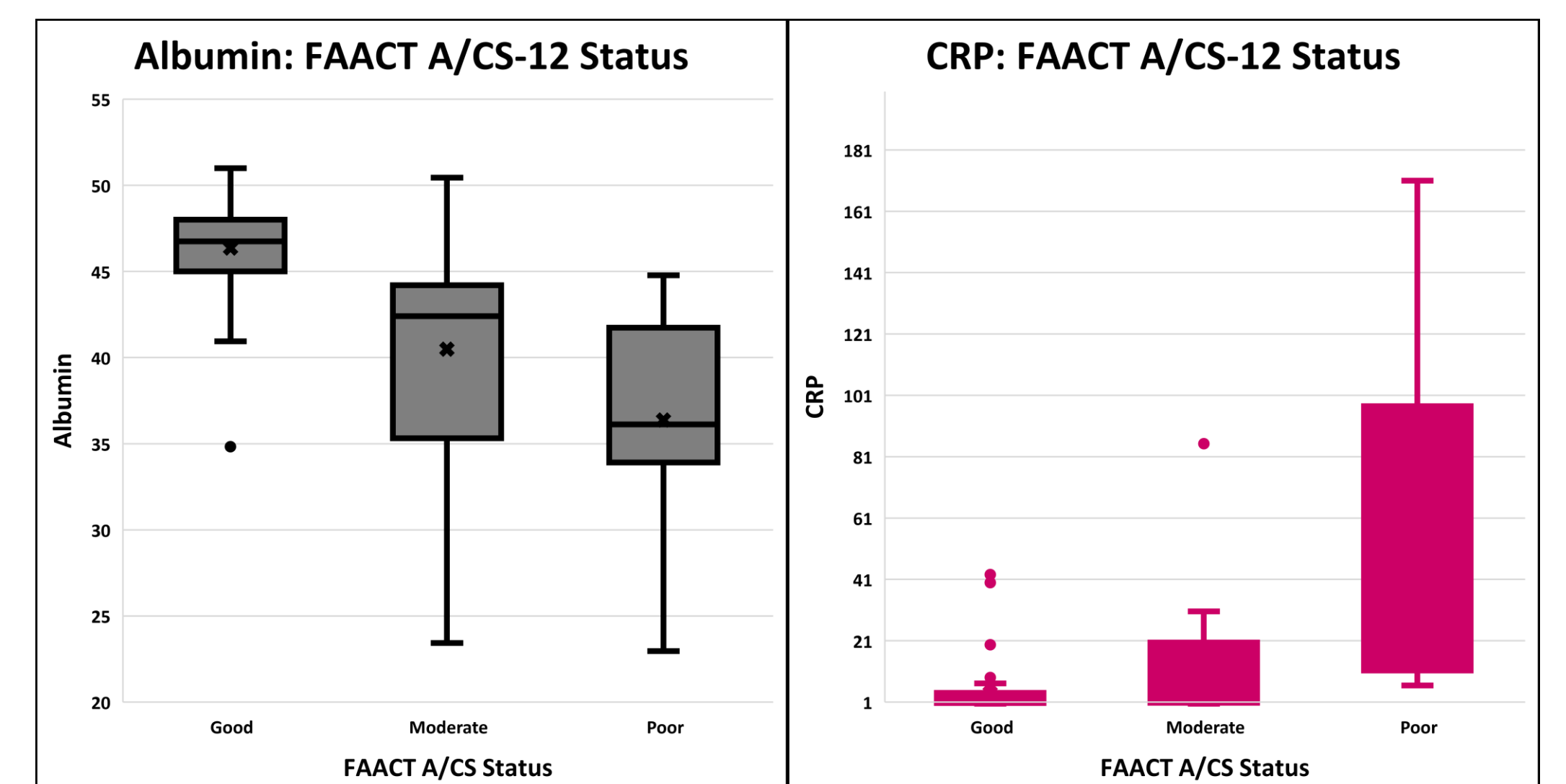


Figure 2: Albumin and CRP Correlations to FAACT A/CS-12 Categories

- NLR, PLR, SII, CXCL5, TNF α , IL-6 and CRP showed significance to FAACT A/CS-12 using categories and cut-offs for biomarkers. H3Cit and IL-8 showed no significance (**Table 1**).
- Only albumin, NLR, Hb, PLR, SII, TNF α , IL-8 and CRP showed significant correlations to all three QoL sectors (**Table 2**).
- Using cut-offs for biomarkers and QL-FS, CXCL5 was significantly correlated to QL-FS, $p = 0.04$ (**Figure 3**).

Table 1: Results of Biomarker and FAACT A/CS-12 Score Category Analysis

Biomarker	Significance
NLR	$P < 0.01$
PLR	$P < 0.01$
SII	$P = 0.01$
CXCL5	$P = 0.04$
TNF α	$P < 0.01$
IL-6	$P < 0.01$
CRP	$P < 0.01$

Table 2: Biomarkers with Significant Correlations to QoL Sectors

Biomarker	QoL-G	QoL-FS	QoL-SS
Albumin	+	+	-
Hb	+	+	-
NLR	-	NO SIG	+
PLR	-	-	+
SII	-	-	+
TNF α	-	-	+
IL-8	-	-	+
CRP	-	-	+

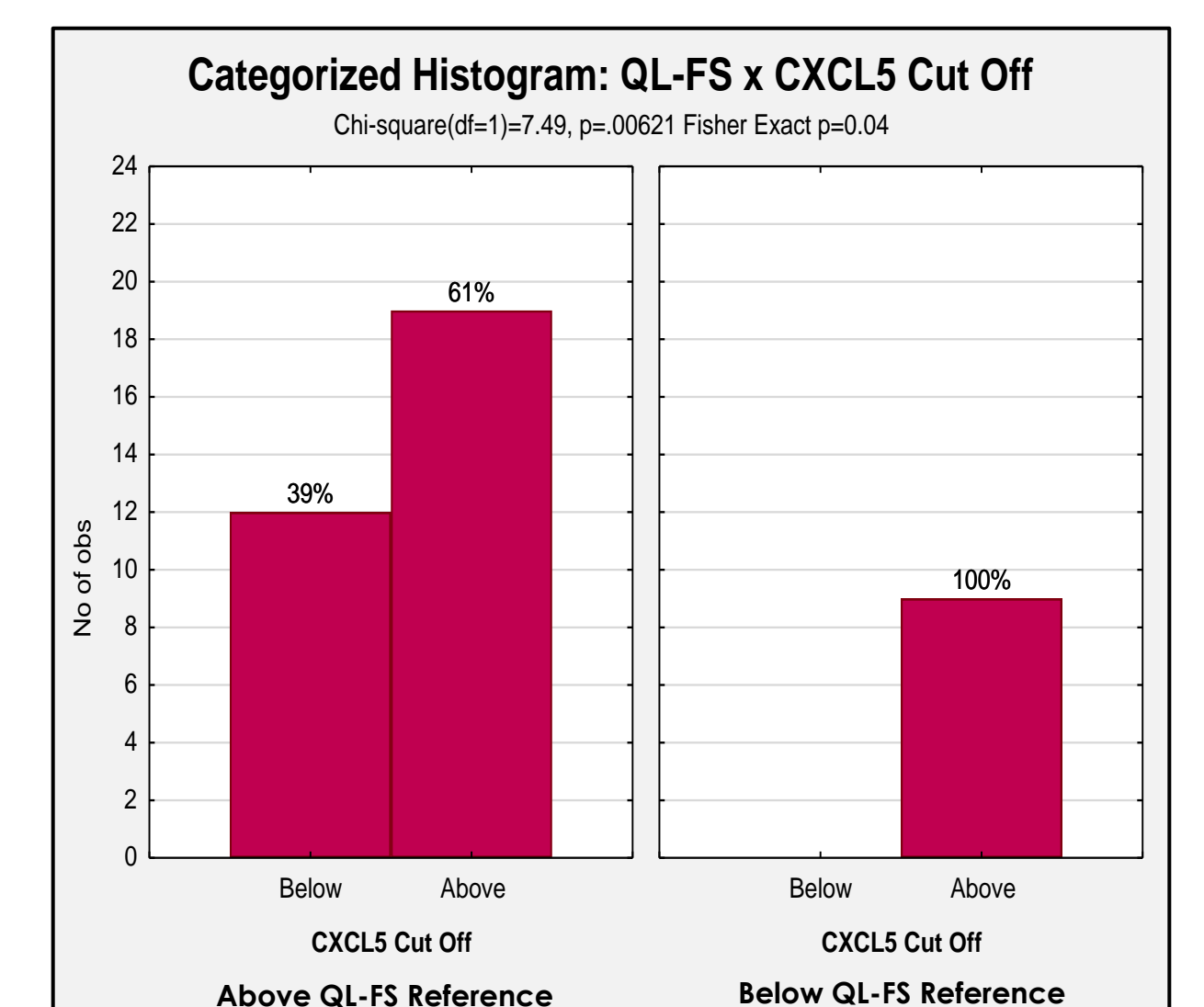


Figure 3: CXCL5 Correlations to QL-FS

- FAACT A/CS-12 scores showed significant associations to NLR ($p = 0.002$), Hb ($p < 0.001$) and PLR ($p < 0.01$). No other biomarkers showed significance to FAACT A/CS-12 scores when using continuous variables for both appetite scores and biomarkers.

Conclusions

- CRP, albumin & haemoglobin consistently showed baseline differences between cases & controls & in further correlations to QoL & appetite.
- NLR, PLR, SII, TNF α , IL-6 and IL-8 showed inconsistent correlations of significance to QoL & appetite dependent on statistical methods applied.
- Emerging biomarkers CXCL5 & H3Cit were not found to be reliable biomarkers for cancer cachexia in defining correlations to QoL & appetite.