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cancer-associated anorexia

Anorexie chez le patient cancéreux : évaluation de l'acupuncture

1. Systematic Reviews and Meta-Analysis

1.1. Constantina 2025

Constantina C, Mary E, George O, Konstantinos F, Christiana K, Nicos M, Andreas C. Nonpharmacological Management of Cancer-Related Cachexia: A Systematic Review. Semin Oncol Nurs. 2025 Jan 6:151803. https://doi.org/10.1016/j.soncn.2024.151803

Objectives	Cancer-related cachexia affects approximately 50% to 80% of cancer patients and contributes significantly to cancer-related mortality, accounting for 20% of deaths. This multifactorial syndrome is characterized by systemic inflammation, anorexia, and elevated energy expenditure, leading to severe weight loss and muscle wasting. Understanding the underlying mechanisms is critical for developing effective interventions. While progress has been made over the past decade, most therapeutic approaches have centered on pharmacological agents or nutritional supplements. This systematic review seeks to address a critical gap by examining interventional studies that focus on nonpharmacological, nonsupplement, and nonparenteral strategies for managing cancer-related cachexia.
Methods	A systematic review followed the guidelines provided by PRISMA 2020. The review was conducted to identify clinical trials on the nonpharmacological, nonsupplement, and nonparenteral management of cancer-related cachexia. The literature search encompassed PubMed, CINAHL, and Scopus, targeting studies published between 2014 and 2024. Inclusion criteria required studies to be written in English, involve human participants aged 18 years or older, and focus on individuals diagnosed with active solid tumors. Studies involving participants with hematological malignancies were excluded due to the unique dietary requirements associated with these conditions.
Results	The search identified 2,949 articles, of which 10 met the eligibility criteria. The nonpharmacological interventions examined included **acupuncture**, nutritional advice, education and support, informational booklets, behavior change support, and exercise. Significant heterogeneity was observed in both the types of interventions and the sample sizes across the studies. Most participants were outpatients. Commonly, assessed outcomes included body weight, body mass index, quality of life (QoL), and muscular strength. This variation highlights the need for more standardized approaches to better evaluate the impact of such interventions.

Conclusions	Exercise interventions improved lean mass, QoL, and fatigue. Complementary interventions like acupuncture have demonstrated promising benefits in managing cancer-related cachexia. These include improved appetite, enhanced Karnofsky Performance Status (indicating better functional ability), and reduced weight loss. While some studies suggest nutritional interventions may positively impact weight or dietary habits, the evidence remains inconclusive. This highlights the importance of initiating interventions early in the course of care, just after the diagnosis and the start of treatment to maximize potential benefits. Additionally, actively involving patients in their care is crucial, as this can enhance adherence, personalize strategies, and address individual needs more effectively.
Implications for nursing practice	The assessment and nonpharmacological management of cancer-related cachexia play a vital role in enhancing the QoL for cancer patients. Individualized nutritional interventions, educational programs, exercise routines, and tailored lifestyle advice have shown the potential to positively impact food intake, body composition, fatigue levels, and overall patient satisfaction during anticancer treatments. These approaches not only address the physical challenges of cachexia but also support the psychological and emotional well-being of patients, contributing to a more comprehensive and patient-centered care strategy.

1.2. Zhang 2025

Zhang X, Yang W, Shang J, Shi L, Yang L, Zhang C, Chen Y, Liu Z, Li B, Zhang X, Tong L, Yang G. Acupuncture's Emergence as A Promising Non-Pharmacological Therapy for Appetite Management in Cancer Chemotherapy. Nutr Cancer. 2025;77(2):230-243. https://doi.org/10.1080/01635581.2024.2413717. Epub 2024 Oct 13. PMID: 39397368.|

Objective	The primary objective of this investigation was to assess the impact of acupuncture intervention and explore the intricacies of acupoint selection as a therapeutic strategy for chemotherapy-induced Anorexia (CIA).
Method	Eight electronic databases were searched to identify relevant studies on the use of acupuncture for the treatment of CIA to conduct a comprehensive meta-analysis. Following this, the Apriori algorithm, correlation analysis, and cluster analysis were performed to identify correlations between the selection of acupoints.
Results	Acupuncture significantly reduced the incidence of anorexia (RR = 0.76, 95%CI: 0.65, 0.90; I2=63%; p = 0.001; n = 503) and anorexia score (SMD=-0.33, 95%CI: -0.53, -0.14; I2=22%; p = 0.0008; n = 419), as well as preserved body mass (MD = 2.70, 95%CI: 1.08, 4.32; I2=0%; p = 0.001; n = 187) and enhanced physical strength (MD = 4.23, 95%CI: 1.90, 6.55; I2=58%; p = 0.0004; n = 377). Moreover, subgroup analysis highlighted its efficacy in managing anorexia associated with non-gastrointestinal tumors and mitigating the severity of cisplatin-induced anorexia. Meanwhile, Zusanli (ST36), Neiguan (PC6), Tianshu (ST25), Zhongwan (RN12), and Qihai (RN6) were identified as crucial acupoints in CIA management.
Conclusion	Acupuncture holds promise as a potential non-pharmacological approach for managing anorexia during cancer chemotherapy. To provide robust evidence of its effectiveness, well-designed Randomized Controlled Trials (RCTs) with larger participant cohorts, and consistent core outcome measures are essential.

1.3. Liu 2021 Ø

Liu W, Lopez G, Narayanan S, Qdaisat A, Geng Y, Zhou S, Spano M, Underwood S, Eclache MG, Dev R, Dalal S, Bruera E, Cohen L. Acupuncture for Cancer-Related Anorexia: a Review of the Current Evidence. Curr Oncol Rep. 2021;23(7):82. [218937]. doi

Purpose of review	Loss of appetite/anorexia is extremely common among cancer patients, affecting as many as half of newly diagnosed patients and 70% of patients with advanced disease. Effective management of this disabling symptom of cancer remains a major challenge in the field of oncology. We conducted a systematic review of the current evidence on acupuncture and/or moxibustion as an intervention for cancer-related anorexia.
Recent findings	Acupuncture, as a part of traditional Chinese medicine practice, has demonstrated effectiveness in managing many cancer- and treatment-related symptoms, especially chemotherapy-induced or postoperative nausea. However, the efficacy of acupuncture in treating cancer-related anorexia/loss of appetite is not clear.
Conclusions	The current level of evidence is insufficient to make a definitive conclusion on the benefit of acupuncture/moxibustion for treating chronic cancer-related anorexia/appetite problems. Future large randomized controlled trials of high methodological quality are needed.

1.4. Zhao 2021 ★

Zhao WP, Li J, Zhang YS, Li H, Huang JC, Bai J, Li JB. Efficacy of acupuncture therapy for improving anorexia in tumor patients: a Meta-analysis. J Tradit Chin Med. 2021 Aug;41(4):507-514. https://doi.org/10.19852/j.cnki.jtcm.2021.03.002

Objective	To use evidence-based medicine to systematically evaluate the effectiveness and safety of acupuncture therapy for improving anorexia in tumor patients.
Methods	We queried the China National Knowledge Infrastructure Database (CNKI), China Science and Technology Journal Database (VIP), Wanfang Data, PubMed, Cochrane Library, and Embase databases to identify reports of randomized controlled trials (RCTs) that applied acupuncture therapy to improve anorexia in tumor patients, and used Rev Man 5.3 software to conduct a Meta-analysis of the effective rate, appetite score, Karnofsky Performance Status (KPS) score, Functional Assessment of Anorexia/Cachexia Therapy (FAACT) appetite scale, and body weight in each study. Subgroup analysis was conducted based on whether radiotherapy or chemotherapy were also administered.
Results	A total of **10 RCTs** were included with a total of **648 patients**, including 343 patients in the treatment group and 305 patients in the control group. The Meta-analysis results showed that the clinical efficacy, appetite score, KPS score, and FAACT score of the treatment group (which received acupuncture to improve appetite) were better than those of the control group, and the difference was statistically significant ($P < 0.05$); however, there was no statistically significant difference in body weight between the treatment group and the control group ($P > 0.05$). The results of the subgroup analysis showed that the effective rate and appetite score for patients with long-term and chronic loss of appetite who underwent acupuncture were better than those of the control group, and the difference was statistically significant ($P < 0.05$).
Conclusions	Acupuncture therapy has good efficacy and safety in the treatment of anorexia in tumor patients, and it also has good efficacy and safety for long-term and chronic loss of appetite. The reliability and stability of the above results need to be confirmed by high-quality RCTs with larger sample sizes.

1.5. Zhang 2018 ☆

Zhang F, Shen A, Jin Y, Qiang W. The management strategies of cancer-associated anorexia: a critical appraisal of systematic reviews. BMC Complement Altern Med. 2018;18(1):236. [168896].

Background	Cancer-related anorexia remains one of the most prevalent and troublesome clinical problems experienced by patients with cancer during and after therapy. To ensure high-quality care, systematic reviews (SRs) are seen as the best guide. Considering the methodology quality of SRs varies, we undertook a comprehensive overview, and critical appraisal of pertinent SRs.
Methods	Eight databases (between the inception of each database and September 1, 2017) were searched for SRs on the management of cancer-related anorexia. Two researchers evaluated the methodological quality of each SR by using the Revised Assessment of Multiple Systematic Reviews (R-AMSTAR) checklist. Characteristics of the "high quality" SRs were abstracted, included information on relevant studies numbers, study design, population, intervention, control, outcome and result.
Results	Eighteen SRs met the inclusion criteria. The R-AMSTAR scores of methodological quality ranged from 18 to 41 out of 44, with an average score of 30. Totally eight SRs scored ≥31 points, which showed high methodological quality, and would be used for data extraction to make summaries. Anamorelin had some positive effects to relieve cancer anorexia-cachexia syndrome (CACS) and improve the quality of life (QoL). Megestrol Acetate (MA) could improve appetite, and was associated with slight weight gain for CACS. Oral nutritional interventions were effective in increasing nutritional intake and improving some aspects of QoL in patients with cancer who were malnourished or at nutritional risk. The use of thalidomide, Eicosapentaenoic Acid, and minerals, vitamins, proteins, or other supplements for the treatment of cachexia in cancer were uncertain, and there was inadequate evidence to recommend it to clinical practices, the same situation in Chinese Herb Medicine and **acupuncture (acupuncture and related therapies were effective in improving QoL) for treating anorexia in cancer patients**, warranting further RCTs in these areas.
Conclusions	Anamorelin, MA, oral nutrition interventions, and **acupuncture** could be considered to be applied in patients with cancer-related anorexia. Future RCTs and SRs with high quality on the pharmaceutical or non-pharmaceutical interventions of anorexia in cancer patients are warranted.

1.6. Lau 2016 Ø

Lau CH, Wu X, Chung VC, Liu X, Hui EP, Cramer H, Lauche R, Wong SY, Lau AY, Sit RS, Ziea ET, Ng BF, Wu JC. Acupuncture and related therapies for symptom management in palliative cancer care: systematic review and meta-analysis. Medicine (Baltimore). 2016;95(9):e2901. [160606].

Purpose	The aim of this systematic review and meta-analysis was to summarize current best evidence on acupuncture and related therapies for palliative cancer care.
Methods	Five international and 3 Chinese databases were searched. Randomized controlled trials (RCTs) comparing acupuncture and related thérapies with conventional or sham treatments were considered. Primary outcomes included fatigue, paresthesia and dysesthesias, chronic pain, anorexia, insomnia, limb edema, constipation, and health-related quality of life, of which effective conventional interventions are limited.
Results	Thirteen RCTs were included. Compared with conventional interventions, meta-analysis demonstrated that acupuncture and related therapies significantly reduced pain (2 studies, n=175, pooled weighted mean difference-0.76, 95% confidence interval: -0.14 to -0.39) among patients with liver or gastric cancer. Combined use of acupuncture and related therapies and Chinese herbal medicine improved quality of life in patients with gastrointestinal cancer (2 studies, n¼111, pooled standard mean difference: 0.75, 95% confidence interval: 0.36–1.13). Acupressure showed significant efficacy in reducing fatigue in lung cancer patients when compared with sham acupressure. Adverse events for acupuncture and related therapies were infrequent and mild.

Conclusion	Acupuncture and related therapies are effective in reducing pain, fatigue, and in improving quality of life when compared with conventional intervention alone among cancer patients. Limitations on current evidence body imply that they should be used as a complement, rather than an alternative, to conventional care. Effectiveness of acupuncture and related therapies for managing **anorexia**, reducing constipation, paresthesia and dysesthesia, insomnia, and limb edema in cancer patients is uncertain, warranting future RCTs in these areas.

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