

Tips for Careworkers: Cachexia, Sarcopenia and Anorexia



What it is: Weight loss is common with advanced disease. The processes behind this are cachexia, sarcopenia and anorexia.

Cachexia is common in people with chronic conditions such as cancer, heart, or kidney failure. The person loses weight and muscle and, sometimes but not always, fat.

Anorexia is when a person no longer wants to eat.

Sarcopenia is the loss of muscle mass and function as people get older.

Why it matters: Weight loss is a part of the natural processes at the end of life. Your observations are important.

Fatigue and frailty may accompany the weight loss and so additional comfort measures may be needed. You may need to adjust approaches to care including:

- the time it takes
- careful repositioning
- use of cushions, a pressure-relieving mattress
- 2-person assists
- the use of a hoist or wheelchair.

With changes in weight and in their condition, clients or residents may be concerned about their appearance. If you can respond respectfully and helpfully, you can help the person keep their self-esteem and dignity.

What I need to know: Anorexia and cachexia are common in people receiving palliative care, and sarcopenia is common in older people.

Some staff can find it distressing to care for people with cachexia and sarcopenia. Seek help if you feel uncomfortable or need support.

Do

Report to nursing staff if a person:

- changes their eating or drinking habit
- stops eating or drinking
- is less active or unable to do things
- finds it hard to swallow
- has diarrhoea or constipation
- feels sick or vomits
- has clothing that becomes ill-fitting and oversized, needing to be replaced.

Do

Ask if the person would like snacks or small amounts of food throughout the day, respecting their choice to refuse.

Do

Look out for skin care, pressure injuries and heightened sensitivity to cold.

Do

Ask the person how you can assist them in a way that supports their remaining strength and respects their loss of ability.

Name:

My reflections:

What changes related to eating and activity should I report to nursing/supervisory staff?

In the daily care of an older person with significant weight loss, what should I pay attention to?

My notes:

See related palliAGED Practice
Tip Sheets:
Frailty
Nutrition and Hydration
Recognising Deterioration

For references and the latest version of all Tip Sheets visit
www.palliaged.com.au/PracticeTipSheets