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The obesity paradox for middle and long-term mortality in older cancer patients: a prospective multicentre cohort study

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CONFLICT OF INTEREST DISCLOSURE

I have no potential conflict of interest to report
Background

• **Overweight and obesity**
  - important medical concerns worldwide
  - **high body mass index** (BMI ≥ 25 kg/m²) → associated with greater all-cause **mortality**

• Among older adults, substantial literature suggests a **better survival** among **overweight** and **obese** patients → **“obesity paradox”**

• Phenomenon observed in **adult** patients with many **cancer** types
  - One study **older** patients with **cancer**

• Association between overweight/obesity and mortality complicated by the concomitant weight loss and cachexia

**Objective:** to assess the **impact** of **high body mass index** on **mortality** in older patients with cancer
Results

- **Patient characteristics**
  - Mean age: 81 years
  - Females: 48%
  - BMI categories
    - Underweight (UW): 30%
    - Normal weight (N): 23%
    - Overweight (OW): 33%
    - Obese (O): 14%
  - Weight loss
    - <5%: 57%
    - 5-<10%: 22%
    - ≥10%: 21%
  - Metastasis: 49%
  - Main cancer sites
    - Digestive tract: 37%
    - Urogenital tract: 26%
    - Breast: 16%

- **Males** n=721
- **Females** n=633

Abbreviations: UW, underweight; N, normal; OW, overweight; O, obese; WL, weight loss

Hazard Ratios adjusted for age, smoking status, in/out patient status, supportive care, cancer, metastases, ECOG-PS and number of severe comorbidities (CIRS-G: grade 3/4)
Conclusion

• Our results evidenced **sex differences** in the association between **high BMI** and **mortality**.

• By taking account of prediagnosis WL, we observed the **obesity paradox** solely in a **subgroup of older female patients with cancer and WL <10%**.
Thank you for your attention