with hormone-receptor+ BCs, since excess fat tissue in postmenopausal women results in higher blood estrogen concentrations. While endocrine-treatment with aromatase inhibitors has markedly improved BC outcomes, there is evidence that obese women may not fully benefit from these agents. This longitudinal study aimed to evaluate changes in weight/body composition in BC pts on hormone-therapy (HT).

Methods: 23 pts were enrolled (15 on tamoxifen, 7 on letrozole). Anthropometrics and body composition were assessed in the beginning of the HT and 3 months (3 mo) later.

Results: At baseline, 30% of women were obese (BMI $\geq$30 kg/m$^2$) and 48% were overweight (25–30 kg/m$^2$), while the remainder had regular BMI (19–25 kg/m$^2$); 3 mo later, the prevalence of obesity decreased to 9%, while overweight was present in 35% of pts. However, taking into account the body composition at both timepoints, all women had excess fat mass index (FFMI). Nevertheless, at baseline, 64% of pts had an adequate fat free mass index (FFMI), though this prevalence reduced to 54% 3 mo later (3 kg/m$^2$). When we compared the differences of tamoxifen vs letrozole, 37% on tamoxifen gained a mean of 1.5 kg vs 40% on letrozole that showed an increase of 1.8 kg in weight. Mean values of weight loss were 2.8 kg and 0.6 kg, respectively. FFMI decreased more in pts on tamoxifen (2.6 kg/m$^2$) vs letrozole (2.0 kg/m$^2$). No women on tamoxifen increased FFMI vs 40% of those on letrozole, who increased 2.6 kg/m$^2$. In 67% of pts, BMI was higher in the second timepoint and the remainder maintained the initial values.

Conclusion: The prevalence of overweight/obesity was significant, as the prevalence of excess body fat, which increased in the majority of pts after 3 mo. FFMI decreased mainly in women on tamoxifen. These results need to be made aware to clinicians due to clinical/prognostic implications.

Disclosure of Interest: None declared

MON-LB013
HANDGRIP DYNAMOMETRY AND PATIENT-GENERATED SUBJECTIVE GLOBAL ASSESSMENT IN PATIENTS WITH NON-RESECTABLE LUNG CANCER
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Rationale: Undernutrition is frequently associated with advanced lung cancer. Accurate nutritional assessment tools are important to provide the proper nutritional therapy. Hand grip strength (HGS) has already been used in these patients and the findings suggest it is a good indicator of nutritional status. The aim of this study was to evaluate the association between nutritional status and hand grip strength in patients with non-resectable lung cancer.

Methods: Cross-section study involving thirty-seven subjects with non-resectable lung cancer. Nutritional status was obtained by using Patient-Generated Subjective Global Assessment (PG-SGA), muscle function was evaluated by HGS using a JAMAR® hand grip dynamometer on the non-dominant hand. The results of both methods were compared and correlated.

Results: According to PG-SGA, 73% of patients (n = 27) were moderately undernourished and 8% (n = 3) were severely undernourished. Globally, 81% (n = 30) were undernourished. We found a significant association between nutritional status according to PG-SGA and HGS ($p=0.026,$ CI = 95%).

Conclusion: HGS can be a useful tool to detect rapid changes on the functional and nutritional status. It should be included in nutritional status evaluation procedures, in combination with other assessment tools.

Disclosure of Interest: None declared

MON-LB014
FOOD INSECURITY ASSESSMENT AND NUTRITIONAL STATUS OF INDIVIDUALS IN MUTAUANHA-NAMPULA, MOZAMBIQUE
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Rationale: Mozambique noted a reduction from 35% to 24% in between 2006 to 2013 [1], although still has a high prevalence of chronic undernutrition of 43% [2].

Methods: Cross-sectional study (n = 103 families). Food insecurity level was determined by the short version of the American Food Insecurity Scale. The Body Mass Index (BMI) as well as the stunting (height/age) was determined by the weight and the height of the analysed individuals adopting as reference the World Health Organization curves [3]. Data analysis was performed by SPSS version 20.0.

Results: The monthly per capita income was 766.7±718.30 MZN (US$ 22.10). Approximately 65% (n = 67) of families were in a situation of food insecurity. In children and adolescents the prevalence of chronic undernutrition, underweight and overweight was 31.1% (n = 45), 4.4% (n = 6) and 21.3% (n = 29), respectively. Among adults, the prevalence of undernutrition was 49% (n = 35) and the overweight 21.1% (n = 15). Food insecurity was associated with the lower income quartiles (r = -3.11: 0.006), the subsistence agriculture, untreated water for food preparation, dissatisfaction with regular health interventions and with stunting.

Conclusion: Food insecurity in Mutauanha-Nampula, is associated with low per capita incomes and occurrence of chronic undernutrition in the community children.

References

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