



## IV WORKSHOP DO PROGRAMA DE PÓS-GRADUAÇÃO EM CIRURGIA E I SIMPÓSIO DE CIRURGIA



### **Desnutrição e Baixa Massa Muscular em Pacientes com Câncer Gastrointestinal Submetidos a Cirurgia: Existe Associação com a Localização do Tumor?**

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#### **1. INTRODUÇÃO**

O câncer do trato gastrointestinal representa um dos principais problemas de saúde pública no Brasil e no mundo. Para o triênio 2023–2025, estimam-se mais de 70 mil novos casos anuais de tumores de cólon e reto. Nesse contexto, a desnutrição e a redução da massa muscular assumem destaque como condições frequentes em pacientes oncológicos, influenciadas tanto pela presença do tumor quanto pelos efeitos do tratamento. Além disso, fatores como localização tumoral, estadiamento e impacto sistêmico exercido pela neoplasia podem influenciar o estado nutricional e o desempenho físico desses pacientes. O presente estudo busca analisar se existe associação entre desnutrição, baixa massa muscular e localização tumoral em pacientes com câncer do trato gastrointestinal submetidos à intervenção cirúrgica.

#### **2. OBJETIVO GERAL**



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Avaliar a associação entre o estado nutricional, a redução de massa muscular e a localização do tumor em pacientes com câncer gastrointestinal submetidos à cirurgia.

### 3. METODOLOGIA

Estudo transversal realizado em um hospital terciário do estado do Rio de Janeiro, com amostra final de 52 indivíduos no período pré-operatório imediato. A classificação nutricional foi realizada pela Avaliação Subjetiva Global Produzida pelo Paciente (ASG-PPP) e o índice de massa corporal (IMC). A avaliação da massa muscular esquelética ocorreu por tomografia computadorizada (TC) e o software Slice-O-Matic®. Mensuraram o índice de massa muscular esquelética (IMME) e a radiodensidade muscular esquelética (RME). A força muscular foi avaliada pela força de preensão manual (FPM). Dados como comorbidades, estadiamento tumoral e localização da neoplasia foram incluídos.

### 4. RESULTADOS E DISCUSSÃO

A idade média da amostra foi de 61,5 anos, 46% mulheres. Desses, 40% apresentavam IMC de baixo peso/desnutrição e 56% mostraram pontuação ASG-PPP de risco nutricional. Observou-se alta prevalência de baixa massa muscular. Pacientes com tumores colorretais apresentaram maior frequência de  $IMME \leq 1$  tercil (82%), demonstrando pior composição muscular quando comparados ao grupo com tumores de trato gastrointestinal alto. A força de preensão manual reduzida em parte da amostra.

Não se identificou associação significativa entre localização tumoral e desnutrição ou baixa massa muscular. Mas, o estudo reforça a necessidade de avaliação nutricional multimodal, incorporando ferramentas como ASG-PPP, TC e FPM para melhor estimativa do risco e prognóstico.

### 5. CONCLUSÃO

O estudo concluiu alta prevalência de desnutrição e redução de massa muscular entre pacientes com tumores gastrointestinais, independentemente da localização do tumor. Reforçando a necessidade de avaliação nutricional abrangente no período pré-

operatório. A identificação precoce de alterações musculares pode auxiliar no planejamento terapêutico, otimizar a resposta cirúrgica e melhorar o prognóstico desses pacientes.

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