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Introduction

Cancer cachexia is a multifactorial syndrome characterized by an ongoing loss of skeletal muscle mass that cannot be completely reversed by nutritional support. Finding a cure for cachexia will impact cancer patients

there is a role of immunity in prevention of cancers and this has been confirmed later by several studies and Lactoferrin can regress the size of the tumour Previous clinical trial validated the efficacy of bLf for cancer which was manifested by an increase in the levels of hLf and improvement in Hb and serum iron level

Aims

The primary endpoint was to compare the serum level of human lactoferrin and iron between cases and controls.

The secondary endpoint was to study if there was a correlation between serum levels of lactoferrin and survival and decrease in BMI in the cases.

Methods

De-identified data collected from a subset of the participants from my case control stud who agreed and sign a consent form after randomisation for secondary analysis of their results of hLf. The investigation was a retrospective study and period of follow up was between six months and two years or death.

Clinical audit de-identified data was collected from a total of 174 patients (87 cases and 87 controls) which include date and age at primary diagnosis, pharmacological treatment, and biochemistry for secondary analysis. Patients aged > or equal 18 years-old and \leq 75 years) with a report of histopathology to approve type, stage and site of the tumour with weight loss \geq 5% for the cases and no weight loss for the controls. Cases were adult females or males who have cervical cancer or ovarian cancer, colon cancer or NSCLC. Controls were similar in age, sex to cases except for diagnosis of cachexia

Results and conclusions

There is a drop-in serum hLf and iron levels in cancer cachexia, advanced cancer which could be treated with the oral feeding of bLf as it is validated for treatment of anaemia. Serum level of Human lactoferrin can be utilized as a biomarker for early diagnosis of cancer cachexia at the pre-cachexia stage. It would be beneficial to conduct a double-blinded randomised control



