

# Diagnostic accuracy of PG-SGA SF, MUST and SNAQ in patients with head and neck cancer

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## Aim

We aimed to assess diagnostic accuracy of the PG-SGA SF, Short Nutritional Assessment Questionnaire (SNAQ) and Malnutrition Universal Screening Tool (MUST), in patients with head and neck cancer, at the University Medical Center Groningen, The Netherlands.

## Conclusion

In patients with head and neck cancer, the PG-SGA SF shows good diagnostic accuracy, whereas sensitivity of the MUST and SNAQ are poor in this patient population. Utilizing the PG-SGA SF facilitates accurate identification of malnutrition and its risk factors in head and neck cancer patients.

## Methods

- Cross-sectional study
- 78 patients with head and neck cancer
- Malnutrition risk was assessed by PG-SGA SF, MUST, and SNAQ
- Low or medium malnutrition risk was defined as: PG-SGA SF = 0-8 points; MUST = 0-1 points; SNAQ = 0-2 points
- High malnutrition risk was defined as: PG-SGA SF  $\geq 9$  points; MUST  $\geq 2$  points; SNAQ  $\geq 3$  points
- Nutritional status was assessed by the using Dutch version of the full PG-SGA, v3.7 (based on the original English PG-SGA ©FD Ottery, 2005, 2006)
- Malnutrition was defined as PG-SGA Stage B (moderately or suspected malnutrition) or Stage C (severely malnourished)
- Diagnostic accuracy was assessed by calculating sensitivity, specificity, and positive and negative predictive value

Table 1. Diagnostic accuracy of PG-SGA SF, MUST and SNAQ

	PG-SGA SF	MUST	SNAQ
<b>Sensitivity</b>	0.73	0.40	0.40
<b>Specificity</b>	1.00	0.92	0.92
<b>Positive predictive value</b>	1.00	0.75	0.75
<b>Negative predictive value</b>	0.86	0.71	0.71

## Background

The Patient-Generated Subjective Global Assessment Short Form (PG-SGA SF; ©FD Ottery) is a screening instrument to identify malnutrition and its risk factors in clinical populations.<sup>1</sup>

The PG-SGA SF includes 4 Boxes:

1. Weight
2. Food Intake
3. Symptoms
4. Activities and Function

## Results

Prevalence of high malnutrition risk was 28%, 21% and 21% according to PG-SGA SF, MUST and SNAQ, respectively.

According to the full PG-SGA, 39% of the patients were malnourished.

Results on diagnostic accuracy are shown in Table 1.

## References

1. Ottery FD. Definition of standardized nutritional assessment and interventional pathways in oncology. Nutrition 1996;12(1 Suppl):S15-9

