ASO Author Reflections: Actual Sarcopenia in Esophageal Cancer Patients

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PAST

In recent years, some reports suggest that preoperative sarcopenia in cancer patients correlates with short- and long-term outcomes in surgery, whereas others suggest that it does not correlate with outcomes.¹ Although the assessment of nutrition and physical performance before highly invasive surgeries such as esophagectomy is expected to be important, the authors suspect that the conventional sarcopenia diagnosis does not adequately assess the actual perioperative impact of patients' conditions.

PRESENT

In sarcopenia patients, atrophy of type 2 muscle fibers is remarkable,² but the conventional sarcopenia diagnosis is based mainly on the evaluation of type 1 muscle fibers, which are measured by walking speed or muscle strength.³ This study⁴ assessed type 2 muscle fibers by creatinine (Cr)⁵ and nutrition status by albumin (Alb).⁶ By combining Cr × Alb and conventional sarcopenia diagnosis, this study identified the actual sarcopenia patients. The actual sarcopenia patients showed significantly poorer overall survival (OS), disease-free survival (DFS), and cause-specific survival (CSS).

FUTURE

In the future, the authors will conduct a multicenter study with a larger number of patients to investigate whether the actual sarcopenia applies to other cancer types. Furthermore, the study will investigate whether the actual sarcopenia is a predictor of short-term outcomes. Finally, the authors plan to investigate whether preoperative nutritional and rehabilitative interventions can improve the prognosis of the actual sarcopenia patients.

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