

**Background:** Malnutrition, sarcopenia, and cachexia are highly prevalent, but under-recognised conditions in older adults with cancer. We aimed to explore patients' views and experiences of these conditions.

**Methods:** Eight semi-structured interviews with patients with cancer, aged ≥70, in a tertiary cancer centre. Participants were screened for malnutrition, sarcopenia, and cachexia. Interviews explored views and experiences of screening, and of the three conditions. Interviews were thematically analysed with a phenomenological lens, with feedback loop analysis investigating relationships between themes.

**Results:** Three feedback loops were identified; i) impact of misunderstanding, ii) concerned patients feeling they have nowhere to turn, and iii) the role of screening for malnutrition, sarcopenia, and cachexia (figure 1).

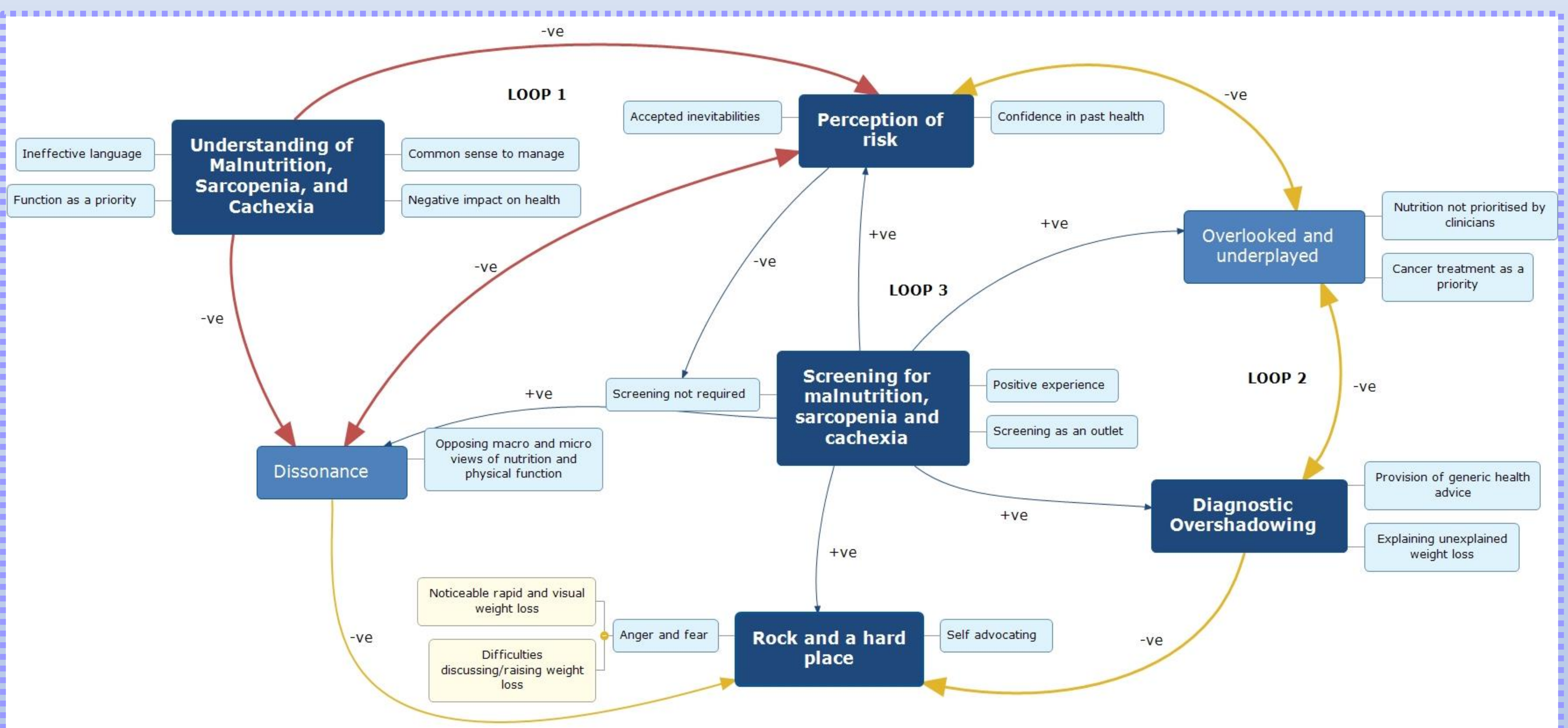


Figure 1: Feedback loop diagram illustrating interlinking themes of the views and experiences of malnutrition, sarcopenia, and cachexia in older adults with cancer

A fundamental misunderstanding of the conditions resulted in reduced risk perception. Nutritional or physical function problems were perceived as overlooked by clinicians, overshadowed by the cancer diagnosis, or attributed to other comorbidities or ageing. A tension was seen between participants' experiences of these conditions and their belief that "it's not going to happen to me", whilst also seeing problems as inevitable due to the cancer diagnosis and treatment. This left patients with nowhere to turn when nutritional or functional problems affected anticancer treatment options or quality of life. Screening for the conditions presented an opportunity for concerns to be addressed and taken seriously by health care professionals.

**Conclusion:** Patients' perceptions and diagnostic overshadowing present barriers to the management of these conditions, with a need to alter attitudes to these conditions to enable successful symptom management in older adults with cancer.