

Cachexia Mechanisms

Vickie Baracos
University of Alberta

Cachexia Mechanisms

- An integrated physiological response of substrate mobilization driven by inflammation
- Exacerbated by tumor progression, comorbid conditions, old age, deconditioning, nutritional deficiency, drugs and medical interventions

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Review

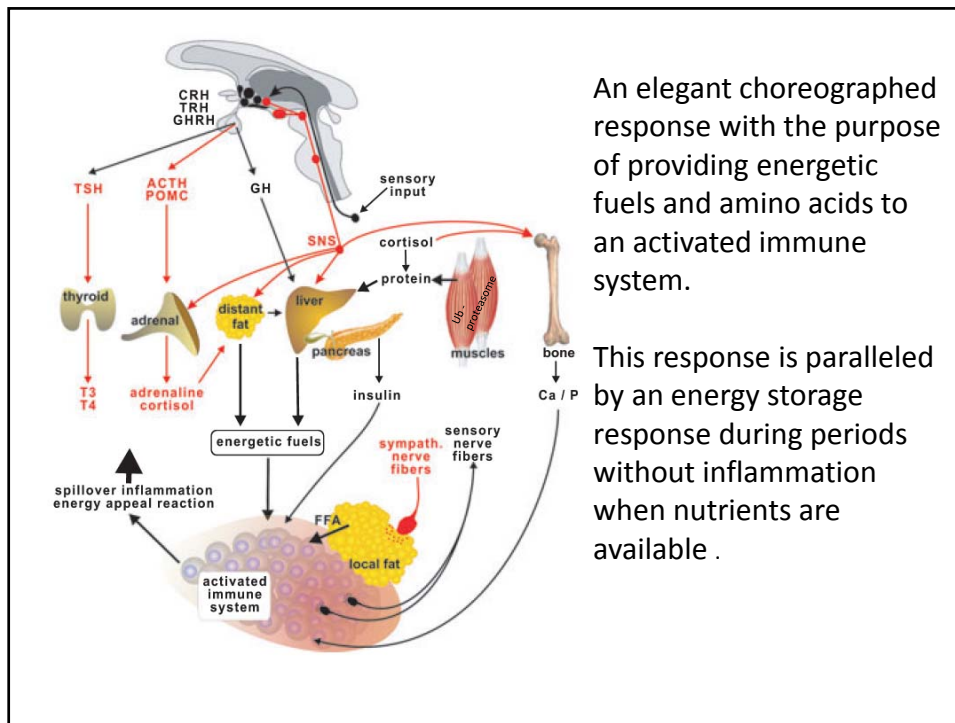
Journal of INTERNAL MEDICINE

doi: 10.1111/j.1365-2796.2010.02218.x

Energy regulation and neuroendocrine–immune control in chronic inflammatory diseases

■ R. H. Straub¹, M. Cutolo², F. Buttgerit³ & G. Pongratz¹

From the ¹Laboratory of Experimental Rheumatology and Neuroendocrino-Immunology, Division of Rheumatology, Department of Internal Medicine I, University Hospital, Regensburg, Germany, ²Research Laboratory and Academic Unit of Clinical Rheumatology, Department of Internal Medicine and Medical Specialties, University of Genova, Genova, Italy, and ³Department of Rheumatology and Clinical Immunology, Charité University Medicine Berlin, Berlin, Germany



Central nervous system inflammation induces muscle atrophy via activation of the hypothalamic–pituitary–adrenal axis

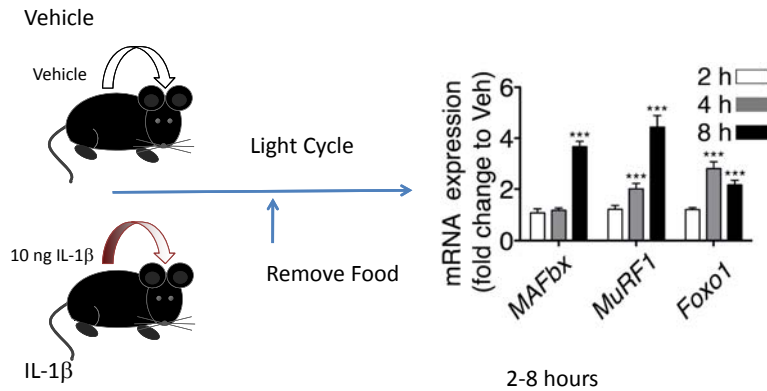
Theodore P. Braun,^{1,2} Xinxia Zhu,¹ Marek Szumowski,¹ Gregory D. Scott,^{2,3} Aaron J. Grossberg,^{1,2} Peter R. Levasseur,¹ Kathryn Graham,⁴ Sheehan Khan,⁵ Sambasivarao Damaraju,⁶ William F. Colmers,⁷ Vickie E. Baracos,⁴ and Daniel L. Marks¹

¹Papé Family Pediatric Research Institute, ²MD/PhD Program, and ³Department of Pulmonary and Critical Care, Oregon Health & Science University, Portland, OR 97239

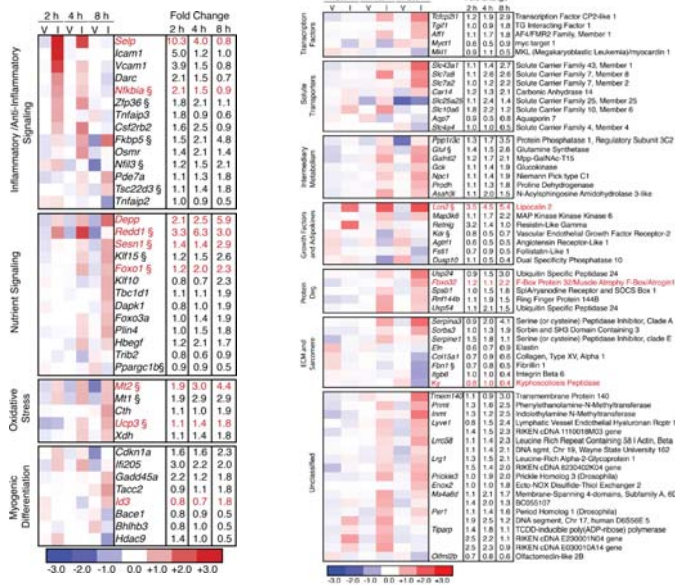
⁴Department of Oncology, ⁵Department of Computer Science, ⁶Department of Laboratory Medicine and Pathology, and ⁷Department of Pharmacology, University of Alberta, Edmonton, Alberta T6G 2H7, Canada

The Rockefeller University Press \$30.00
J. Exp. Med. Vol. 208 No. 12 2449–2463
www.jem.org/cgi/doi/10.1084/jem.20111020

Central inflammation results in transcriptional changes of ubiquitin ligases consistent with atrophy

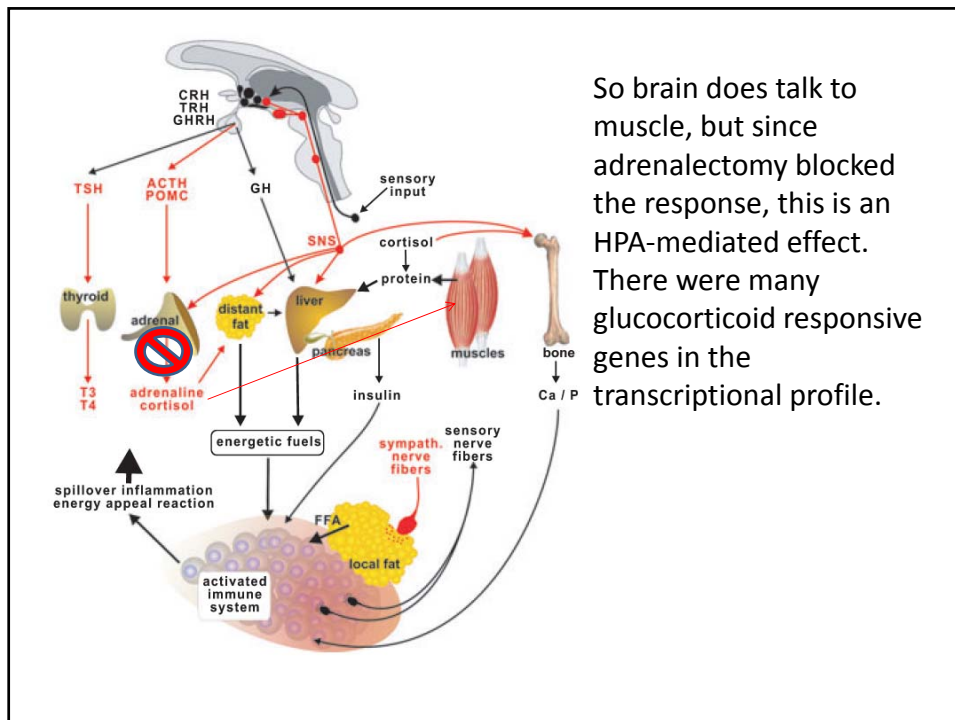


Central IL-1 β treatment induces rapid and dynamic changes in skeletal muscle gene expression.



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JEM



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Inactivity / deconditioning / aging



RESEARCH LETTER

Effect of 10 Days of Bed Rest on Skeletal Muscle in Healthy Older Adults 1772 JAMA, April 25, 2007—Vol 297, No. 16 (Reprinted)

Table. Effects of 10 Days of Bed Rest in Older Adults

	No. of Participants (N = 12) ^a	Mean (95% Confidence Interval)			P Value
		Bed Rest		Change	
		Before	After		
Muscle fractional synthetic rate, % per hr ^b	10	0.077 (0.059 to 0.095)	0.051 (0.035 to 0.067)	-0.027 (-0.007 to -0.047)	.02
% Change				-30.0 (-7.0 to -54.0)	
DEXA lean mass, kg [‡]	10				
Whole body		48.05 (40.61 to 55.49)	46.51 (39.57 to 53.45)	-1.50 (-0.62 to -2.48)	.004
% Change				-3.2 (-1.4 to -5.0)	
Lower Extremity		15.01 (12.41 to 17.61)	14.06 (11.85 to 16.27)	-0.95 (-0.42 to -1.48)	.003
% Change				-6.3 (-3.1 to -9.5)	
Isokinetic muscle strength, Nm per s [§]	11	120 (96 to 145)	101 (81 to 121)	-19 (-11 to -30)	.001
% Change				-15.6 (-8.0 to -23.1)	

Abbreviation: DEXA, dual-energy x-ray absorptiometry; Nm, Newton meter.
^aOne participant was excluded from all analyses because of insufficient protein intake.
^bBecause of a technical error, the muscle fractional synthesis rate measurement was excluded for 1 participant.
[‡]One participant was excluded from the DEXA analysis because the scan before bed rest was not administered.
[§]Isokinetic knee extension at 60° per second.

0021-972X/99/803.00/0
The Journal of Clinical Endocrinology & Metabolism
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Vol. 84, No. 10
Printed in U.S.A.

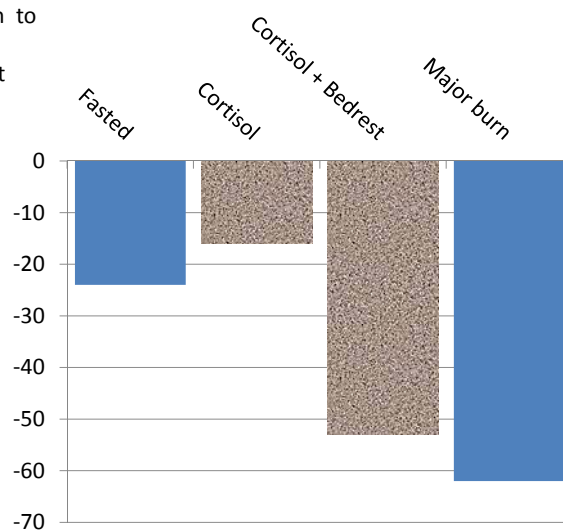
Inactivity Amplifies the Catabolic Response of Skeletal Muscle to Cortisol*

ARNY A. FERRANDO, CHARLES A. STUART, MELINDA SHEFFIELD-MOORE, AND ROBERT R. WOLFE

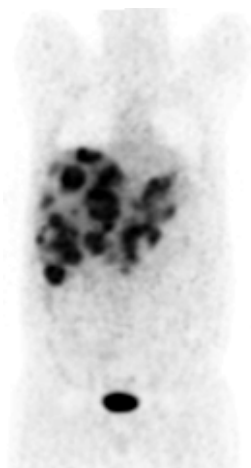
Departments of Surgery (A.A.F., M.S.-M., R.R.W.) and Internal Medicine (C.A.S.), University of Texas

Leg phenylalanine net balance (nmol/min/100mL leg)

- 26 y old men
- Cortisol infusion to 30 µg/dL
- 14 days bed rest

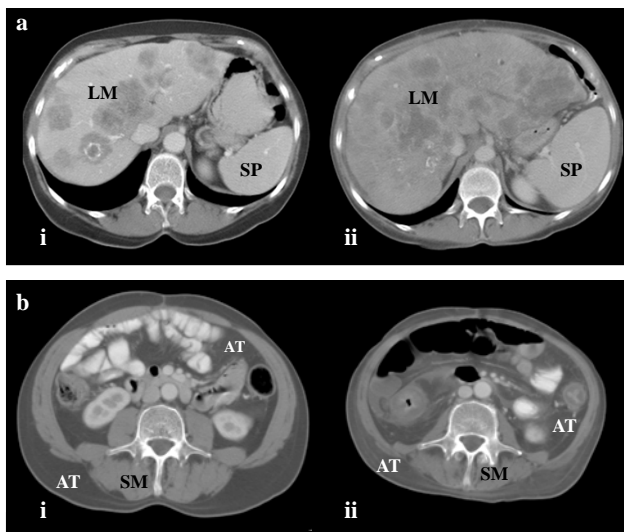


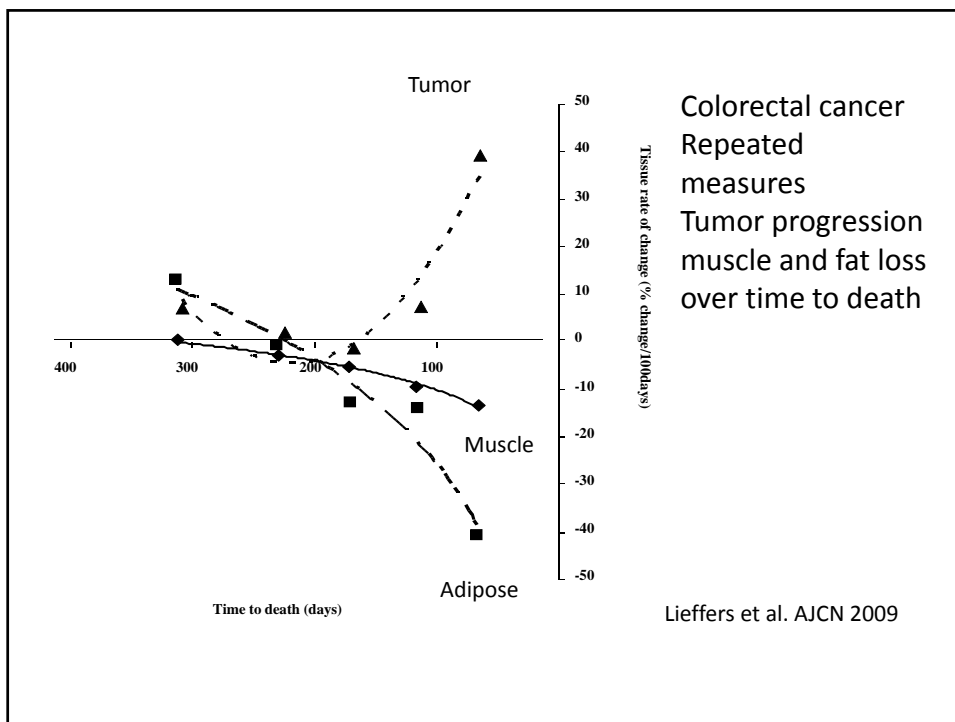
Tumor progression



Metabolic demand
Inflammatory mediators

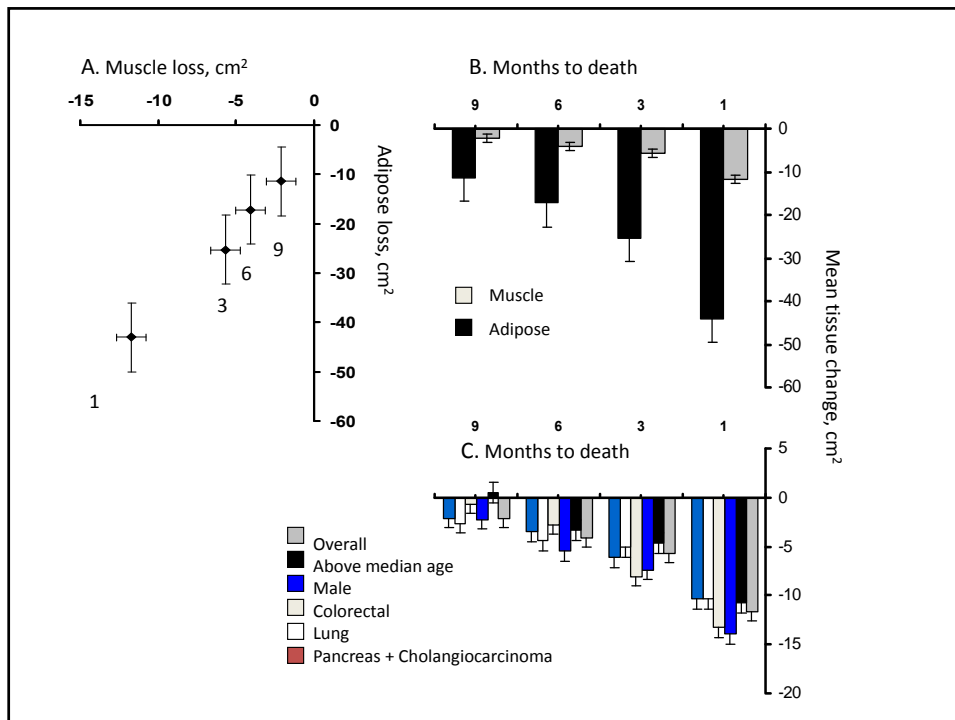
Figure 1





Progression of tissue wasting in advanced malignancy

CT image analysis n= 1300



Comorbid conditions

- May also associated with cachexia or muscle wasting
- Organ failure (liver, heart, lung, kidney), obesity / hypertension / diabetes

Comorbidity in sarcopenic colorectal cancer patients	Normal (n=143)	Sarcopenic (n=91)	P value
Age, y	61 ± 11	66 ± 12	0.001
Cardiac Arrhythmias %	4.9	21.1	<0.001
Hypertension %	26.6	43.3	0.008
COPD %	2.1	8.9	0.025
Diabetes %	12.6	23.3	0.032
Hypothyroidism %	3.5	11.1	0.021
Deficiency Anemia %	2.1	8.9	0.025
Fluid & Electrolyte disorders %	3.5	8.9	0.081
Days in hospital in the last year	1.0 ± 2.5	2.8 ± 7.6	0.029
Cancer Stage II, III, IV			0.49
Bowel Obstruction %	7.7	18.7	0.012

Nutritional deficiency?

Original Article

Nutritional Intervention With Fish Oil Provides a Benefit Over Standard of Care for Weight and Skeletal Muscle Mass in Patients With Nonsmall Cell Lung Cancer Receiving Chemotherapy

Cancer 2011;117:1775-82. © 2011 American Cancer Society.

Rachel A. Murphy, BSc¹; Marina Mourtzakis, PhD²; Quincy S.C. Chu, MD³; Vickie E. Baracos, PhD³; Tony Reiman, MD, SM⁴; and Vera C. Mazurak, PhD¹



Treatment effects

(head and neck cancer; Dechaphunkul & Baracos, unpublished)

- (6.3% muscle loss 10 days bed rest healthy elderly)
- 12.5% muscle loss oropharyngeal cancer resection with free flap reconstruction.
- 12.8% muscle loss oropharyngeal cancer course of radiotherapy + platinum – based chemotherapy.

Drug effects

Association of Skeletal Muscle Wasting With Treatment With Sorafenib in Patients With Advanced Renal Cell Carcinoma: Results From a Placebo-Controlled Study

Sami Antoun, Laura Birdsell, Michael B. Sawyer, Peter Venner, Bernard Escudier, and Vickie E. Baracos

VOLUME 28 · NUMBER 6 · FEBRUARY 20 2010

JOURNAL OF CLINICAL ONCOLOGY

8.5% muscle loss in 12 months

Skeletal muscle anabolism is a side effect of therapy with the MEK inhibitor: selumetinib in patients with cholangiocarcinoma

CMM Prado¹, T Bekaii-Saab^{2,3}, LA Doyle⁴, S Shrestha¹, S Ghosh¹, VE Baracos¹ and MB Sawyer^{*,1}

British Journal of Cancer (2012), 1–4

© 2012 Cancer Research UK All rights reserved 0007–0920/12 9.8% muscle gain in 3 months

