Supplementary data: Preoperative nutritional factors and outcomes after radical cystectomy: A narrative review

Janie Allaire^{1,2,3}; Tal Ben-Zvi, MD^{1,2}; Benoît Lamarche, PhD³; Karine Robitaille, PhD²; Yves Fradet, MD^{1,2}; Louis Lacombe, MD^{1,2}; Vincent Fradet, MD^{1,2,3}

Department of Surgery, Université Laval; ²Centre de recherche du CHU de Québec - Université Laval, L'Hôtel Dieu de Québec; ³Institute of Nutrition and Functional Foods, Université Laval; Quebec, QC, Canada

Published online November 1, 2017

| Supplementary Table 1. Summary of the studies included in this narrative review Methods of | | | | | | | |
|---|------|-----------------------------|---|---|---|--|--|
| First author | Year | Eligible subjects (n) | Factor(s) of nutritional evaluation | Outcome | Results | classification for complications | |
| Hollenbeck ²⁶ | 2006 | 2538 | Albuminemia and ≥10% weight loss | Length of hospital stay (>30d) and mortality | Logistic regression: Length of stay ≥30d: albuminemia ≤3.5 g/dl (OR 2.1; 95% CI 1.2–3.8). Mortality within 30d: weight loss ≥10% (OR 2.7; 95% CI 1.1–6.4), 90d: albuminemia ≤3.5 g/dl, (OR 12.0; 95% CI 2.8–51.0), weight loss ≥10% (OR 2.9; 95% CI 1.5–5.4). | | |
| Reyes ³³ | 2006 | 343 | ВМІ | Neobladder-related outcomes, pyelonephritis, incisional hernia, wound infections, wound dehiscence, and voiding patterns | Chi-Square test: Normal weight vs. overweight vs. obese subjects: Overall complications (p=0.012), urinary tract infection (p=0.001), pyelonephritis (p=0.04), wound infection (p=0.04) were less frequent in the normal weight group | | |
| Butt ³⁴ | 2008 | 51 | BMI | Complications rate, hospital length of stay, mortality | Kruskal-Wallis and Fisher's exact test: Hospital length of stay (results not provided), complications rate (NS), mortality (only one event) | | |
| Maurer ³⁵ | 2010 | 390 | ВМІ | Complications and mortality within 90d after RC | Mann-Whitney test: Higher BMI: 30d postoperative bleeding rate (p=0.02), other complications (NS), mortality (NS). Cox regression: Mortality (NS) | | |
| Novara ¹³ | 2009 | 358 | ВМІ | All complications and high-grade complications (including mortality) within 90d after RC | NS | MSKCC and Clavien-Dindo | |
| Shabsigh ³ | 2009 | 1320 | ВМІ | All complications and high-grade complications within 90d after RC | NS | MSKCC and Clavien-Dindo | |
| Svatek ¹⁴ | 2009 | 283 | ВМІ | Any AE within 90d after RC | Logistic regression: AE 90d: BMI (OR 1.16; 95% CI 1.08–1.23). High-grade (2–4): BMI (OR 1.10; 95% CI 1.04–1.16) | Common Terminology Criteria Adverse Events | |

AE: adverse event; BMI: body mass indexd: CI: confidence interval; day(s); HR: hazard ratio; OR: odds ratio; MSKCC: Memorial Sloan Kettering Cancer Classification; Nb: number; NRS: nutritional risk screening; NS: non-statistically significant; RC: radical cystectomy; SMI: skeletal muscle index.

| First author | Year | Eligible subjects (n) | Factor(s) of nutritional evaluation | Outcome | Results | Methods of classification for complications |
|-------------------------|------|-----------------------------|---|---|---|---|
| Svatek ³⁶ | 2010 | 283 | ВМІ | lleus | Fisher's exact test: (p=0.014). Logistic regression: (OR 1.09; 95% CI 1.03–1.17) | |
| Gregg⁴ ⁶ | 2011 | 905 | Nutritional risk was defined as one or more factor between: albuminemia <3.5 g/dl, BMI<18.5, and >5% weight loss | Overall mortality, mortality within and after 90d after RC | Cox regression: Overall survival (HR 1.82; 95% Cl 1.25–2.65), within 90d (HR 2.91; 95% Cl 1.36–6.23), after 90d (HR 1.55; 95% Cl 1.01–2.38) | |
| Morgan ⁴⁷ | 2011 | 220 | Albuminemia | Mortality 90d after RC in ≥75 years old subjects | Cox regression: Albuminemia <3.7 g/dl (HR 2.50; 95% Cl 1.40–4.45) | |
| Lambert ⁴⁹ | 2012 | 238 | Albuminemia | Complications and overall and cancer-specific mortality after RC | 2-sample test: Overall complications: Albuminemia <3.5g/dl vs. normal albuminemia (p=0.014). Cox regression: Overall survival: Albuminemia <3.5 g/dl (HR 1.76; p=0.04), cancer- specific survival: NS | |
| Large ³⁷ | 2012 | 91 | BMI | Delirium | NS | |
| Berger ¹⁵ | 2013 | 256 | ВМІ | Inpatient complication and mortality within 90d | Logistic regression: Inpatient complications (continuously, OR 1.13; 95% Cl 1.02–1.24), mortality (NS). Log-rank test: mortality (NS) | Clavien-Dindo |
| Chan ⁵⁰ | 2013 | 117 | Albuminemia | Overall mortality rate at 5 years after RC | Cox regression: Albuminemia >3.9 g/dl (HR 0.946; 95% Cl 0.902–0.992; p=0.022) | |
| Chromecki ³⁰ | 2013 | 4118 | ВМІ | Cancer-specific and overall mortality | Cox regression: BMI >30 kg/m²: Cancer- specific mortality (HR 1.43; 95% Cl 1.24–1.66; p<0.001), overall mortality (HR 1.81; 95% Cl 1.60–2.05; p<0.001). Similar results for BMI as a continuous variable (all p values <0.001) | |
| Djaladat ⁴⁸ | 2013 | 1964 | Albuminemia | Any AE leading to lengthening hospital stay or re-admission occurring within 90d after RC, mortality within 90d recurrence-free survival, and overall survival at 5 years | Logistic regression: Complications within 90d (NS), mortality within 90d (few events n=15) Cox regression: Recurrence free survival (HR 1.68; 95% CI 1.16 –2.43), overall survival (HR 1.93; 95% CI 1.43–2.63) | |
| Jensen ⁵⁴ | 2013 | 82 | NRS | Length of hospital stay (≥11d) | NS | |
| Mursi ¹⁶ | 2013 | 31 | Albuminemia, BMI | Early (≤30d), late (31 to 90d) and cumulative (<90d) re-admission rate, complications rate and grade, and mortality after RC | Chi-Square: albuminemia <3.5 g/dl: higher mortality rate (p=0.048, but few events), NS for other outcomes. BMI: NS | Clavien-Dindo |
| Xylinas ³¹ | 2013 | 231 | ВМІ | Cancer-specific mortality | Cox regression: Modelled continuously (HR 1.50; 95% CI 0.99–2.24; p=0.052) | |

AE: adverse event; BMI: body mass indexd: CI: confidemce interval; day(s); HR: hazard ratio; OR: odds ratio; MSKCC: Memorial Sloan Kettering Cancer Classification; Nb: number; NRS: nutritional risk screening; NS: non-statistically significant; RC: radical cystectomy; SMI: skeletal muscle index.

| First author | Year | Eligible subjects (n) | Factor(s) of nutritional evaluation | Outcome | Results | Methods of classification for complications |
|--------------------------|------|-----------------------------|---|--|--|---|
| Al-Daghmin ³⁹ | 2014 | 272 | ВМІ | 30 and 90d re-admission rate | Logistic regression: 30d (OR 1.12; 95% CI 1.05–1.19; p=0.004). 90d (OR 1.10; 95% CI 1.0–1.17; p=0.004) | |
| Bachir ³² | 2014 | 847 | ВМІ | Overall survival and disease-specific survival | Kaplan-Meier: No differences in overall survival (p=0.32) and disease-specific survival (p=0.35) between/among BMI subgroups (<25, 25–29, and ≥30 kg/m²) | |
| Donahue ⁴⁵ | 2014 | 386 | Albuminemia, BMI | Parastomal hernia within 2 years after RC | Cox regression: Albuminemia (continuously, HR 0.43; 95% CI 0.25–0.75; p<0.003). BMI (continuously, HR 1.08; 95% CI 1.05–1.12; p<0.0001) | |
| Garg ²⁰ | 2014 | 1320 | Albuminemia | Complications within 30 and 90d and mortality at 90d after RC | Fisher's exact test: Albuminemia <4 vs ≥4g/dl: Complications at 30d: neurological (p=0.001), wound (p<0.001), any complication (p=0.005). Complications between 60 and 90d (NS). Logistic regression: Grade 1–5 complications within 90d: (continuously, OR 0.61; 95% CI 0.42–0.90). Mortality within 90d: (continuously, OR 0.33; 95% CI 0.14–0.75) | MSKCC and Clavien-Dindo |
| Gandaglia ²¹ | 2014 | 1094 | Albuminemia, BMI | Complications within 30d (overall complications, prolonged operative time, prolonged length of stay, perioperative mortality) | Logistic regression: Overall complication: Albuminemia: unknown vs. ≥3 g/dl (OR 0.64; 96% Cl 0.48–0.85; p=0.01). BMI >30 vs. <25 kg/m² (OR 1.67; 95% Cl 1.16–2.42; p=0.01). Other outcomes: NS | |
| Johnson ²² | 2014 | 1213 | Albuminemia, >10% weight loss within 6 months before RC and BMI | Complications within 30d after RC | Logistic regression: Albuminemia <3.5 g/dl (OR 1.79; 95% Cl 1.06–3.03). BMI: NS. Weight loss: NS | |
| Lavallée ²³ | 2014 | 2303 | Albuminemia, >10% weight loss within 6 months before RC and BMI | Complications within 30d after RC | NS | |
| Psutka ⁴¹ | 2014 | 262 | BMI and fat mass index | Overall survival | Cox regression: Increasing BMI correlated with improved overall survival (p=0.03), fat mass index (NS) | |
| Roghmann ¹⁷ | 2014 | 535 | ВМІ | All complications and high-grade complications within 90d after RC | Logistic regression: Any complication (OR 1.08; 95% CI 1.03–1.13). High-grade (3 and 4, OR 1.07; 95% CI 1.02–1.12) | MSKCC and Clavien-Dindo |
| Tyson ²⁴ | 2014 | 1293 | вмі | 30d outcomes after RC: mortality, wound events, sepsis, pulmonary events, renal failure, thromboembolic and cardiac events, hospital length of stay, rates of return to operating suite, total operative time, and total blood transfusions | Fisher's exact test: BMI <30 vs. ≥30 kg/m²: operative time (p=0.04), NS for other outcomes | |

AE: adverse event; BMI: body mass indexd: CI: confidemce interval; day(s); HR: hazard ratio; OR: odds ratio; MSKCC: Memorial Sloan Kettering Cancer Classification; Nb: number; NRS: nutritional risk screening; NS: non-statistically significant; RC: radical cystectomy; SMI: skeletal muscle index.

| First author | Year | Eligible subjects (n) | Factor(s) of nutritional evaluation | Outcome | Results | Methods of classification for complications |
|--------------------------|------|-----------------------------|---|---|--|---|
| Wan ¹⁸ | 2014 | 247 | Albuminemia, BMI, SMI | Complications within 90d | Logistic regression: Overall complication: Albuminemia <3.5g/dl (OR 3.63; 95% Cl 1.20–11.00; p=0.0023), BMI (NS), SMI (NS). High-grade complications: Albuminemia (NS), BMI (NS), SMI (OR 0.95; 95% Cl 0.92–0.99; p=0.017) | Clavien-Dindo |
| Hinata ⁴² | 2015 | 730 | Albuminemia, BMI | Overall survival | Cox regression: Albuminemia <3.5g/dl vs. 3.5 g/dl (NS). BMI <22kg/m² vs. ≥22 kg/m² (HR 1.65; 95% Cl 1.17– 2.33; p=0.004) | |
| Meyer ²⁵ | 2015 | 1776 | Albuminemia, BMI | Wound dehiscence | Logistic regression: BMI between 25 and 30 kg/m² (OR 2.1; 95% CI 1.1–3.9; p=0.02) and BMI >30 kg/m² (OR 2.3; 95% CI 1.3–4.4; p=0.008) vs. BMI <25 kg/m². Chi-Square: Albuminemia (NS), BMI (p=0.015) | |
| Potretzke ⁴³ | 2015 | 241 | ВМІ | Symptomatic venous thromboembolic events within 90d after RC | Logistic regression: BMI ≥30 kg/m² vs. <30 kg/m² (OR 4.69; 95% CI 1.70–12.92) | |
| Sun ⁴⁴ | 2015 | 2316 | ВМІ | Symptomatic venous thromboembolism within 90d after RC | Logistic regression: BMI (p=0.0015) | |
| Caras ²⁷ | 2016 | 1,374 | Albuminemia | 30d complications (morbidity and mortality) | Logistic regression: Albuminemia <3.5g/dl: Morbidity (OR 1.49; p=0.006), Mortality (NS) | |
| Dabi ³⁸ | 2016 | 701 | ВМІ | Cancer-specific mortality | Cox regression: BMI >30 kg/m² vs. 18–25 kg/m² (HR 1.58; 95% CI 1.06– 2.34; p=0.02) | |
| Jensen ²⁸ | 2016 | 246 | BMI, nutritional status | Length of hospital stay | Linear regression: BMI continuously (NS), Nutritional status (NS) | |
| Liu ⁵¹ | 2016 | 296 | Albuminemia/ (total proteinemia/ albuminemia) ratio | Cancer-specific mortality | Cox regression: Ratio ≥1.6 (HR 0.28; 95% CI 0.12-0.68; p=0.005) | |
| Movassaghi ⁴⁰ | 2016 | 670 | ВМІ | Parastomal and incisional hernia | Cox regression: BMI ≥30 kg/m² vs. <30 kg/m²: Parastomal hernia (NS), Incisional hernia (HR 2.11; 95% CI 1.26– 3.56; p=0.004) | |
| Osawa ¹⁹ | 2016 | 2,240 | ВМІ | 90d complications (morbidity [Clavien-Dindo Grade 3–5] and mortality) | Logistic regression: 90d mortality: continuously (OR 1.07; 95% CI 1.02–1.12; p=0.004), 90d morbidity continuously (OR 1.04; 95% CI 1.02–1.07; p<0.001) | Clavien-Dindo |

AE: adverse event; BMI: body mass indexd: CI: confidemce interval; d: day(s); HR: hazard ratio; OR: odds ratio; MSKCC: Memorial Sloan Kettering Cancer Classification; Nb: number; NRS: nutritional risk screening; NS: non-statistically significant; RC: radical cystectomy; SMI: skeletal muscle index.