BENEFITS

- Patients' nutritional needs targeted
- Interventions tailored to treatment cycles and/or nutrition impact symptoms
- Intervention uncertainties addressed
- Patient burden minimized
- Relevant outcomes chosen
- Broadened eligibility criteria and generalizability
- Increased equity of access to trials and care



Alternative trials in oncology nutrition research

Treatment discontinuation

Change from curative to palliative intent Loss to follow up Poor adherence to interventions Difficulties in conducting blinded research

Low recruitment rate

Longer ethics and regulatory approvals

CHALLENGES