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Nutrition Research Review

Guidelines for Nutrition in Adults with Head and Neck Cancer

Publication: Journal of Parenteral and Enteral Nutrition
Publish Date: March 2026
Authors: Kiss N, Findlay M, Frowen J, Lewis WE, Mills J, Singh AK, Church DD, Mey JT, Peterson S, Aguzzi K, Bellini S, Coelho MPV, Cordwin L, Duffy M, Hager S, Mundi MS, Owen-Michaane M, Price K, Stanner H, Storm B, Udagedara M, McKeever L

SUMMARY

Nutrition care plays a critical role in the management of adults with head and neck cancer due to high risks of inadequate intake and malnutrition. These ASPEN clinical guidelines provide evidence-based recommendations developed from a systematic review of 92 studies and expert consensus. Guidance is offered on nutrition screening, assessment, timing and duration of nutrition support, and the role of dietitians and speech pathologists throughout treatment. The guidelines support early initiation of enteral nutrition when oral intake is insufficient, early postoperative feeding, and regular

dietitian involvement during radiotherapy. Recommendations for protein and energy intake are provided, along with considerations for feeding tube selection and interdisciplinary care models. The document also highlights research gaps and the need for standardized outcomes.

READ ARTICLE

Clinical Practice Guideline for Diagnosis and Management of Faltering Weight

Publication: Pediatrics
Publish Date: April 2026
Authors: Kersten HB, Goday PS, Abdelhadi R, et al.

SUMMARY

Updated national guidance clarifies how clinicians should identify and manage poor weight gain in young children. Developed jointly by the American Academy of Pediatrics and the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition, this guideline replaces the term “failure to thrive” with “faltering weight” to reduce stigma and improve consistency in care. Faltering weight is defined using standardized growth z-scores, including low weight-for-length or BMI, poor weight-gain velocity in children under two years, or significant downward shifts in growth trajectories.

Based on systematic evidence reviews and expert consensus, the guideline discourages routine laboratory testing or endoscopy in the absence of specific clinical signs, citing low diagnostic yield and potential harm. Management emphasizes nutritional strategies such as increasing caloric intake, using oral nutrition supplements when appropriate, and providing therapy for pediatric feeding disorders when feeding difficulties are present. Accurate anthropometric measurement and careful growth monitoring are highlighted as essential components of care. The guideline also stresses individualized, multidisciplinary management and attention to social supports without using socioeconomic status as a diagnostic criterion.

READ ARTICLE

Embedding Nutrition into Routine Oncology Care: About Time?

Publication: Oncology Reviews
Publish Date: March 2026
Authors: Laird BJA, Antonuzzo L, Sánchez Cabrero D, Esin E, Froeling F, Jordan K, Kekez D, Skipworth R, Schooneman M, Yalçın Ş, Prado CM, Muscaritoli M

SUMMARY

Nutrition remains underutilized in oncology care despite its clear influence on treatment tolerance, quality of life, and survival. This narrative review examines barriers that limit routine integration of nutrition across the cancer continuum and proposes practical strategies to address them. The authors highlight the need for simple, cancer-specific tools for nutrition screening and assessment, as well as clearer, more constructive terminology when discussing nutritional decline. Common obstacles include misconceptions about cachexia, limited nutrition training among oncologists, poor guideline adherence, and restricted access to dietitians. The review emphasizes early and ongoing nutritional monitoring, integration of nutrition into clinical trials and perioperative care, and improved education and collaboration to position nutrition as a core component of oncology treatment.

READ ARTICLE

Maternal and Child Nutrition Insecurity, Microbiome, and Early Neurodevelopment: An Intricate Interplay

Publication: European Journal of Public Health
Publish Date: March 2026
Authors: Specchia ML, Beccia F, Cacciuttolo MG, Petrella L, Mungo T, Thiella S, Lucarelli

A, Zace D, Di Pietro ML

SUMMARY

Growing evidence links early nutrition with gut health and brain development, and this systematic review examines how these factors interact in mothers and young children. Following PRISMA guidelines, the authors reviewed 11 mostly cohort studies published up to March 2024 that explored nutrition insecurity, gut microbiome composition, and early neurodevelopmental outcomes. Across studies, both maternal and infant gut microbiota were associated with cognitive, motor, and behavioral development during early childhood. Nutrition insecurity emerged as an important influence, as limited or poor-quality diets were linked to altered microbiome patterns and less favorable developmental outcomes. Breastfeeding consistently appeared as a key modulator of the infant microbiome, supporting healthier neurodevelopment trajectories. Other maternal factors, including pre-pregnancy overweight and environmental conditions, also shaped infant gut colonization and development. The review highlights the need for nutrition-focused interventions during pregnancy and early life to support microbiome health and neurodevelopment.

READ ARTICLE

Longitudinal Deterioration in Nutritional Status Associated with Increased Risk of Sarcopenia in Community-Dwelling Aged Adults: A Prospective Cohort Study

Publication: Journal of Cachexia, Sarcopenia and Muscle
Publish Date: April 2026
Authors: Lim HJ, Park SS, Kim MJ, Jang HC, Kong SH, Won CW

SUMMARY

Changes in nutritional status over time were examined in relation to the development of sarcopenia among community-dwelling older adults. This prospective, multicenter cohort study followed 1,661 adults aged 70–84 years without sarcopenia at baseline for a mean of 6.8 years. Nutritional status was assessed using the Mini Nutritional

Assessment and tracked longitudinally. Deterioration in nutritional status was associated with a higher risk of both sarcopenia and severe sarcopenia compared with stable nutritional status, even among participants who were well nourished at baseline. These associations remained consistent after adjustment for demographic factors, health conditions, and functional status. The findings underscore the importance of monitoring and maintaining nutritional status in aging populations to reduce future sarcopenia risk.

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