

PNI AND NRI ARE PREDICTIVE TOOLS FOR SURVIVAL IN ADVANCED PANCREATIC CANCER

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UEG Week Berlin 2025

Poster

Pancreas

October 7, 2025

A retrospective study of 158 advanced pancreatic cancer patients found that lower Prognostic Nutritional Index and Nutritional Risk Index values correlate with proximal tumor location and early mortality, though metastatic burden was the strongest predictor in multivariable analysis.

KEY POINTS

- Among 125 patients starting FOLFIRINOX chemotherapy, PNI below 40.25 and NRI below 105.6 were associated with increased mortality risk at 12-week follow-up in univariate analysis.
- Patients with pancreatic head tumors had significantly lower PNI (40.11 vs. 42.01, $p=0.002$) and NRI (104.30 vs. 110.06, $p=0.004$) compared to those with distal tumors.
- PNI was significantly lower among patients who died by first follow-up (39.51 vs. 41.51 and 41.82, $p=0.044$), while NRI did not show similar significance.
- In multivariable analysis, the presence of two or more metastatic sites was the only factor significantly related to mortality risk (HR 7.21, $p=0.002$), overshadowing nutritional indices.
- This retrospective analysis may interest oncologists and gastroenterologists managing nutritional assessment and prognostication in advanced pancreatic cancer patients initiating chemotherapy.

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