Conclusions

Nutrition assessment is frequently neglected in Canadian hospitals. Physicians felt that nutrition care is important and relevant, but their self-reported knowledge of nutrition is low. Strategies need to be developed to enhance use of dietitians, improve the nutrition knowledge and awareness of physicians, and integrate their awareness and knowledge into the improved nutrition care processes for hospitalized patients.

Rationale

Malnutrition is common in hospitalized patients but is not always identified or managed appropriately. The purpose of this study was to evaluate the knowledge, skills, attitudes and nutrition practices of physicians to identify ways in which management of malnourished patients can be optimized.

Methods

- Attending physicians working at hospitals in the multicenter Nutrition Care in Canadian Hospitals Study, conducted by the Canadian Malnutrition Task Force, were given a survey regarding nutrition practice in hospitalized patients.
- Survey was distributed to 1220 physicians at 8 sites; 35% (n=428) response rate
- 48 question survey, adapted from a previously validated European questionnaire and based on ESPEN standards of nutritional practice (Mowe et al., 2006).
- Questions regarding:
  - Background information
  - Evaluation of patient nutritional status
  - Allocation of responsibility for nutrition care
  - Use of guidelines/protocols on the ward

Results

Physician Characteristics

- 61.4% male
- 16.8 mean years (+/- 12.8) since graduation
- 76.1% attending physicians
- 46.7% Internal medicine (IM)
- 8.8% general surgery
- 25.1% specialty IM
- 19.5% specialty surgery

Perceptions Regarding Reasons for Insufficient Nutrition Support

- 97% of physicians felt that nutrition support should be initiated within 72 hours for patients with inadequate nutrition intake and compromised nutrition status

Perception | Their Ward % | In Canadian Hospitals %
--- | --- | ---
Ignorance | 19.1 | 19.7
No definition of responsibility | 18.4 | 18.6
Hard to identify Relevant Patients | 13.7 | 11.6

- Insufficient support is a multi-factorial problem with no single dominant cause

References


97% of physicians felt that nutrition support should be initiated within 72 hours for patients with inadequate nutrition intake and compromised nutrition status.

Resources Available to Physicians

- Protocols for identifying those at nutrition risk (32%)
- Nutrition support team (54.9%)
- Education on nutrition assessment for medical staff (30.5%)
- Most respondents wanted access to these resources.
- 45% indicated a shortage of dietitian resources
- 77% of physicians felt that using dietitians more extensively would be helpful.

Physician Perceptions

- Relevance of being informed about how to treat malnutrition
- Interest in treatment of malnutrition
- Self-reported nutrition knowledge

Conclusions

Nutrition assessment is frequently neglected in Canadian hospitals. Physicians felt that nutrition care is important and relevant, but their self-reported knowledge of nutrition is low. Strategies need to be developed to enhance use of dietitians, improve the nutrition knowledge and awareness of physicians, and integrate their awareness and knowledge into the improved nutrition care processes for hospitalized patients.