Rationale

In the Nutrition Care in Canadian Hospitals (NCCH) study, conducted by the CMTF, 45% of medical and surgical patients were found at risk of malnutrition on admission to hospital (Allard et al., 2015). Based on this high prevalence, a study was conducted to determine:

- The factors that predict a dietitian consult (DC) for patients who are fed orally (excluded parenteral or enteral nutrition)
- The proportion of malnourished patients under the care of a dietitian.

Methods

- Data collection across 18 hospitals participating in NCCH study.
- Inclusion Criteria:
  - medical or surgical admissions
  - not receiving parenteral or enteral nutrition
- Data collected (n=947):
  - At admission: nutrition assessment (subjective global assessment (SGA), BMI), risk factors, demographics
  - During hospitalization: clinical data, including dietary intake and if there was a dietitian consult
- Malnutrition was assessed using SGA (gold-standard)

Results

Predictors of Dietitian Consult

- Predictors of DC were anticipated to be time dependent and thus analysis was done for a DC within 3 days or if the DC occurred 4+ days of admission
- Low food intake (<50%) during first week of admission did not predict DC
- Malnutrition (SGA C) was a modest predictor of DC
- DC occurred for younger patients and those with specific conditions

Conclusions

Overall, predictors of DC were appropriate, however did not capture most malnourished patients.

The current system of determining which patients see a dietitian is inefficient as not all malnourished or at risk patients are identified.

With 60% of severely malnourished patients not having a dietitian involved in their care, it is clear that change is needed. One method to address this issue is to standardize interdisciplinary nutrition protocols and guidelines, particularly nutrition screening.

Nutrition screening at admission, along with pathways for nutrition care, which include appropriate referral to the dietitian, may be a way to ensure that dietitians are seeing the appropriate patients.

Dietitians are a specialty resource, thus effective referral processes are essential to ensure this resource is used appropriately.

References


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