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Hungry for Recovery

This project was designed to detect and treat malnutrition more accurately in hospitalised patients in our hospital. We aimed to create a better sense of awareness for malnutrition on the wards.

Malnutrition is frequently overlooked. However it is an independent risk factor affecting outcome, mortality and length of stay in a hospital. Malnutrition can be treated relatively easily. Hence early diagnosis is mandatory in reducing length of stay, morbidity and mortality.

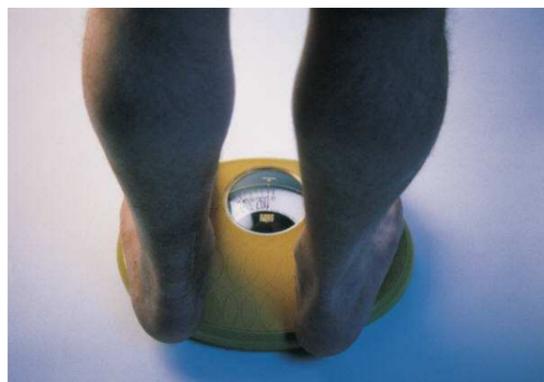
Patients at risk were identified and a NRS-2000 questionnaire was filled out with them. In order not to create massive administrative overload on the ward, it was always filled out with patients older then 75, and in patients younger then 75 NRS 2000 was only used when the expected hospitalisation duration exceeded 4 days. Thus the nursing department helped identifying patients at risk for malnutrition. In order to make them acquainted with malnutrition several short sessions were organised to introduce the nurses to the subject. At the start of these sessions they were asked to fill out a questionnaire which was repeated afterwards. Results were calculated and communicated afterwards to show the impact of training. You can see some results in the table.



questions	Correct Answer % date 1	Correct Answer % date 2
Name 3 groups of risk in a hospital to obtain malnutrition	88%	69%
Name 3 elements how you can tackle malnutrition	85%	81%
What is NRS?	14%	75%
Woman, known for underestimating their weight en give the correct weight when they get older	46%	69%
Is the quality of TPN equal to the quality of normal feeding	48%	49%
Catheter infections caused by bloodstream have their origin in the intestine	50%	69%
Impaired peristalsis of the stomach, known with diabetics, makes gavages difficult	73%	79%
How much energy gives "Resource drink"	57%	68%
At witch time do you best give extra feeding	89%	88%
How much energy gives CVA 1 feeding	42%	49%

The conclusion could be that the knowledge obtained by training limited is. There is need to repeat at a regular basis the schooling.

If malnutrition was suspected by the nurses, dieticians were contacted to perform a more thorough investigation. In case of mechanical problems for eating, a speech therapist was consulted for evaluation of swallowing. Multidisciplinary evaluation of malnourished patients was done on a weekly basis. If necessary feeding regimens were adapted to the patients needs. On a weekly basis patients were weighed to detect the evolution in weight. The multidisciplinary meetings were on a weekly basis and results were communicated to treating doctors. In order to assure continuity, dieticians and speech therapists provided documents containing information concerning nutrition of the patients.



As the NRS-2000 is relatively simple to use, nurses can fill out this questionnaire. This option saves time and energy for dieticians to devote to real nutrition problems. With a grant from the FGOV Belgium, another dietician could start to work in our hospital. The information sessions for nursing staff were organised by a medical doctor, a nursing director and a dietician. All three of them did this on a voluntary basis.

Implementing the nursing department in the detection of malnutrition is feasible and safe. It creates time for dieticians to act on real nutrition problems. Dieticians take problems to multidisciplinary meetings making these more efficient and timesaving.

This structured approach to malnutrition created a new and efficient method in our hospital to detect and act on malnutrition.

We cannot state any effects on mortality or morbidity since we did not conduct any measurements concerning these factors.

Future research should try to evaluate the impact of our approach to malnutrition.

Conclusion

This study focused on detecting malnutrition on the ward and consequently a feasible and effective treating strategy. It shows it is possible to detect it after educating nursing staff members. It also documents the need for continuing education of the staff. Our multidisciplinary approach allows dieticians to devote their time to actual malnourished patients rather than to detection of this population.

