Welcome to the December Nutritional Assessment Evidence Update Bulletin being produced by the HEFT Library Services. This bulletin is produced to support VITAL for Nurses core skills programme developed in the Trust. This issue will highlight evidence published in the previous three months. Full text articles can be accessed with your HEFT Athens ID.

Organisation

Dignity and nutrition inspection programme
The Care Quality Commission has published a report 'Dignity and nutrition inspection programme'. The report looked into the standards of care that older people receive in hospital, and calls for a system-wide response to combat the failings identified. The report summarises the findings of 100 unannounced inspections of NHS acute hospitals which took place between March and June, looking at whether the essential standards of dignity and nutrition were being met on wards caring for older people. Around half of the hospitals needed to do more to ensure that they were meeting people's needs, with twenty of the hospitals visited failing to meet essential standards required by law. Of the 100 hospitals inspected, 45 hospitals were fully compliant, meeting the essential standards relating to both dignity and nutrition, 35 met both standards but still needed to make improvements in one or both and 20 hospitals did not meet one or both standards, with major concerns identified in two cases.

If one hospital can give patients dignified care, all of them can.
Nursing Standard. August; 25(48) p.12-4
Examples of good and poor practice are discussed in this article, resulting from the Care Quality Commission's Dignity and Nutrition Inspection Programme standards document. In particular, good practice at Aintree University Hospitals NHS Foundation Trust in Merseyside is highlighted.
Available in fulltext at EBSCO Host and ProQuest (Legacy Platform)

NICE Bites: nutrition support in adults
The November NICE Bites bulletin from the North West Medicines Information Service covers nutrition support in adults. The aim of this publication is to provide healthcare professionals with a clear and succinct summary of key prescribing points taken from NICE guidance.

Full Text
Nutritional COPD Guideline
NHS Improvement - Lung has published 'The Respiratory Healthcare Professional's Nutritional COPD Guideline' on its website. The guideline has been designed to raise the awareness of nutrition with respiratory health professionals and their COPD patients; to provide a simple tool to aid first line nutritional management of this patient group; and to improve the nutritional status of COPD patients. The Respiratory Healthcare Professional's Nutritional COPD Guidelines were created by a multidisciplinary working group of COPD and nutritional experts sponsored by an educational grant from Nutricia.

Patient Safety. A lot on your plate.
Health Service Journal. August; 121(6271) p.26-7
The need to maintain good standards of nutritional care for hospital patients is discussed. The dangers of malnutrition are set out and the work of The British Association for Parenteral and Enteral Nutrition in developing a framework to enable trusts to meet Care Quality Commission Standards are described.

Screening

Accuracy of Quick and Easy Undernutrition Screening Tools in Patients Undergoing Cardiac Surgery.
The aim of this study was to compare the quick and easy undernutrition screening tools, such as the Short Nutritional Assessment Questionnaire and Malnutrition Universal Screening Tool, in patients undergoing cardiac surgery. The study compared their accuracy in detecting undernutrition measured by a low-fat free mass index and assessed their association with postoperative adverse outcomes.
Available in fulltext at MD Consult

Long-form but not short-form Mini-Nutritional Assessment is appropriate for grading nutritional risk - patients on hemodialysis.
This cross-sectional study aimed to evaluate the appropriateness of using the long-form (LF) and the short-form (SF) Mini Nutritional Assessment (MNA) for grading the risk of protein-energy malnutrition in patients on haemodialysis.

Perceived health and risk of undernutrition: a comparison of different nutritional screening results in older patients.
This Norwegian cross-sectional study compared 3 nutrition screening tool results. I considered links between patients’ own perception of health, health-related issues and malnutrition risk in older hospital patients. Results of screening of patients from 3 wards over a 6 month period were examined to ascertain the tools' accuracy in predicting malnutrition risk.
Recognition

Eating difficulties among stroke patients in the acute state: a descriptive, cross-sectional, comparative study.
This descriptive, cross-sectional, comparative study examines eating difficulties among male and female stroke patients. In conclusion more women than men with stroke suffered from inadequate food consumption. The women had more severe strokes, experienced poorer quality of life and showed lower functional status than the men.

Estimating energy needs in nutrition support patients.
This paper looks at energy needs as a fundamental part of nutrition support. The amount of metabolically active tissue mass is the major determinant of metabolic rate. In determining the energy prescription, all of the component parts must be considered.

Improving the hydration of hospital patients.
Nursing Times. October; 107(39) p.21-3
The aim of this project was to identify patients at risk of dehydration in an acute hospital setting and improve procedures. A fluid balance audit was carried out complimented by teaching sessions to raise awareness of dehydration, promote monitoring of fluid charts and deliver hydration care.
Available in fulltext at ProQuest (Legacy Platform)

Prevalence of the notification of malnutrition in the departments of internal medicine and its prognostic implications.
Clinical Nutrition. August; 30(4) p.450-454
The aim of this paper was to describe how often discharge sheets from Internal Medicine units include malnutrition among diagnoses. Factors associated with this diagnosis including dementia, cancer, HIV infection and chronic renal failure and its prognostic implications are also assessed. The study concluded that notification of malnutrition in IM departments is low and the diagnosis is associated with an increase in morbidity, mortality and costs.

Intervention

Dietary advice with or without oral nutritional supplements for disease-related malnutrition in adults.
This review examines evidence that dietary advice encouraging the use of energy- and nutrient-rich foods rather than oral nutritional supplements in adults with disease-related malnutrition improves survival, weight and anthropometry. Disease-related malnutrition has been reported in 10% to 55% of people in hospital and the community.
Full Text
Dietary intake, nutritional status and rehabilitation outcomes of stroke patients in hospital.  
Journal of Human Nutrition and Dietetics. October; 24(5) p.460-9  
This study describes nutritional status and food consumption in stroke patients within 2 weeks of hospital admission and before discharge, as well as to investigate the effects of nutritional and dietary factors on rehabilitation outcomes. The authors suggest that there is scope for the multidisciplinary development of nutritional support for stroke patients to improve these outcomes.

Different experiences and perspectives between head and neck cancer patients - daily impact of a gastrostomy tube.  
Journal of Human Nutrition and Dietetics. October; 24(5) p.449-459  
This study aims to understand the daily impact of gastrostomy feeding on head and neck cancer patients and their caregivers to identify improvements to services. Twenty-one adult patients were randomly selected from the Head and Neck centre at University College London Hospital. Six head and neck cancer patients and three care-givers participated in focus groups. The sessions were recorded, fully transcribed and qualitatively thematically analysed, and the resulting data were tabulated. Different themes and experiences were explored.

Early versus late parenteral nutrition in critically ill adults.  
In this randomized, multicenter trial, early initiation of parenteral nutrition is compared with late initiation in adults in the intensive care unit (ICU) to supplement insufficient enteral nutrition. Late initiation of parenteral nutrition was associated with faster recovery and fewer complications compared with early initiation.  
Available in fulltext at EBSCO Host and ProQuest (Legacy Platform)

Jejunostomy after oesophagectomy: a review of evidence and current practice.  
Proceedings of the Nutrition Society. August; 70(3) p.316-20  
The aim of this article is to review the current literature and report on the author's experience of routine feeding jejunostomy insertion following oesophagectomy Patients undergoing oesophagectomy often have nutritional needs at the time of diagnosis and in the post-operative period. Routine jejunostomy insertion is recommended to ensure adequate nutrition in patients who develop post-operative complications and for those patients with long-term reduced appetite and poor oral intake.

Nutrition in Inflammatory Bowel Disease  
Malnutrition is relatively unusual in Ulcerative Colitis, but in Crohn Disease, which often affects the small intestine, it is frequent and may be severe. Nutrition support is therefore often indicated. This paper looks at the current evidence.

Nutrition therapy of the severely obese, critically ill patient: summation of conclusions and recommendations.  
Journal of Parenteral and Enteral Nutrition. September; 35(5 Suppl) p88s 96s  
Obesity adds to the complexity of nutrition therapy in the intensive care unit. This report includes recommendations for nutrition therapy for obese, critically ill patients. Although the basic principles of critical care nutrition apply, a high-protein, hypocaloric regimen is recommended to reduce the fat mass, improve insulin sensitivity, and preserve lean body mass. The ideal enteral formula should have a low nonprotein calorie to nitrogen ratio and a range of pharmaconutrient agents to modulate immune responses and reduce inflammation.
Nutritional intervention and quality of life in palliative care patients

British Journal of Nursing, November; 20(20) p.1320 - 1324

This article considers quality of life measures that can be used by health professionals to assess effectiveness of nutritional interventions administered to palliative care patients. Stabilizing, maintaining and attempting to increase weight through the support of oral feeding, and provision of artificial feeding, has been shown to mediate the metabolic and physical wasting effects of the disease process and improve general comfort. Use of quality of life scales provides health professionals and organizations with an ideal measure for planning, targeting and evaluating nutritional interventions.

Symptoms associated with dietary fiber supplementation over time in individuals with fecal incontinence.

Nursing Research. June; 60(3 Suppl) p.S58-67

There isn’t much knowledge about adverse symptoms from fiber supplementation available. Patients with fecal incontinence experience a variety of GI symptoms over a period of time. The symptom severity and emotional upset appear to influence fiber tolerance. Supplements seem overall to be well tolerated.

Nursing Role

Nutrition: safe practice in adult enteral tube feeding.

British Journal of Nursing. October; 20 (19) p.1234-239

Recent alerts and recommendations from the National Patient Safety Agency (NPSA) regarding enteral feeding have led health professionals to review their practice and guidelines. This article explores safe practice, promoting safer measurement and administration of liquid medicines via oral and other enteral routes.

Reducing variable consistency in thickened drinks.

Nursing & Residential Care. October; 13(10) p.469-473

This article discusses the results of a hospital research study investigating the consistency of the thickness of drinks for patients with dysphagia. Recommendations for practice are made including the need for staff training on drink preparation.

Available in fulltext at EBSCOhost

Using mealtime volunteers to support patients.

Nursing Times. October; 107(41) p.21-3

The Royal Hampshire County Hospital has introduced a scheme of a mealtime volunteers, aiming to decrease the incidence of malnutrition among hospital patients. Ideas for reducing malnutrition, the roles the volunteers take on as well as the development and implementation of the scheme are described. Feedback from nursing staff, volunteers and patients is provided.

Available in fulltext at ProQuest (Legacy Platform)

Further Information

Multiple sources – websites, journals and healthcare databases – have been searched for evidence published in the last three months. For further information please contact Sue.Clayton@heartofengland.nhs.uk or ext 45195 (Solihull Hospital)

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