Implementation of Nutritional Assessment in practice; How do we get there?

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Disclosure

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<th>Disclosure interest speaker</th>
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Content

- History of NA in Erasmus MC
- How it started?
- In the meantime…
- Where are we now?
- Collaboration
- Reporting
- Finance
- Future?
History of NA in Erasmus MC

- Sophia Children hospital: Indirect calorimetry
- Adults:
  - Cystic fibrosis: Bio-impedance analysis (BIA)
  - Dialysis: Subjective Global Assessment (SGA)
  - Liver transplantation: mid-arm muscle circumference
How it started?
How it started?

- From a neurology case (09-2014)
- Interest of a number of colleagues (hobby)
- Workgroup Nutritional Assessment
- Purchase of equipment
- Education (introduction)
- Care pathway LTX
- “NUAS”
- Students (measurements, implementation, research)
- Eduction of colleagues
Erasmus MC: In the meantime

- Education:
  - Body composition / BIA
  - Nutrition disorders and Malnutrition
- Plenary session “Nutritional Assessment”
- Casuistics and intervision
Handgrip Strength: Dialysis, surgery, liver, random both in- and outpatients

Diagnostics of Malnutrition: Sarcopenia, Cachexia, Inflammation, etc..

Pilot malnutrition - summer 2016 (Quality Indicator Malnutrition)

NUAS: Diagnostic consultation

Screening LTx extended: HGS + BIA + I.C.

Medical technology

Unit infection prevention

Adjustment of the malnutrition protocol !?
  - Plan: protein requirements based on FFM, HGS everyone with (risk on) malnutrition
Erasmus MC: In the meantime

- Colleagues who were not very enthusiastic!
- Who are we going to measure?
- How to measure?
- How often?
- What can I do with the data?
- No time to measure!!
- Where? Room to measure?
- Not hygienic
- To strenuous for the patients
- We always did it wrong earlier?
- How does the patients benefit from it? Or is it just to measure?
Erasmus MC: In the meantime

Accelerated since 2017!

- incompany education: nutritional status
- Pilot Malnutrition 2017
- Protocol / policy Malnutrition:
  - HGS: everyone with (risk on) malnutrition
  - Preferably protein requirements based on FFM
  - I.C. on indication
Erasmus MC: In the meantime

- Nutritional Assessment Platform

Dutch website: https://nutritionalassessment.nl/
Where are we now?

“Patients like it”
“Breathtaking”
“Partners are in on it”
“Better treatment”
“start small and grow bigger”
“Great to do”
“I forget the suitcases”
“Nobody declines”
“Interpretation is still difficult”
“Carrying suitcases”
“More focused and clearer”
“How do you look from the inside”
“Will give a lot of insight”
“Patients are more aware and motivated”
“more focused and clearer”
“Better diagnostics and evaluation”
“More and more fun to do”
“I didn’t like it/ was painful, so I don’t want patients to go through it”
“It will dominate and define (set) the future!”
Where are we now?

- Not even close to where I want to be!
- BUT.. We are making progress 😊

- Malnutrition policy!
- Much more enthusiastic colleagues
- NA in patientcare
- NA in research
- NA as diagnostics (NUAS for CGG)
- Annual plan Nutritional Assessment
- Yearly education “Training-on-the-Job” (3x /year)
Where are we now?

What we do in practice:
- Policy on paper..
- Frequently HGS
- BIA more difficult – multiple devices (loan and purchase)
- DEXA and BIA by CF / Long
- BCM + HGS dialysis (monthly)
- NA package
- I.C. on IC
- I.C. on consultation
- Research: I.C., body composition, functionality – Nutritional Status
Where are we now?

- NVD best practice hospital Nutritional Assessment 2017
- Poster ESPEN 2017 pilot malnutrition: HGS + BIA
- Poster ESPEN 2017 correlation ct-scan and other parameters in screening LTx
Where are we now?
Collaboration

- Nutritionteam doctor present at casuistics.
  - Result interpretation
- Medical Exercise Specialist (ultrasound)
- Physiotherapy: conversations about collaboration
- Commission NA
  - NA+ Team
- Medical specialists (policy / finance)
- Medical technology = service en repair
  - Productfile
- UNIP: cleaning/ decontamination, Working Clothes yes/ no
- Researchers
- HHS nutrition&dietetics - students
- Knowledge center for hospitals in the region
Reporting

- Patientfile and:
  - Database (Excel / OpenCLinica / SPSS / …)
  - Software of the devices
- Outcome in kg / P-value?
- Available for research?
Finance

Equipment and time must be paid!

- NUAS/ NA as package: NC ZZ 1 (=60 min = €85)
- HGS: in consultation time
- BIA: HC ZZ 1 (=30 min = €42.50)
- Indirect calorimetry: HC ZZ 1.5 (=45 min = €63.75)

- Investment budget: ??
- Rental price: ??
Why do we want this?

- Professionalization / to academise
- Better care for the patients
- Explanatory data
  - Change in body composition? FM, FFM? Fluid?
  - Cause → solution
- Diagnostics (Malnutrition, REE, Nutritional Status)
- Personalized nutrition
- Treatment goals measurable
  - Evidence based
- Research
- Education
- Stronger in advice / counsel

→ Different role!!
Future?

- NAF / NAS
- Package NA
- External measurements
- NA in practice: For everyone, easy, useful, reliable
- Per disease: who, what, when and how often ??
- Structured improving patientcare by NA
- …
Summary of things to arrange when you start:

- Attitude
- Education
- Equipment (loan/purchase)
- SOP
- Policy
- Finance
- Reporting
Future ?
Take home message

- Think about: Why am i measuring? What is the goal? What is the benefit for the patient?
- Make a vision and stick to it
- Make it a policy
- Keep patience – hold on
- Stay critical
THINK BIG
START SMALL
But most importantly
START