

Taste Preference of patients directly after surgery in the postoperative anaesthesia care unit (PACU).

No registrations found.

Ethical review	Not applicable
Status	Pending
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON29550

Source

NTR

Brief title

TOPS study

Health condition

adult surgical patients

Sponsors and support

Primary sponsor: None

Source(s) of monetary or material Support: None

Intervention

Outcome measures

Primary outcome

To determine the taste preference of postoperative adult patients in the PACU, by means of the MTPRT (Macronutrient and Taste Preference Ranking Task) questionnaire which measures 4 macronutrients: carbohydrates, fat, protein and low energy products and a preference for

sweet or savoury food products, bounded on a scale of 0 (low preference) to 4 (high preference). The scores are not visible, patients first rank 32 randomised pictures individually and then into a preference order. The scores are calculated by an algorithm.

Secondary outcome

- The following objectives will be answered on an NRS scale from 1 to 5, where 1 = absolutely no desire and 5 = very desirous: A. Patient preference for consistency, temperature, texture of the food products that are offered, B. The influence of appetite on the postoperative taste preference.
- To develop a product advice for food products in the PACU, which corresponds to the results of patient taste preference. The advice will be based on the available food products in the PACU and/or the Amsterdam UMC, location AMC.
- To study if there is an association between patient related factors and postoperative taste preference. The following patient related factors will be extracted from EPIC: age, gender, BMI, smoking, pregnancy, recent chemotherapy, COVID-19 status, type of surgery.
- To study if there is an association between preoperative fasting time and postoperative taste preference.
- To study if there is an association of the duration of general anaesthesia on the postoperative taste preference.

Study description

Background summary

For adults and children there are, in general, no limitations after surgery for food and drink intake, which is, among others, stated in a guideline of the European Society of Parenteral and Enteral Nutrition (ESPEN). If there are limitations in the postoperative diet, it is mostly due to specific surgery, but seldom due to patient factors. In a comprehensive review, containing four meta-analyses, it is showed that it is safe for patients to eat and drink directly postoperatively. In addition, several reviews showed that eating and drinking soon after surgery have a positive effect on postoperative outcome, with a shorter hospital stay, a decrease in postoperative infections and decreased mortality.

Directly after surgery most patients are able and allowed to eat and drink. In daily practice, however, most patients do not eat and/or drink in the first hours after surgery. Many factors seem to influence this discrepancy. One factor that may be of influence is that the range of available food products does not match the taste preference of the postoperative patients in the PACU.

Our taste is influenced by many factors, that means that food is appreciated by a combination of taste, smell, mouthfeel (e.g. texture), temperature and appearance of a product. Taste and smell perception play a significant role in appetite, dietary intake, and food choice.

There are indications that taste preference may be altered after surgery and may differ from taste perception later after surgery, when patients are in the surgical ward. However, there are currently no studies available describing the taste preference of postoperative patients in the PACU and/or in the first hours after surgery. The current study will investigate the taste preference of adult patients in the PACU, in the first hours after surgery and will use this information to develop a product advice for food products in the PACU, which corresponds to the results of patients' taste preference.

Study objective

Investigating the taste preference of patients directly after surgery in the PACU, and adjusting the available food products to the outcomes, will help to increase the dietary intake in postoperative patients in the PACU and thereby positively influence their postoperative outcome.

Study design

Start of the study: 17-11-2020

Time points for primary outcomes:

- Study parameters will be collected directly postoperatively via a questionnaire in the PACU. The MTPRT questionnaire is a validated questionnaire of the Wageningen University and Research and will be filled in directly online, via a dedicated Ipad.
- The data are collected in a Castor EDC database, and are analysed using the SPSS program.

Time points for secondary outcomes:

- The additional questions regarding appetite, consistency, temperature and texture will be filled in on paper directly postoperative in the PACU, using an NRS scale from 1-5 and then transferred to the Castor database.
- Patient demographics and characteristics will be retrieved from the electronic patient file (which is EPIC at the AMC).
- The patients are directly asked about their preoperative fasting time after surgery in the PACU.
- The other study parameters of the secondary outcomes will be retrieved from the EPIC files of the patients postoperatively.
- These data are collected in the same Castor EDC database as the primary outcomes, and are analysed using the SPSS program.

Intervention

None

Contacts

Public

Amsterdam University Medical Centres, location AMC
Mireille van Stijn

0205669111 pager 29428

Scientific

Amsterdam University Medical Centres, location AMC
Mireille van Stijn

0205669111 pager 29428

Eligibility criteria

Inclusion criteria

In order to be eligible to participate in this study, a subject must meet all of the following criteria:

- Patients scheduled for elective surgery in the operating theatres of the AUMC, location AMC
- Patients receiving general anaesthesia
- Patients ≥ 18 years
- Dutch speaking
- Patients sufficiently awake in the PACU during office hours
- Patients able and allowed to eat a normal diet postoperatively
- Willing and able to sign consent for re-use of care data
- The study can be combined with other studies

Exclusion criteria

A potential subject who meets any of the following criteria will be excluded from participation in this study:

- Patients < 18 years
- Patients receiving only locoregional and/or neuraxial anesthesia
- Non Dutch speaking
- Patients not sufficiently awake in the PACU during office hours
- Patients unable to eat a normal diet postoperatively, due to tube feeding and/or parenteral feeding
- Patients with a vegan or vegetarian diet preference
- Patients with food intolerance and/or food allergies
- Patients who do not sign consent for re-use of care data

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	15-11-2020
Enrollment:	200
Type:	Anticipated

IPD sharing statement

Plan to share IPD: No

Plan description

N/A

Ethics review

Not applicable	
Application type:	Not applicable

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL9048
Other	METC AMC : W20_484 # 20.536

Study results

Summary results

N/A