

Screening and treatment of malnourished hospital patients.

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1. The recognition of malnourished inpatients will improve by using the SNAQ malnutrition screening tool at admission; 2. Early recognition and treatment of malnutrition is effective and cost effective.

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON22638

Bron

Nationaal Trial Register

Verkorte titel

N/A

Aandoening

Disease related malnutrition in hospital patients.

Ondersteuning

Primaire sponsor: VU university medical center.

Overige ondersteuning: This project was financially supported by the Dutch Insurance Council and the Society of University Hospitals of the Netherlands; (grant number 01141).

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

1. Costs;

2. Length of hospital stay;

3. Percentage of malnourished patients who are diagnosed correctly.

Toelichting onderzoek

Achtergrond van het onderzoek

Patients and outcome measures.

The intervention group consisted of a group of 297 patients on two mixed medical - surgical wards, receiving screening on malnutrition at admission and standardized nutritional care. The control (comparable group of 291 patients) received usual clinical care. Outcome measures were weight change, use of supplemental drinks, tube feeding, parenteral nutrition and in-between meals, number of consultations by the dietician and length of hospital stay.

Results:

The recognition of malnutrition improved from 50% to 80%. The standardized nutritional care protocol added approximately 600 kcal and 12 grams of protein to the daily intake of the malnourished. Early screening and treatment of malnourished patients reduced the length of hospital stay in malnourished patients with low handgrip strength (frail patients). To shorten the mean length of hospital stay with one day in the total malnourished group, a mean investment of EUR 76 (63 USD) in nutritional screening and treatment was needed. In the total group and in the sub-group of malnourished patients with low handgrip strength the incremental costs were comparably low.

Conclusion:

Application of the SNAQ screening and early, standardized nutritional care improves the recognition of malnourished patients and gives the opportunity to start treatment at an early stage of hospitalization. The additional costs of early nutritional care were low, especially in a sub-group of frail malnourished patients.

Doel van het onderzoek

1. The recognition of malnourished inpatients will improve by using the SNAQ malnutrition screening tool at admission;
2. Early recognition and treatment of malnutrition is effective and cost effective.

Onderzoeksopzet

N/A

Onderzoeksproduct en/of interventie

Early screening and treatment of malnourished hospital patients.

The intervention group consisted of a group of 297 patients on two mixed medical - surgical wards, receiving screening on malnutrition at admission and standardized nutritional care.

The control (comparable group of 291 patients) received usual clinical care.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Hospital patients;
2. Internal and surgical ward.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Under the age of 18 years.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Factorieel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Actieve controle groep

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-03-2002
Aantal proefpersonen:	600
Type:	Werkelijke startdatum

Ethische beoordeling

Positief advies	
Datum:	05-09-2005
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL173
NTR-old	NTR210
Ander register	: N/A
ISRCTN	ISRCTN92834544

Resultaten

Samenvatting resultaten

1. Kruizenga HM, Seidell JC, De Vet HCW, Wierdsma NJ, Van Bokhorst - de van der Schueren MAE. Development and validation of a hospital screening tool: the Short Nutritional assessment Questionnaire (SNAQ) Clinical Nutrition 2005, 24 (1) 75-82.

2. HM. Kruizenga, MW Van Tulder, JC Seidell, A Thijs, HJ Ader, MAE Van Bokhorst-de van der Schueren. Effectiveness and cost-effectiveness of early screening and treatment of malnourished patients. American Journal of Clinical Nutrition.

3. HM. Kruizenga, P. e Jonge, J.C. Seidell, F. Neelemaat, AA. van Bodegraven, NJ. Wierdsma, M.A.E. van Bokhorst – de van der Schueren. Are malnourished patients complex patients? Eur. J of Internal Medicine, submitted.