PARENTERAL NUTRITION IN HOSPITALIZED PATIENTS. A QUALITY CONTROL STUDY.

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Purpose: To evaluate the quality of parenteral nutritional support in our hospital to find improve points.

Materials and Methods:

Prospective observational study of all patients with parenteral nutrition (PN) over a period of two months. PN prescription was considered justified, if was in agreement with the ESPEN 2009 guidelines criteria. PN length was adequate if it was inferior to 7 days for peripheral PN (PPN) or superior to 7 days for central PN (CPN).

Proteins and energy needs were calculated by weight and adjusting for metabolic stress factor (Low, Moderate and High: 1, 1.2 and 1.4 g protein/kg/day respectively for proteins and 150, 130 and 110 nonprotein Kcal/gN respectively for energy).

Nutritional needs were calculated only in patients with CPN and recorded weight. PN was considered adequate if it covered 85%-115% of the calculated needs.

Results:

1.725						
	Patients (Man)	49 (29)		CALORIC AND PROTEIN INTAKES BY		
	Mean Age (years)	65.97±13.9	5	Patients NUTRITIONAL NEEDS COVERAGE		
	Mean Body mass index (Kg/m ²)	26.03±5.01 9 (18,4%) 40 (81,6%)		25 22 20		
	Patients with PPN (%)			20 15		
	Patients with CPN (%)			15		
	Prescription Justified (%)	46 (93,3%)		10 9 2 5 6		
	Optimal PN length (%)	33 (67,3%)				
	Optimal length in CPN (%)	30 (75%)		0 Protein Intake		
	Optimal length in PPN (%)	3 (33%)	(p=0,043)	<85% Caloric Intake		
	Adequate Caloric Intake* (%)	22 (59,5%)		85-115%		
	Adequate Protein Intake* (%)	15 (40,5%)				
1	Met all objetives (%)	10 (20,4%)				

* Only in patients with CPN and recorded weight (n=37)

Conclusions:

PN prescription is generally justified but PN administration is often inadequate. With this results, the recent appointment of hospital nutrition committee, is expected to set the criteria and recommendations for prescribing PN.

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