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Background

Surgical patients are especially susceptible to nutritional disorders; additionally an adequate nutritional status is important in achieving prompt recovery

Purpose

To describe and analyse possible shortcomings related to nutritional status of surgical patients associated with an inadequate prescription of parenteral nutrition (PN).

Material and methods

Prospective, observational study (2 months)

Post-surgical patients in a third level hospital with PN support.

Estimated calorie requirements (CR) of surgical patients were calculated.

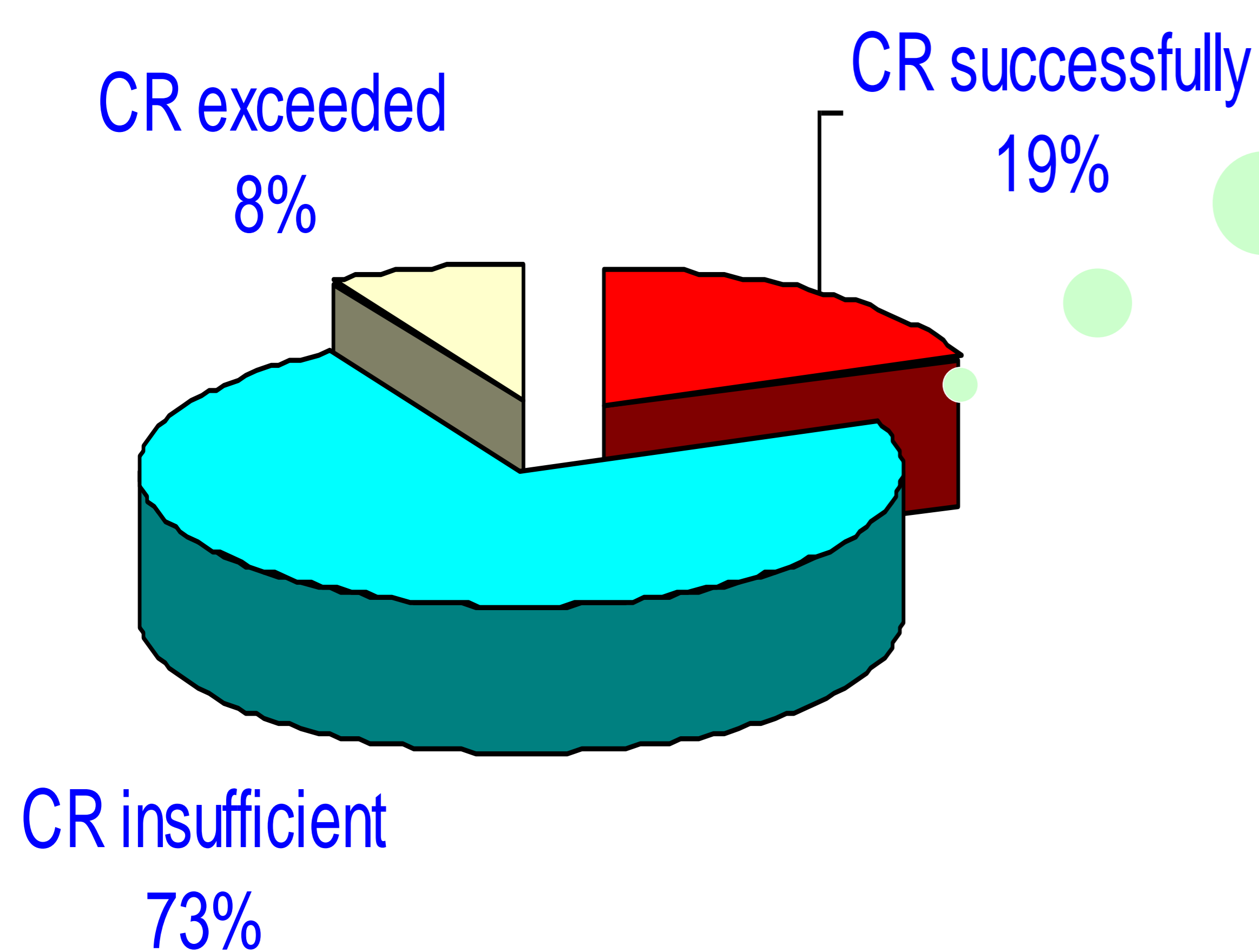
Method: The Harris-Benedict formula.

Data collection: medical history of each patient, including; age, diagnosis, duration of PN support, glycaemia, electrolytes, total proteins and other haematological parameters.

Blood tests were requested for every patient, at the beginning, during and at the end of parenteral support.



23.2% patients were obese



Results

A total of 75 patients were studied. In **19.2%** of cases the CR were **successfully supplied**. In **72.6%** of cases was **insufficient** compared to their estimated CR. In the remaining **8.2%** of cases the caloric intake **exceeded** their estimated CR.

23.2% of the patients studied were obese. In 76.5% of them, the prescribed caloric intake differed from the estimated CR, despite the body weight calculation being adjusted for these patients.

Conclusion

Our study showed that 80.8% of patients were not given sufficient nutritional support, missing their estimated CR.

It shows the lack of a structured protocol to address the nutritional assessment in surgical patients