

"USE AND FINANCIAL IMPACT STUDY OF ENTERAL NUTRITION IN INSTITUTIONALIZED PATIENTS LINKED TO A PHARMACY SERVICE"

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BACKGROUND

Dispensation of enteral nutrition (EN) to institutionalized patients is **recently being carried from hospital pharmacy**. Hospital Pharmacist is able to provide the development of pharmaceutical care to these patients in terms of EN and it suppose a **saving measure** at the same time.

PURPOSE

To **identify** and **analyze** the indication, nutritional status and use of EN in **institutionalized patients**, and **quantify the economic impact** since the beginning of the dispensation from the hospital pharmacy.

MATERIALS AND METHODS

Data collected: Institutionalized patients with EN dispensed from hospital pharmacy.

Data Analyzed: Age, sex, pathology, nutritional status (mild, moderate or severe malnutrition), type of EN, use as supplement and route of administration.

Cost differences were calculated by dispensing from community pharmacy or form the hospital pharmacy considering convenience of patients having to transport EN from hospital rather from a community pharmacy.

RESULTS

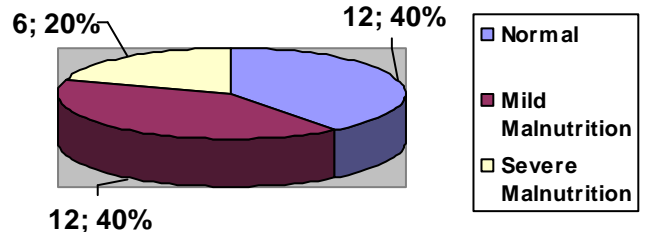
371 Institutionalized Patients in 4 centers

8.09% (30) treated with **EN**
The mean age was **82** years old
66.66% (20) were **women**
63.33% (19) used as **supplement**, **36.66%** (11) as **complete diet**

PATHOLOGIES REASON OF PRESCRIPTION

Degenerative Neurological Disorders	60% (18)
Stroke	26.66% (8)
Other reasons	13.33% (4)

NUTRITIONAL STATUS



TYPE OF ENTERAL NUTRITION

Normoproteic and high caloric with fiber	36.66% (11)
High protein and high caloric with fiber	16.66% (5)
High protein and high caloric	13.33% (4)
Normoproteic and normocaloric with fiber	10% (3)
Hyperglucemic syndromes	10% (3)
Others	13.33% (4)

ECONOMIC IMPACT

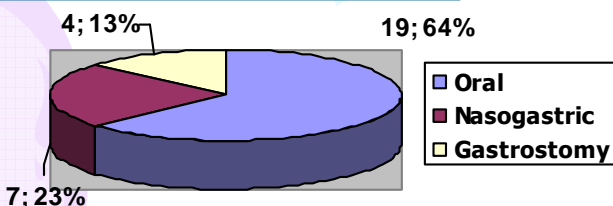
Dispensing from **community pharmacy** would have been **162,626€**

Dispensing from **hospital pharmacy** was **50,471€**

Saving of **112,055€**

Average of **3,735€** per patient

ROUTE OF ADMINISTRATION



CONCLUSIONS

- EN most used was **normoproteic high caloric with fiber** as an **oral supplement**.
- Pathology with increased spending was **degenerative neurological disorders**.
- Dispensing EN from hospital pharmacy **suppose an increase in the burden of care** and significant **savings for the health system**.