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How nutritional risk is assessed and managed in European hospitals: A survey of 21,007 patients findings from the 2007-2008 cross-sectional nutritionDay survey.

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Abstract

BACKGROUND & AIMS: Recognition and treatment of undernutrition in hospitalized patients are not often a priority in clinical practice. **OBJECTIVES:** We investigated how the nutritional risk of patients is determined and whether such assessment influences daily nutritional care across Europe and in Israeli hospitals. **METHODS:** 1217 units from 325 hospitals in 25 countries with 21,007 patients participated in a longitudinal survey "nutritionDay" 2007/2008 undertaken in Europe and Israel. Screening practice, the type of tools used and whether energy requirements and intake are assessed and monitored were surveyed using standardized questionnaires. **RESULTS:** Fifty-two percent (range 21-73%) of the units in the different regions reported a screening routine which was most often performed with locally developed methods and less often with national tools, the Nutrition Risk Screening-2002, or the Malnutrition Universal Screening Tool. Twenty-seven percent of the patients were subjectively classified as being "at nutritional risk", with substantial differences existing between regions. Independent factors influencing the classification of nutritional risk included age, BMI <18.5 kg/m(2), unintentional weight loss, reduced food intake in the previous week and on nutritionDay (for all parameters, $p < 0.0001$). The energy goal was defined as ≥ 1500 kcal in 76% of the patients, but 43% of patients did not reach this goal. **CONCLUSIONS:** The process of nutrition risk assessment varied between units and countries. Additionally, energy goals were frequently not met. More effort is needed to implement current guidelines within daily clinical practice. Copyright © 2010. Published by Elsevier Ltd.