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## **Landmark 2009 study sets the stage for more patient progress in second annual nutritionDay in the U.S.**

Nutritional benchmark from nationwide initiative a 'vital first step'

Chicago, IL – March 26, 2010 – “We have taken the vital first step in gathering data necessary to demonstrate how proper nutrition can lead to better patient outcomes.” With that, Nick Andrus, Director of Research and Analytics for nutritionDay in the U.S., presented preliminary results from this country’s first nutritionDay study conducted November 5, 2009, at the recent American Society for Parenteral and Enteral Nutrition (ASPEN) Clinical Nutrition Week (CNW).

Gail Gewirtz, M.S., R.D. and National Project Coordinator ([nutritiondayus@ymail.com](mailto:nutritiondayus@ymail.com)), notes that nutritionDay in the U.S. is part of an ongoing global initiative to raise awareness of the prevalence of undernourishment among patients in healthcare facilities, and its impact on costs, patient complication rates, readmission rates, healing and higher rates of morbidity and mortality. “The fifth nutritionDay Worldwide occurred in January, 2010, with healthcare facilities in over 30 countries participating,” she adds. “The shared goal of these studies is to improve patient outcomes through improved nutrition practices, while concurrently reducing complications and costs.”

In presenting findings at ASPEN, Andrus emphasized that nutritionDay in the U.S. 2009 provided “our nation’s first-ever ‘snapshot’ of nutrient intake by patients in participating facilities across the country.” A total of 38 units and nearly 500 patients from various units participated in the study, including 17 intensive care units (ICU). A majority of patients ate less than half of their lunch on nutritionDay. Additional patient data gathered during the study revealed that nearly one-third of participating patients had lost almost 10 lbs. — and a majority ate less than normal — prior to entering the hospital. It was further indicated that these factors had a significant impact on hospital resources required for care of the patients. (To view the total presentation, find nutritionDay in the U.S./2009, ASPEN-Clinical Nutrition Week, available at [www.nutritionday.org](http://www.nutritionday.org).)



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A follow-up survey of patient outcomes 30 days after nutritionDay provided further insights regarding the relationship between patient condition and nutrient intake. Among other findings, patients who had nothing to eat on nutritionDay had the highest mortality rate. All outcome data has been submitted and preliminary reports for participating facilities are available for downloading ([www.nutritionday.org](http://www.nutritionday.org)).

“We appreciate the patience and cooperation of all facilities participating in our first nutritionDay in the U.S. 2009,” says Gewirtz. “These global audits already have been shown to significantly impact nourishment practices and patient outcomes. And this year’s (2010) nutritionDay in the U.S. will, I’m sure, enhance as well as extend the success of our inaugural effort.”

### **Nursing homes to also participate in 2010 nutritionDay in the U.S.**

The second annual nutritionDay in the U.S. is scheduled for November 4<sup>th</sup>, 2010, Gewirtz continues. This will enable 2009 participating facilities to benchmark new data with last year’s, while first-time participants can establish initial data, which will also be benchmarked against facilities with similar patient profiles providing additional insights.

“Facilities can participate with just one unit or only 20 patients,” Gewirtz says. “ICU as well as non-ICU patients above the age of 18 can take part in the one-day audit. This year we also are opening nutritionDay in the U.S. to nursing homes. If your organization needs an Internal Review Board (IRB) approval, we encourage you to apply for either a waiver or an expedited process.

“Patient care does not change on nutritionDay, and all information is anonymous,” Gewirtz notes. “This ensures that we glean real-time, factual data from this one-day program to help us address undernourishment and its effects among patients in healthcare facilities.” Many studies, she points out, have documented the extent of this problem in U.S. hospitals. They reveal that an alarming 55% of hospital patients either are at-risk or suffer from malnutrition — a condition associated with slower healing, higher complication rates (typically twice that of well-nourished patients), higher rates of morbidity and mortality and, ultimately, higher healthcare costs.

### **No fee; and it’s easy to register, easy to participate**

“There is no fee for annual participation,” Gewirtz emphasizes. Hospitals or nursing homes can register for the program by contacting Gewirtz at [nutritiondayus@gmail.com](mailto:nutritiondayus@gmail.com). Names of



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participating facilities and units and related details are encoded, to ensure anonymous handling and analysis.

No special knowledge is needed to conduct the audit, she points out. Single-sheet questionnaires make data collection quick and easy, while providing actionable information. All documents are provided by the coordinating center and are available on the global web site, [www.nutritionday.org](http://www.nutritionday.org).

Following the 30-day post-nutritionDay re-assessment of each patient's situation, each facility or ward will receive a comparison of its own results with which to reference collective data from all units of the same specialty type. Examples of these reports from nutritionDay in Europe can be viewed on the global site.

### **Vital sponsorships and organizational support**

“Key factors in the success of our first nutritionDay in the U.S. — and, no doubt, for those to come — is support from numerous healthcare groups,” notes Gewirtz. Organizations of healthcare professionals supporting the project include:

- ASPEN (American Society for Parenteral and Enteral Nutrition)
- ESPEN (European Society of Parenteral and Enteral Nutrition)
- nutritionDay Worldwide
- The American Dietetic Association (ADA)
- Clinical Nutrition Managers Dietetics Practice Group of the ADA
- RD411.com, Where Healthcare Professionals Go for Information
- North Carolina Dietetic Association
- Greensboro Dietetic Association

“We are pleased with the already broad and growing support for this project,” says Gewirtz, adding that “nutritionDay in the U.S. provides an excellent venue in which companies can align a broad spectrum of offerings with our overall goal of improving patient care and services in all areas of health care.” Sponsorships at varying support levels are available; applications can be obtained by contacting Gewirtz at [nutritiondayus@ymail.com](mailto:nutritiondayus@ymail.com), or 847.254.2034.

“Thanks to corporate and organizational support to-date for nutritionDay in the U.S., and active participation by so many facilities last November, we have established a base line,” sums up



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Gewirtz. “It is out there now, for us to grow and build upon in the future, expanding and extending efforts to improve patient care everywhere.”

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**Photo:** (Nick Andrus, Joel Gewirtz)

*Findings from the first nutritionDay in the U.S. (November, 2009) were presented at the American Society for Parenteral and Enteral Nutrition (ASPEN) Clinical Nutrition Week (CNW) in Las Vegas by Nick Andrus (left), Director of Research and Analytics for nutritionDay in the U.S., shown here with Sponsorship Coordinator Joel Gewirtz.*