

HOW TO IMPROVE SCREENING AND MANAGEMENT OF MALNUTRITION IN HOSPITALIZED CHILDREN? THE FRENCH PREDIRE STUDY.





USA:

CarMeN

Noel Peretti, MD, PhD, and the PREDIRE study group - Société Francophone Nutrition Clinique et Métabolisme (SFNEP)



CHILDREN HOSPITAL MALNUTRITION IS COMMON!



Hospital malnutrition is an underestimated problem and as many as half of malnourished patients do not receive appropriate treatment. In order to extend the management of malnutrition in health care facilities, multidisciplinary teams focusing on clinical nutrition were established in France. The establishment of such teams within hospital facilities remains nonetheless difficult.

BACKGROUND

OBJECTIVES

- a) Raise awareness regarding the malnutrition issue,
- b) Train clinical teams regarding guidelines for good practice,
- c) Facilitate the screening of malnourished children through the use of an electronic alert system,
- d) Assist in decision making regarding the clinical teams' care and treatment of malnourished children, with either a dietician or the NST enlisted to provide expertise,
- e) Coordinate nutritional care among several categories of health care professionals (nurses, auxiliaries, physicians and dieticians).

RESULTS Before the intervention After p = 0.014p < 0.0001p < 0.01p < 0.000180% 0,71 0,65 60% 46% 43% 35% 34% 40% 23% 20% 12% 0% Daily weighing Investigation of Management by Refeeding malnutrition dietician protocol (mean) aetiology (% patients) (% patients) (% patients)



ACTIVITIES

A multifaceted intervention, conducted in 8 paediatric departments of a French university hospital, coordinated by a Nutritional Support Team:

- 1) an access to a computerised malnutrition screening system and automatic alert system.
- 2) an awareness campaign directed toward the health care workers and
- 3) a leadership based strategy

It was specifically targeted on trades involved for caring malnourished children: nurses, physicians, and dieticians.

WHAT MADE THIS INITIATIVE SUCCESSFUL?

- 1) the informatics tools provided information very easily on nutritional status (automatic calculation of nutritional ratios and automatic alert) and also to follow patients at risk (monitoring dashboard for dieticians)
- 2) formations were specifically adapted to each professional team (eg nurses, physicians, and dieticians)
- 3) we developed regular staff (monthly) to reinforce the initial formation.

WHAT MAKES THE INITIATIVE INNOVATIVE?

The development of a computerized system of screening with an automatic alert is an innovative tool which may be easily generalized.

The evaluation of professional practices in malnutrition screening with a robust methodology (randomised cluster study) is also a new approach in the field of the clinical nutrition.

For the first time, we demonstrated the efficiency of a multifaceted intervention to improve clinical practices of care professionals in the field of hospital malnutrition.

Conclusion

Implementing a computerized malnutrition screening system is feasible and was associated with a rapid improvement of clinical practices for caring malnourished children. A Nutritional Support Team is pivotal to coordinate nutrition care and instill a common "nutritional culture" within institution.

Developing information sharing and collaboration between trades involved in nutrition care requires time and may explain why substantial leeway subsist to achieve a better screening and management of malnourished children at hospital.