

A chance for life

Fighting malnutrition in Hungarian onco-haematological paediatric patients

DESCRIPTION OF THE INITIATIVE

Onco-haematological patients are treated in eight different centers in Hungary. The centers are associated with Hungarian Children Oncology Network which coordinates their operation.

As a brand new initiative Hungarian Children Oncology Network set up nutritional teams at each centers in 2013 and these groups aim to fight malnutrition at paediatric onco-haematological departments in Hungarian Health-care.

Centers of Hungarian Children Oncology Network (share of nationally treated patients)



Rehabilitation:
Bakonyszűcs

OBJECTIVE

Our goal is to create – based on a globally unique initiative – an unified professional protocol and a screening method (questionnaire) that can support

- to stimulate the recognition of early signs of malnutrition in paediatric onco-haematological patients (31% of all patients were at risk of malnutrition)
- to organize the optimal treatment of malnutrition
- to lower the nutritional risk
- the co-work of health care professionals and the carers by increasing the awareness in nutritional therapy
- the effectiveness of onco-haematological treatment
- the chance of survival
- validate the questionnaire by BIA device

We are defining:

- How many times treatments were postponed due to bad condition of a patient
- How many septic periods have been occurred during treatment?
- How many days were spent in hospital during therapy?
- Compare international data with local experience by creating homogenic patient groups and following their therapy for two years.
- Compare the achievements versus number of days due to nutritional therapy to see who it supports patients' condition and resources used by hospital
- Kaplan-Meyer survival curve comparison (from first day of treatment till 1st and 2nd year). Collate the nutritionally treated vs. non-treated

SCOPE OF PROJECT AND ACTIVITIES

Protocol contains guidelines of the nutritional therapy during and after the treatment. A nutritional team consists of three members. A nurse, a dietitian and a physician (oncologist or gastroenterologist).

The goal of these teams are:

- Screening the risk of malnutrition
- In case of risk – building up the nutritional therapy
- Follow-up of the therapy
- Checking the realization of the therapy according to the protocols
- Guidance for carers

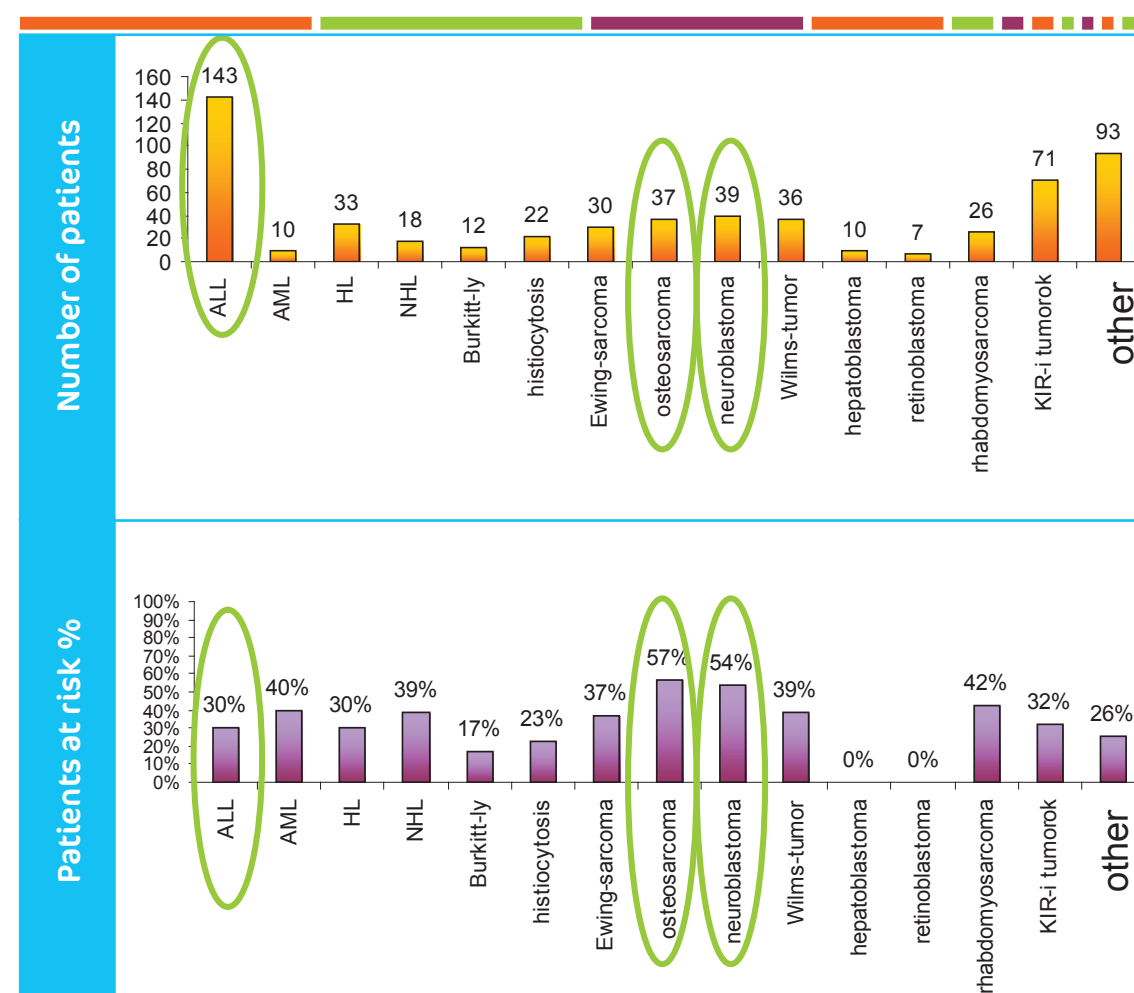
A session of the nutritional team

- Nurse screens the patients and collects the results
- Dietitian evaluates the data and consults with a physician
- The nutritional team creates a plan for the nutritional therapy according the risk level of malnutrition

Resources have been used

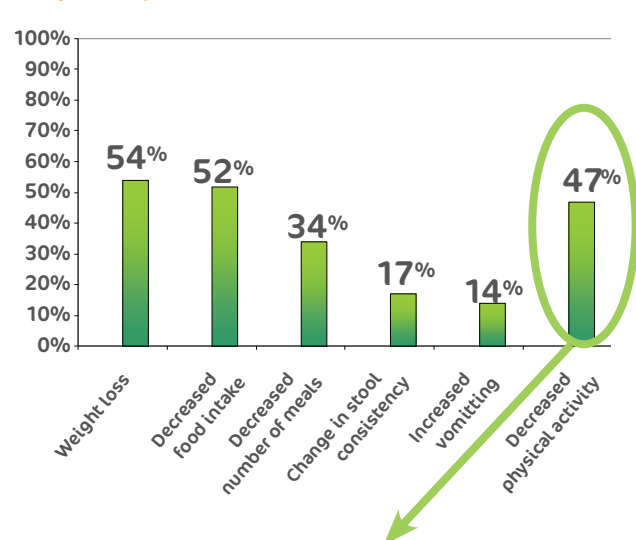
- BIA device
- Person who processes data (screening documentations, patient charts)
- Team-work (medical students are also involved)

Distribution by diagnosis



MAIN ACHIEVEMENTS

Why this questionnaire better than a BMI-score?



This cannot be revealed by a BMI-score!
Oncologists do not ask about it!
These problems happen more often than convetional GI side-effects! (vomitting, diarrhea)

- National protocol that rules nutritional therapy for onco-haematological patients
- All children patients admitted to the hospital with onco-haematological disease were screened which gains a total picture of the nutritional status of these patients in Hungary
- Questionnaire has been accepted by the Hungarian Children Oncology & Haematology Association
- Educational program on tumors related malnutrition for onco-haematological departements' nurses, assistances and parents
- Educational program and information material to parents about the necessity and types of nutritional therapy
- Research work to develop a cost effective, sensitive and all departements' accessible method by checking the change of the nutritional risk and the efficiency of nutrition
- It can support others:
 - Gives a guidance where screening and nutritional intervention plan is not available
 - Supports those where budget is low as it helps to determine which tools to select
 - Offers a questionarre (currently under validation process) that has been used more than thousand times
 - Ensures a tool which does not require to be controlled by a physician as a nurse can execute it

NEW PATIENT
Name: _____
Weight: _____
Height: _____
Date of birth: _____
Age: _____
Ward: _____
Does he/she get any nutritional support?
Has he/she got a tube when admitted?
Questionnaire
1. BMI percentile < 10
2. BMI percentile < 5
3. At least 1kg loss since last problems occurred
4. Changing in nutritional habits: less intake
5. More often or different consistency of the faeces
6. More vomiting (compared to previous time)
7. Decreased physical activity (compared to previous time)
8. Risk of nutritional status can be viable
Risk of malnutrition can be determined:
Date: _____
Screening was done by: _____
A B C
(Circle the correct one)