Nutritional educational policies for patients diagnosed with fistula or leaks of the gastrointestinal tract / Education in Comprehensive Management of Nutritional and Surgical Therapy in patients with leaks

and postoperative fistulas of the gastrointestinal tract/ To propose the creation of public policies/ to generate monetary resource through continuous medical education which will allow us to provide financial aid for patients in need.

Project team (Arenas Márquez Humberto, García Morales Juan Francisco, Cacho Rodríguez Alejandra, Mendoza Navarrete Miguel Ángel, Arenas Moya Diego, Garnica Jiménez Jorge Luis, Plascencia





**Description of the initiative** UFI (Unidad de Falla Intestinal) is an integrated practice unit of intestinal failure dedicated to the care of complex patients through multidisciplinary team of professionals whom are experts in the field of postoperative fistulas of the gastrointestinal tract.

Only evidence of optimal nutritional or surgical management for this type of patients is the Mexican

consensus created by UFI as well as creating 3 clinical scenarios which are applicable worldwide.

**Rationale for the initiative The ESPEN intestinal failure guidelines concludes the following:** I.F is a well recognized organ failure, but no formal definition and classification has been devised before. SOWATS and SNAP says that early **re-operation** is not the solution, however, we do not agree. We can work in conjunction as a single foundation ASPEN-ESPEN- FELANPE-UFI

**Objectives and scope** We will design bundles combining the correct time for both surgery and nutrition, (Integral management) to be able to regulate the therapeutic conduct used in these patients, and we will offer virtual conferences (webinars) to solve doubts and guide the treatment in any part of the world virtually, without time or space barriers.

## Planned activities & deliverables

The steps to follow will lead to a bundle of actions which will allow us to assess the current status of nutritional therapy in patients with leaks and postoperative fistulas. Through data obtained from 3 observational and cohort surveys, where the prevalence of fistulas and postoperative leaks from the gastrointestinal tract from hospitals around the world will be measured. As of today, the data from the first cohort has been obtained, we were able to receive data reports from 78 hospital sites around the world. **0-6 months:** Create evidence, identify deficiencies, demonstrate the prevalence of fistula or leaks of the gastrointestinal tract worldwide. Measure results compared to historical series of the 21st century **16-21 months:** Demonstrate high morbidity, mortality secondary to sepsis, staggeringly high costs. **21-24 months:** Creation of virtual as well as face-to-face conferences and seminars to educate on the correct nutritional and surgical treatment in the adequate time. Standardized critical thinking world wide. Create complete interactive e-books.

**Resources & enablers** "UFI" has a virtual platform to facilitate access to health professionals. The logistics to make this point and maintain the platform will be **22,400 Euros.** In our Online platform we will

post a clinical case of interactive education in a monthly manner. A trained bio statist is required in order to deliver an effective data analysis (1,250 Euros). Sustainable academic support is required for the team of multidisciplinary virtual education, a project coordinator and researchers in the clinical and surgical area (1,350 Euros). Costs of publications and presentation in different forums (5,000 EUROS). Total global financial aid requested is 30,000 Euros. What factors will make it successful? The global value of our project is to demonstrate better results and lower costs.

## **Results/outcomes & expected impact**

- A network of experts in Latin America and the Intestinal Failure Integrated Practice Unit will be created to be the centre of reference for the delivery of these patients
- Control source of infection by early detection of a leak (according to 3 scenarios-bundles), right diagnosis equals to early intervention, optimal timing for nutritional care, and less invasive treatments.
- Create awareness and standardize nutritional and surgical management by a network of case discussion from remote locations which will take place electronically, analysis based on the database measuring results worldwide. Changing physician behavior using online interactive case-based education. Physicians solve problems, we can follow their progress and they can safeguard the standards of attention.
- Randomized Clinical Trials: Classify scenarios, nutrition, surgery and endpoints: outcomes, lenght of stay, costs.
- Hard data to create public policies regarding intestinal failure in order to be recognized as a catastrophic expense.
- The project is transferable to any environment. Especially in Latin America. UFI is a social business which means utilities obtained can be used to pay the work team and also to help patients with low resources.

