

Use of Oral Nutritional Supplements in Primary Care

Version 1 – September 2017

VERSION CONTROL		
Version	Date	Amendments made
Version 1	Sept 2017	New document. AG.

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Introduction

The purpose of oral nutritional supplementation (ONS) is to supplement food intake, not replace it and their use does not remove the need to manage the underlying condition responsible for the patient's poor appetite. It is important to ensure that prescribing is both appropriate for the patient and that the treatment length is such that waste is minimised.

Please note:

The decision aids are not designed to be used stand alone and should only be used by those with experience of managing patients with or at risk of malnutrition. Further advice should be sought from a dietician in the absence of relevant clinical experience.

Referral criteria to dietetics

The following patient groups should be referred to dietetics for review:

On ONS as sole source of nutrition

ONS used as part of feeding regime for artificially fed patients e.g. PEG/JEJ/NG

Complex nutritional needs that may require specialist feeds

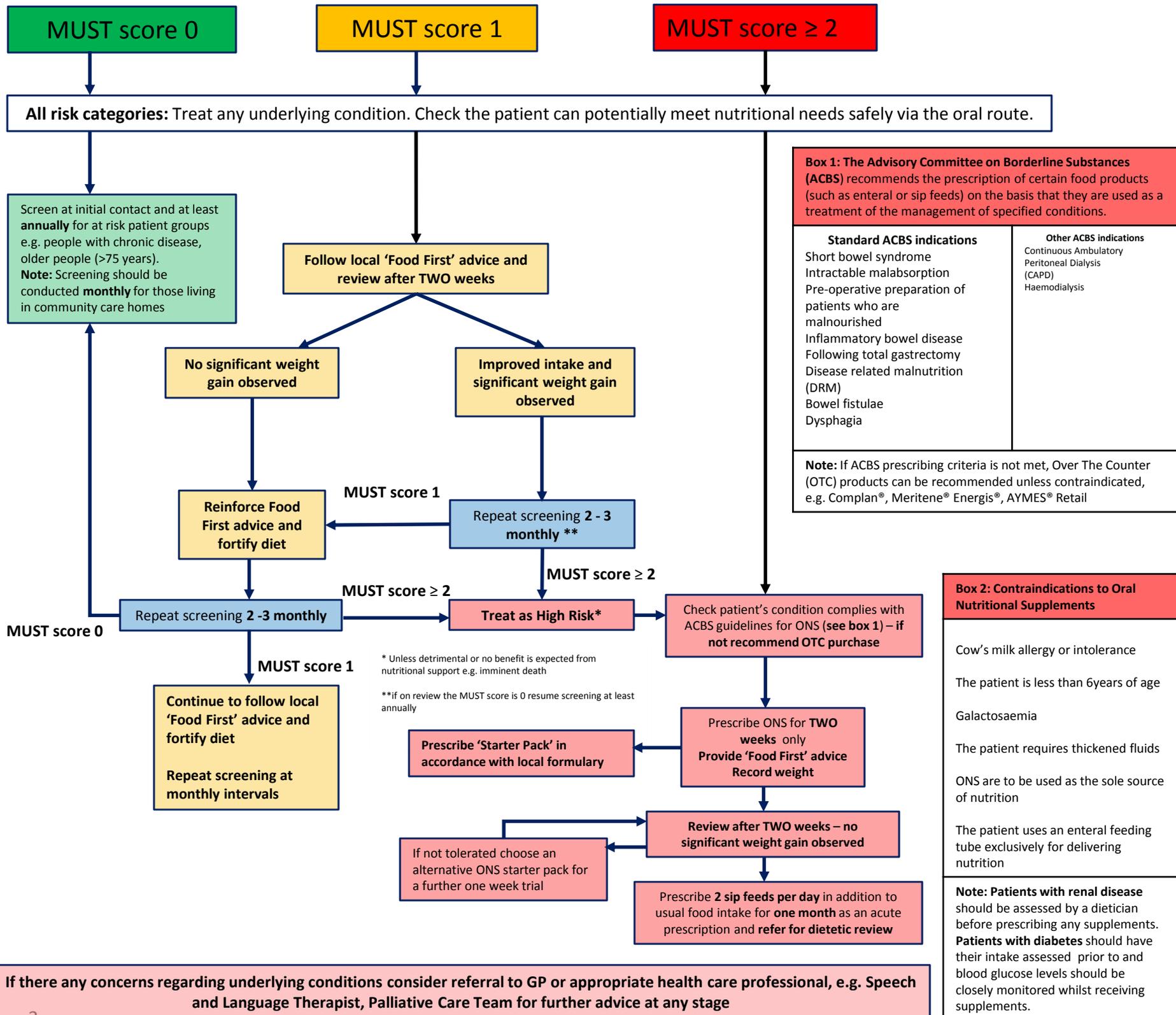
At refeeding risk:

- Very little or no food intake in > 5 days with a BMI of 16.5 kg/m² or less or
- little or no nutritional intake for greater than 10 days or
- lost more than 15% of their body weight within the last 3-6 months (except patients at the end of their lives)

Grade 3 or 4 pressure sore

ONS Decision Aid for Primary Care Practitioners

Any patient presenting with low appetite should be screened for risk of malnutrition using the Malnutrition Universal Screening Tool (MUST). The MUST score template can be accessed at: <http://www.bapen.org.uk/screening-and-must/must/introducing-must>.



Appendix 1

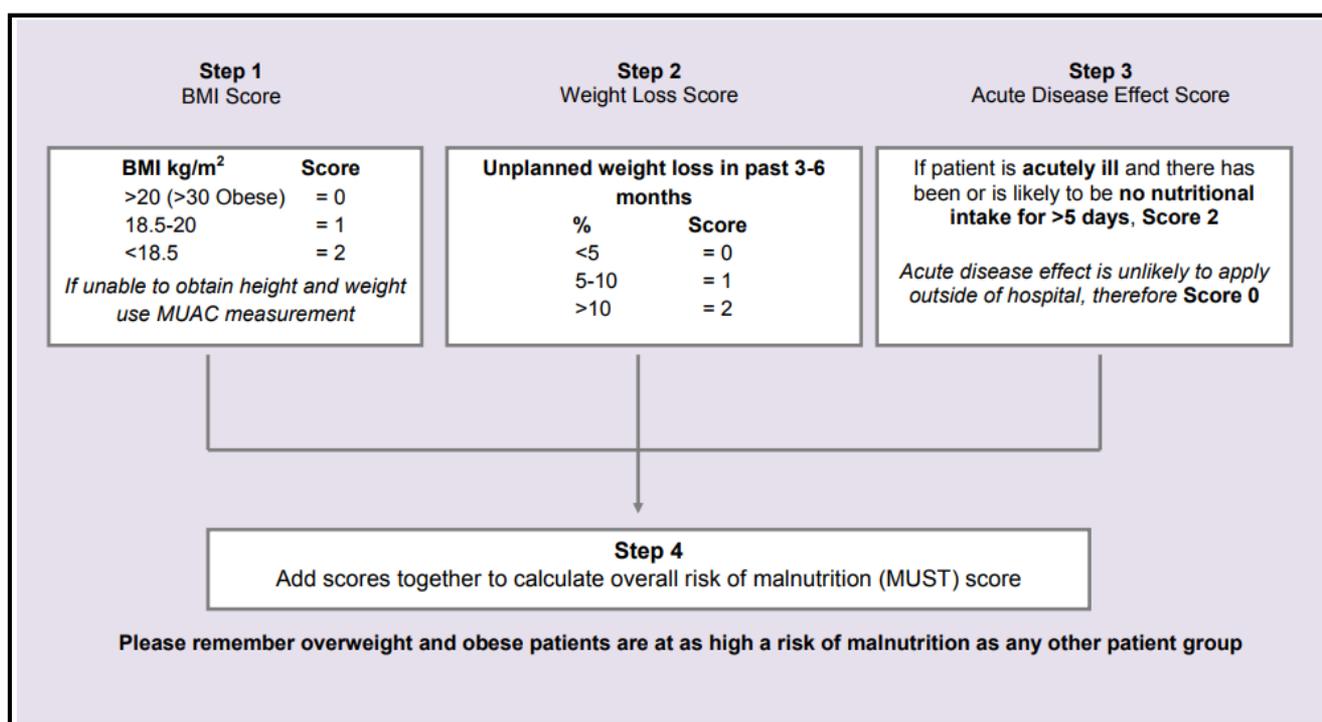
Stopping Supplements

Supplements must be reduced and stopped when:

1. Agreed treatment goals are met **or**
2. Food intake is satisfactory (eating > half their meals) **or**
3. BMI is within the healthy range (20 – 25kg/m²) **or**
4. The patient has maintained their current weight for the last two months or is gaining weight

Monitor weight/MUST score for 3 months after discontinuing ONS

Calculating MUST Score



Preferred Oral Nutritional Supplements

The following products have the highest cost/calorie ratio, alternative products are available and should be considered if the following are contraindicated or not tolerated. Consult current BNF or MIMS and local formularies.

Product	Unit Volume	Unit Price £ (Jan 2017)	Calories per £*	Protein (g) per £*
AYMES shake	57g sachet	0.78	499	20
Fresubin Powder Extra	62g sachet	0.80	496	22
Ensure Shake	57g sachet	0.78	449	20
Complan Shake	57g sachet	0.78	446	18
Complan Shake Starter Pack	5 flavours	0.96	403	16
AYMES Shake Starter Pack	5 flavours	0.96	404	16

*When mixed with 200ml whole milk

Bibliography

1. British Association of Parenteral and Enteral Nutrition. Malnutrition Universal Screening Tool. Accessed via www.bapen.org.uk [accessed online: January 2017].
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4. Dietetic Team. Malnutrition Universal Screening Tool (MUST). Adult Doncaster Community Integrated Services. Rotherham, Doncaster and South Humber NHS Foundation Trust. Accessed via www.rdash.nhs.uk [Accessed online: August 2017].