

Everyone has the right to nutritional care¹

MALNUTRITION is a major health problem that affects quality of life²

MALNUTRITION affects many people globally^{3,4}



Globally 20 - 50 % of hospitalised patients have malnutrition



In Europe up to 1 in 3 patients have, or are at risk of, malnutrition on admission



Almost half of adult patients in African hospitals are malnourished



More than half of patients in South African hospitals are at risk of malnutrition

MALNUTRITION has many faces - Anorexia, Sarcopenia, Frailty, Cachexia^{5,6}



Cachexia

- Due to underlying disease
- Severe weight loss
- Muscle and fat loss



Sarcopenia

- Low muscle mass
- Low muscle function

MALNUTRITION



Anorexia

- Loss of appetite



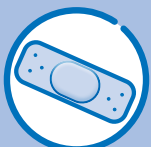
Frailty

- Weakness
- Balance impairment
- Slow walking speed

CONSEQUENCES OF MALNUTRITION³



Reduced immunity and infectious complications



Pressure ulcers and delayed wound healing



Unsteady gait, falls and fractures



Impaired mental status



Reduced treatment tolerance



Increased length of stay and readmissions

How can we help?

PERSONalise nutritional care

Preventing Malnutrition



Ensuring Regular screening



Referring to Appropriate HCPs



Selecting an Appropriate nutrition plan



Observe Frequent monitoring



Nutrition gap

Consider escalating Nutritional Therapy



Nutritional Therapy - Oral intake vs requirement

100 %

75 %

50 %

25 %

0 %



Food and Oral Nutritional Supplementation



Oral Nutritional Supplementation and/or Tube Feeding



Tube Feeding

Depending on tolerance and gastrointestinal function supplemental or total parenteral nutrition can be used

Close the nutritional gap