

EPIDEMIOLOGY OF HOSPITAL MALNUTRITION WITH A FOCUS ON HOSPITAL WARDS WHERE MALNUTRITION IS A SERIOUS PROBLEM

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OBJECTIVES

The review aimed to collect data on the extent of malnutrition in patients from various hospital wards, with particular emphasis on cancer patients with various types of malignancies.

METHODS

Scoping review was held on Pubmed and publicly available sources of information, with a particular focus on the most recent and the most reliable data from the systematic and nonsystematic literature reviews related to malnutrition in patients during and after hospitalization. Additional data, uncovered with the above-mentioned sources, were taken from statistical reports of dedicated associations dealing with malnutrition aspects.

RESULTS

Malnutrition is common in all medical facilities, especially in hospitals and long-term care institutions. It is estimated that up to 50-60% of hospitalized adult patients suffer from malnutrition. Deterioration of nutritional status during a hospital stay may occur in both malnourished and well-nourished patients. The problem is widespread even in high-income, well-developed societies.

In 4 European countries (The Netherlands, Ireland, the UK, and Germany) patients primarily admitted to geriatrics, oncology, internal medicine, and gastroenterology wards have the highest prevalence of malnutrition/risk of malnutrition (Figure 1). Undernutrition is also notably frequent in patients with gastrointestinal, respiratory, neurological diseases, and particularly among people with malignancies, who have rates of malnutrition twice as high as in patients without cancer. In this group of patients, there are also fractions more or less prone to cachexia - it depends mainly on the tumor location. In a prospective, observational, multicentre study conducted in French cancer centers, the overall incidence of malnutrition was the highest for gastrointestinal (49,5%), head and neck (45,6%) and lung cancers (40,2%). In those cancers, 18-23% of patients have severe malnutrition (Table 1).

Malnutrition affects all age groups, but with age the risk of malnutrition increased, especially due to the frequent occurrence of many comorbidities, which are often chronic and progressive. It is estimated that one in three elderly people in hospitals is malnourished or at risk of malnutrition. As shown in Figure 2, the prevalence of malnutrition/risk of malnutrition is high in the elderly in hospital - depending on the department or method used, even more than 90% of the elderly were considered malnourished or at risk of malnutrition.

Figure 1. Prevalence of malnutrition and risk of malnutrition according to hospital ward/primary admitting speciality in 4 European countries

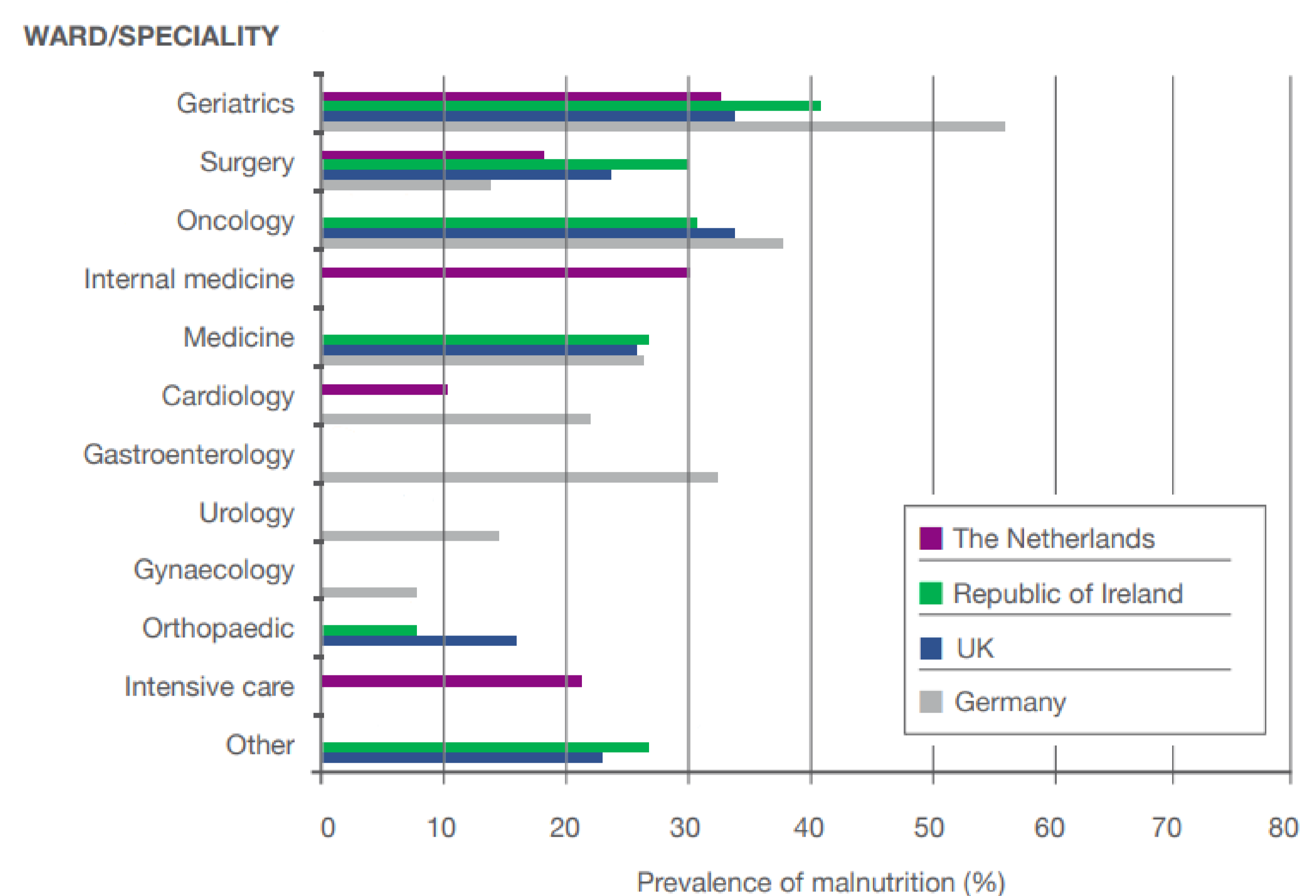


Figure 2. Prevalence of malnutrition risk in older people in hospital using different screening methods by European countries

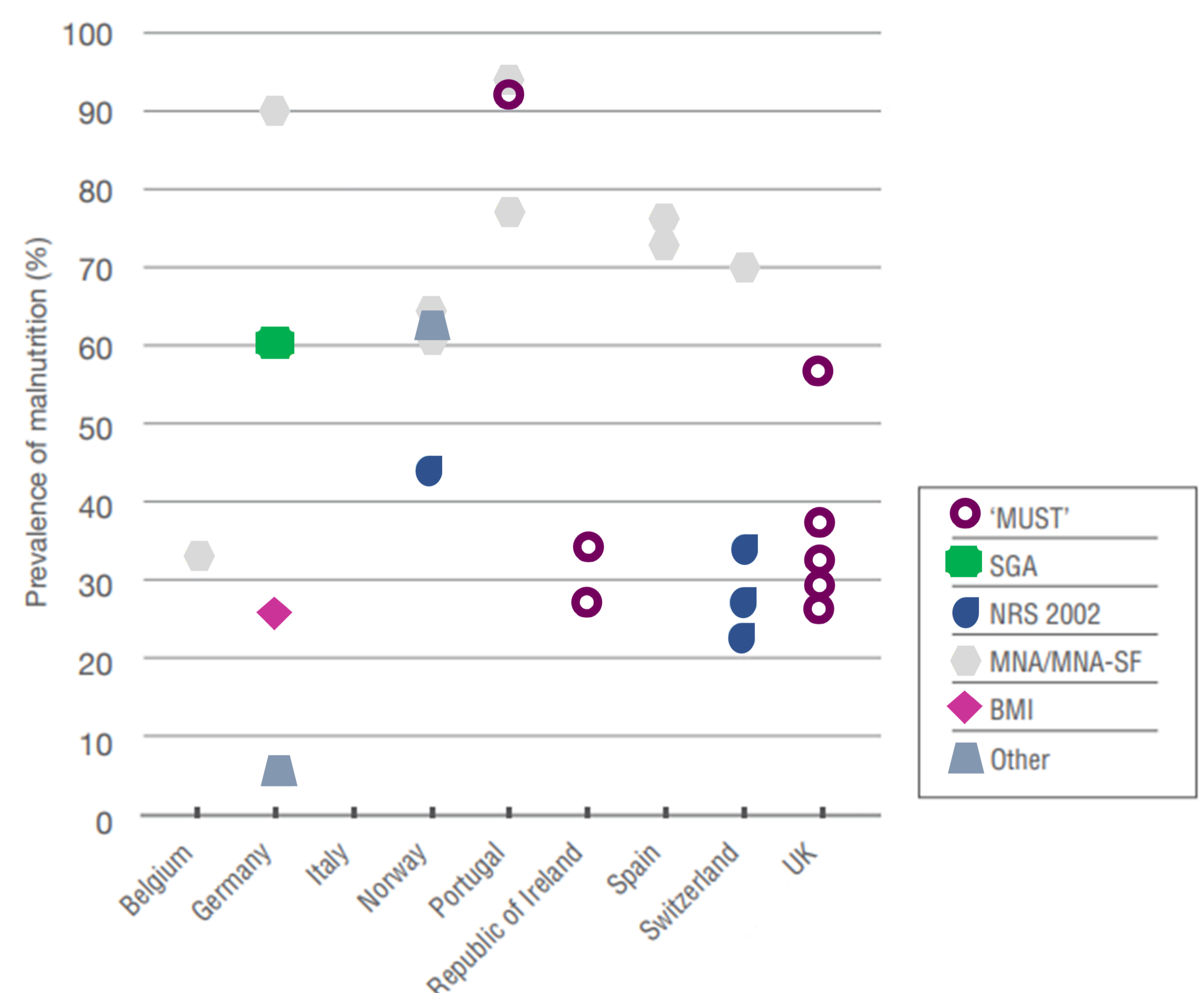


Table 1. The incidence of malnutrition in cancer centers in France by cancer type

| Type of cancer | Overall incidence of malnutrition | Moderate malnutrition | Severe malnutrition |
|------------------|-----------------------------------|-----------------------|---------------------|
| Breast | 18,3% | 11,2% | 7,1% |
| Head and neck | 45,6% | 22,5% | 23,1% |
| Colon | 31,2% | 22% | 9,2% |
| Hematological | 34,2% | 26,3% | 7,9% |
| Gastrointestinal | 49,5% | 26,3% | 23,2% |
| Gynecological | 32% | 16,4% | 15,6% |
| Lung | 40,2% | 21,9% | 18,3% |
| Others* | 27% | 18% | 9% |

CONCLUSION

Malnutrition is a serious problem among hospitalized people, especially those with chronic or devastating diseases. There is a need to identify patients who are at risk of malnutrition or who are malnourished. This is an important component of patients' care as malnutrition can affect patients' physical activity, response, and tolerance to their treatment, quality of life, and survival rates.

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