



Canadian  
Malnutrition  
Task Force™

le Groupe de  
travail canadien  
sur la malnutrition<sup>MC</sup>

A Précis of the publication: *Factors associated with nutrition decline in hospitalized medical and surgical patients admitted for 7 d or more: a prospective cohort study.*

Allard JP, Keller H, Teterina A, Jeejeebhoy K, Laporte M, Duerksen D, Gramlich L, Payette H, Bernier P, Davidson B, Lou W. Factors associated with nutritional decline in hospitalized medical and surgical patients admitted for 7 days or more: a prospective cohort study. *British Journal of Nutrition*, volume 114 / issue 10 / November 2015, pp 1612-1622.

The aim of this study was to examine factors associated with nutritional decline in medical and surgical patients.

Nutritional decline was defined based on subjective global assessment (SGA) performed at admission and discharge. Data were collected on demographics, medical information, food intake and patients' satisfaction with nutrition care and meals during hospitalization; 424 long stay patients (>7 days) were included.

**Key Findings:**

After controlling for SGA at admission, presence of a surgical procedure and the effect of being in a specific hospital, the following factors were statistically significantly associated with higher risks of deterioration in medical patients: lower BMI upon admission, presence of cancer, two or more diagnostic categories, new diagnosis of infection while at the hospital, low food intake and more food intake barriers as identified in the patient satisfaction survey. For surgical patients only male gender was found to be statistically significantly associated with nutritional deterioration.

**Clinical relevance:**

High scores in food quality and severity of illness domains were significant and independent predictors of nutritional decline indicating that poor satisfaction with food served in hospitals, particularly with its taste, appearance and smell, were associated with nutritional decline in medical patients. It is unknown if this reflects the quality of hospital food or the effect of illness or polypharmacy on perceptions such as taste and smell. However, considering that reduced food intake is also associated with nutritional decline, it is advisable to pay more attention to the quality of the food service. Food intake may also be reduced due to loss of appetite from illness, feeling sick and having pain. Several of these factors can be corrected, so diligence in determining the cause of poor food intake is imperative in improving

patient outcomes.

To read the full paper, please go to:

<http://journals.cambridge.org/action/displayAbstract?fromPage=online&aid=10010796&fulltextType=RA&fileId=S0007114515003244>

Please visit the CMTF web site <http://nutritioncareincanada.ca/resources/> for an update on the resources available to you to help prevent, detect and treat malnutrition

**This resource is made possible by unrestricted educational grants received in 2015 from our Visionary partner - Abbott Nutrition and Nourisher partner- Nestlé Health Science.**