



CLINICAL NUTRITION IN INTERNAL MEDICINE INPATIENTS: PRACTICAL PROPOSALS FROM A RECENT FADOI-SINPE SURVEY

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Background and aims

The Federation of Associations of Hospital Internists (FADOI) and Italian Society of Artificial Nutrition and Metabolism (SINPE) collaborated to focus critical issues in nutritional management/treatment in Internal Medicine inpatients in Italy, and formulated practical proposals to improve it.

Methods

A national web-based survey (February-April 2021) included a 13 multiple-choice item questionnaire related to 1) screening/assessment of malnutrition and associated/overlapping sarcopenia/dysphagia; 2) specialist consultations; 3) management of nutritional support.

Results

266 FADOI members (10.76%) responded to the questionnaire. Screening for malnutrition, sarcopenia, and dysphagia through validated tests/tools is rarely performed (22%, 3%, and 33%, respectively). Global Leadership Initiative on Malnutrition (GLIM) criteria for malnutrition diagnosis are little used (20%). Clinical Nutrition services/units are poorly involved (17%).

Conclusions

To overcome these critical issues, FADOI and SINPE experts proposed practical solutions to promote the nutritional management in internist real-life settings (Table 1).

1. Include the nutritional screening/assessment in the clinical folder
2. Code malnutrition diagnosis (and interventions) at discharge for economic reimbursement of hospitalization/treatment
3. Implement standardized pathways between Nutritionists and Internists, identify reference figures in the medical wards (physicians, nurses)
4. Refer to hub Clinical Nutrition services/units in hospitals that lack it
5. Organize courses targeted at ward staff, emphasizing the role of hospital malnutrition/sarcopenia/dysphagia, and of their early recognition/management
6. Equip wards with appropriate tools (dynamometer, bioelectrical impedance analysis devices)
7. Include Clinical Nutrition in the post-graduate Internal Medicine programs and, ideally, in medical schools

Table 1. List of priority actions to implement clinical nutrition in medical settings

