

NUTRITIONAL SCREENING EVALUATION AND CLINICAL OUTCOME IN HOSPITALIZED PATIENTS

E.Speranza, L.Santarpia, M.Marra, O. Di Vincenzo, D.Morlino, C. De Caprio, F. Contaldo, F. Pasanisi

Internal Medicine and Clinical Nutrition Unit. Department of Clinical Medicine and Surgery, Federico II University Hospital, Naples, Italy

Background and aims: Malnutrition is common in hospital settings and is still often unrecognized and undertreated, with negative consequences on the patient outcome. The objective of this study was to assess the relation among the nutritional risk evaluation, nutritional therapy (NT) needs and length of stay of patients hospitalized in Internal Medicine and Surgery Units in a University Hospital.

Methods: All patients consecutively hospitalized from September 2018 to December 2019 were recruited for the study. Anthropometry, laboratory indicators and Bioimpedance analysis (BIA) were assessed; nutritional risk screening by NRS 2002 and SGA was evaluated within 48 hours from the admission. NT needs during hospitalization were also collected.

Results: According to the NRS-2002, 93% of patients were at no or low nutritional risk, while 7% were at high nutritional risk; at the SGA evaluation, 46.3% of patients were well nourished, 49.8% moderately malnourished, and 3.9% severely malnourished. Malnourished and at nutritional risk patients had a longer hospital stay than well-nourished ones. In addition, patients needing NT had significant ($p < 0.05$) lower calf circumference (34 ± 5.4 vs 35.5 ± 3.9 cm) and phase angle (4.7 ± 1.2 vs $4.8 \pm 1.2^\circ$).

Conclusions: Early nutritional risk evaluation allows to prescribe a timely NT intervention in order to improve the patient outcome and promote earlier discharge.