

Topic Area: Vulnerable Groups and their Nutritional Needs

Abstract Title

A description of nutrition status, using Subjective Global Assessment on the patient population followed by the Urban Health Dietitian at St. Paul's Hospital.

P. Cicci¹, B. Sung¹, K. Perttula², A. Spears^{1,2}, E. Zamora², A. Browes¹, T. Kafka¹, K. Kalkat¹
¹University of British Columbia, Vancouver B.C., ²Providence Health Care, Vancouver B.C.

Abstract

Introduction: An average 45% of acute care patients in Canada are malnourished, increasing with length of stay (LOS). Patients of the Urban Health dietitian (UHD) at St. Paul's Hospital (SPH) in Vancouver have high incidence of Human Immunodeficiency Virus (HIV), infectious disease (including Hepatitis C (HCV)) and substance use disorders, which are well-known to decrease nutrition status (NS).

Objectives: To describe: (1) demographics of patients followed by the UHD at SPH; and, (2) patient NS upon admission and over their LOS, using Subjective Global Assessment (SGA) scores and parameters. **Methods:** A retrospective chart review of patients admitted between March 29 to October 12, 2018 was completed. Data compiled using descriptive analysis included demographics (age, sex, housing, HIV and HCV status), parameters from SGA (intake, weight changes, symptoms affecting intake, functional capacity, metabolic requirement, physical examination, and contributing factors (cachexia and sarcopenia)), initial SGA scores and subsequent weekly scores.

Results: Of n=193, 80% were 35-64 years, 72% male, 63% HIV+, 17% homeless and 66% HCV negative. Upon initial assessment, 77% had inadequate intake, 85% high metabolic needs, 60% were malnourished (SGA B or C) and 70% had muscle loss (25% severe). Of patients who were severely malnourished (SGA C), 97% were HIV+. Considering LOS (n=100), over 90% of malnourished patients (n=52) improved NS in 1.8 weeks. Following dietitian intervention, 71% of patients were well-nourished, a 31% increase from admission. HCV and homelessness had minimal significance on NS.

Conclusion: This study highlights the importance of using SGA to assess NS and impact of dietitian intervention in this population (specifically those with HIV), which had a 15% higher incidence of malnutrition than the Canadian average.

Significance to the Field of Dietetics: This multi-morbidity population shows increased incidences of malnutrition. Continuation of early screening and dietitian intervention for HIV+ patients should be emphasized to improve NS.