Abstract Title: Prevalence of malnutrition in the elderly population of Vancouver community home health clients
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Introduction: Malnutrition in older adults is a widespread yet under-diagnosed public health concern. Although malnutrition in hospitalized patients has been well documented, very little is known about the prevalence of malnutrition in older adults who receive home health services in the community.

Objectives: To describe the prevalence of risk of malnutrition and malnutrition in older adults who receive home health services.

Hypothesis: Based on literature review, the prevalence of malnutrition in Canadian hospitals is 45%, therefore, we hypothesize that at least 45% of home health clients are either at risk of malnutrition or malnourished.

Methods: Between April 4, 2016 to October 7, 2016, home health clinicians (nursing and allied health) conducted face- to-face interviews using the Mini Nutritional Assessment tool (MNA®) with consenting clients who were 65 years of age or older and non-palliative, and who were newly-referred to Home Health at Evergreen Community Health Centre in Vancouver, British Columbia.

Results: Of the 611 MNAs distributed, 564 (92%) were returned and 226 Home Health clients met our inclusion criteria. 42% (95% Confidence Interval (CI), 36%-48%) of respondents were at risk of malnutrition (mean BMI: 24.2), 22% (95% CI, 17%-27%) were malnourished (mean BMI: 21.4), and 36% (95% CI, 30%-42%) were normal (mean BMI: 26.2). Additional MNA findings: the average age was 81, 129 (57%) were female, 87 (38%) had moderate to severe decrease in food intake, 47 (21%) had weight loss great than 3 kg during the last 3 months, 75 (33%) were bed or chair bound and/or able to get out of bed/chair but not able to go out, 128 (56%) suffered from psychological stress or acute disease in the past 3 months, and 19 (8%) had severe dementia or depression.

Conclusion: In this study, 64% of older adults who receive home health services were at risk of malnutrition or were malnourished this is considerably greater than we hypothesized (p<0.0001) which highlights the need to implement routine community nutrition screening tool.