

Abstract Title: Nutrition screening in the adult stroke population using the Canadian Nutrition Screening Tool (CNST) in comparison with the Subjective Global Assessment (SGA)
Zanatta T¹, Ward S², Seabrook J¹, Foley N¹, O'Connor C¹
¹Brescia University College at Western University, Ontario, ²London Health Sciences Centre, Ontario

Introduction: Although the Canadian Best Practice Recommendations for Stroke Care recommend all acute stroke patients be screened for pre-morbid malnutrition within 48 hours of admission to hospital using a valid screening tool, none have been validated for use in adult acute stroke patients. The Canadian Malnutrition Task Force has developed and validated the CNST tool to screen for malnutrition within medicine and surgery patients.

Objective: To estimate the level of agreement between the CNST and the Subjective Global Assessment (SGA), a previously validated tool for the identification of malnutrition, in a cohort of acute adult stroke patients.

Methods: In this prospective study, adult patients admitted to the Southwestern Ontario Regional Stroke Centre in London, Ontario with acute stroke were identified. The patient's nurse conducted the CNST within 48 hours of admission using information obtained from the patient or a proxy in the event of cognitive and/or language impairments. The research dietitian, blinded to the CNST results, conducted the SGA and classified patients as either A (well nourished), B (moderately malnourished), or C (severely malnourished). B and C of the SGA were combined into one "malnourished" category.

Results: Fifty-eight patients (27 women, 31 males) were enrolled. CNST indicated 12.1% were at risk for malnutrition; however, SGA found 43.1% of patients to be malnourished. The CNST showed a fair level of agreement with SGA (Kappa=0.23). Sensitivity was low at 24% and specificity high at 97%.

Conclusions: CNST may not be the most effective nutrition screening tool to use within the acute stroke population.

Significance to field of dietetics: This is the first study conducted within a Regional Stroke Centre in Canada and with acute stroke patients to observe level of agreement between a malnutrition screening tool and a nutrition assessment.