

THE IMPACT OF MALNUTRITION: CONSEQUENCES AND RISKS

Malnutrition can be defined as 'a state of nutrition in which a deficiency or excess (or imbalance) of energy, protein and other nutrients causes measurable adverse effects on tissue/body form (body shape, size, composition), body function and clinical outcome.'¹

NICE CG32 Clinical Guideline on nutrition support for adults,² defines malnutrition as:

- a BMI of less than 18.5 kg/m²
- unintentional weight loss greater than 10% within the last three to six months
- a BMI of less than 20 kg/m² and unintentional weight loss greater than 5% within the last three to six months

PREVALENCE

Malnutrition affects an estimated three million people (adults and children) in the UK at any one time and is a prevalent and costly problem for our health and social care services.¹ It has been estimated that 29% of adults admitted to hospital in the UK are at risk of malnutrition with most of these at high risk of malnutrition.³ Around 15% of adult outpatients are estimated to be at risk of malnutrition.³ Of people in the UK at risk of malnutrition, the highest percentage (93%) of these people are living in their own homes.³ Hospital patients at risk of malnutrition account for just 2% of total people at risk in the UK and care home residents make up the remaining 5%.³ Malnutrition is particularly prevalent in later life, with an estimated 1 in 10 people over 65 either malnourished or at risk of malnutrition.⁴

RISK FACTORS FOR MALNUTRITION

Certain groups of people are at greater risk of malnutrition:^{3,4}

- Infants, young children and the elderly (including those with frailty)
- Patients with malignancy, gastrointestinal, respiratory, neurological, musculoskeletal, liver, or renal disease
- Individuals undergoing complex surgery, transplantation, or treatment for burns and those with multiple comorbidities including the critically ill
- Those who are poor, socially isolated, or recently discharged from hospital

CAUSES

The primary cause of malnutrition in the UK is disease, and this is often referred to as disease-related malnutrition.⁵ Disease-related malnutrition occurs when nutritional intake does not meet nutritional needs for a number of reasons, such as increased nutritional requirements due to the nature of the disease, reduced nutritional intake due to effects of the disease or disease treatment, or impaired ability to absorb or utilise nutrients.⁴



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REFERENCES

Please visit:
www.NHDMag.co.uk/article-references.html



A BAPEN report carried out in 2015 estimated the cost of malnutrition to be at least £19.6 billion in England (£23.5 billion in the UK), or about 15% of the total expenditure on health and social care.

Biological and physiological aspects of the ageing process may also increase the risk of malnutrition through mechanisms such as altered hormone production, delayed gastric emptying and diminished taste and smell.⁶ Other causes of malnutrition relate to insufficient availability of appropriate food, which may occur due to poverty and deprivation, difficulties with shopping for and preparing food, or inadequate provision of appropriate nutrition in healthcare facilities and care homes.⁴

CONSEQUENCES

Malnutrition, if unidentified and untreated, can have numerous and significant consequences that reduce quality of life. Consequences of untreated malnutrition include:^{3,4,7}

- Impaired immune system function and associated increased risk of infection
- Poor wound healing and increased risk of pressure ulcers
- Loss of muscle mass and strength, which can lead to impaired mobility
- Increased risk of frailty
- Weakened respiratory and cardiac muscles leading to impaired functioning
- Poorer clinical outcomes
- Low mood
- Longer hospital stays and increased rates of readmission

- Greater use of healthcare services and increased mortality

COSTS TO THE HEALTH SERVICE

A BAPEN report carried out in 2015 estimated the cost of malnutrition to be at least £19.6 billion in England (£23.5 billion in the UK), or about 15% of the total expenditure on health and social care.⁸ These costs are associated with the consequences of malnutrition and resulting increased use of healthcare services. It is estimated that strategies to address malnutrition would actually cost less than 2.5% of this overall cost.⁹

CONCLUSION

With an estimated three million people either malnourished or at risk of malnutrition in the UK, malnutrition is a significant public health issue. The NICE Clinical Guideline on nutrition support for adults (NICE CG32) recognises that malnutrition is both a cause and an effect of ill health and that 'good nutrition support services' are crucial in treating a wide range of other conditions.²

As the proportion of older people in the UK population continues to grow and the prevalence of chronic long-term conditions also grows, good nutritional care and improved screening of malnutrition should be prioritised as a key element in managing the risk of malnutrition and maintaining optimum health for all.



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