

## Update on Specialist Nutrition

### Disease-related malnutrition – taking the challenge to parliament

Today, malnutrition affects at least 3 million people in the UK. One in three people in care homes, one in 10 visiting their GP and one in four people admitted to hospital are malnourished and the number of malnourished people is increasing.

These sobering figures were shared with parliamentarians at the BSNA breakfast roundtable which took place in February, leading to a thoughtful discussion of the need for a greater focus on disease-related malnutrition across both health and social care settings.

The BSNA event, sponsored by David Tredinnick MP, brought together parliamentarians and concerned healthcare professionals to discuss the challenges faced by patients at risk of malnutrition and how the NHS can shape greater support for the future.

Also speaking at the event was Anne Holdoway, a dietitian from BAPEN who pointed to the media focus on hospital food and people not wanting to eat it, whereas for many it is their illness that prevents them from eating – for example, where they have difficulty swallowing or reduced appetite.

*“This is where food for special medical purposes, properly administered by a team who has the knowledge as to how to use it, translates into saving lives,”* she said.

Foods for Special Medical Purposes (FSMPs) are a vital tool in managing disease-related malnutrition as they are designed to meet the nutritional or dietary needs of people who are temporarily or permanently unable to get enough nutrition from normal foods.

However, it was also made clear in the discussion that using FSMPs are not a solution in themselves, as the lack of understanding of disease-related malnutrition and the importance of effective nutritional support throughout the care pathway is a major issue among medical professionals.

Holdoway said that it was a mistake for medical professionals to see malnutrition as “just a small vitamin and mineral deficiency... it is actually quite profound – these patients, week after week, suffer from poor appetite and without the right products and the right expertise, they continue to suffer from malnutrition, and as a

consequence of that the cost of healthcare and social care increase.”

Yet, the direct costs of the medical foods themselves is stopping GPs from prescribing them. Suzanne Ford, a dietitian advisor to the phenylketonuria (PKU) charity NSPKU, who also spoke at the event, said many clinical commissioning groups (CCGs) dismiss medical foods for their costs without examining why they are essential. A recent survey by NSPKU showed that 10% of respondents are having prescription problems, with half of the patients finding GPs actively blocking access to these products.

The cost of malnutrition is high. Nearly £20bn is spent by health and care services to treat it each year. It costs over £5,000 more to treat someone who is malnourished than well-nourished and it affects all parts of the country regardless of relative wealth.

Anne Holdoway said “*We do have the solutions, but we need to raise the profile of the importance of nutrition and embed it into all of our pathways. Because if we look at the priorities of the ten-year plan – diabetes, cardiovascular disease, high blood pressure, cancer – all of those areas should have nutrition as an immutable part of care.*”

The roundtable also noted the lack of a senior accountable officer for nutrition and hydration at NHS England or Government department level. Such a person should address the wide range of factors leading to the rise in disease-related malnutrition, and tackle poor nutrition across the population through better coordinated and resourced care and support provided to health and social care.

This call to action was supported by roundtable attendees and BSNA will be building on their enthusiasm to ensure nutrition is a priority as the NHS implements its Long Term Plan.

#### About the British Specialist Nutrition Association

BSNA is the trade association representing the manufacturers of products designed to meet the particular nutritional needs of individuals; these include specialist products for infants and young children (including infant formula, follow-on formula, young child formula and complementary weaning foods), medical nutrition products for diagnosed disorders and medical conditions, including parenteral nutrition, and gluten-free foods on prescription. [www.bsna.co.uk](http://www.bsna.co.uk)