

Abstract

The Academy of Nutrition and Dietetics defines malnutrition as inadequate intake of protein and / or energy over prolonged periods of time resulting in loss of fat stores and / or muscle stores. Researchers identified problems such as lack of knowledge, priority among healthcare workers, lack of communication between professionals, and lack of allocated time as possible causes.

Introduction

Physical signs of malnutrition include weight loss, decreased muscle mass and subcutaneous fat, localized or generalized fluid accumulation, compromised functional status, poor wound healing, dry skin, and fatigue. Older adults experience body composition change, and this can cause a decrease in appetite, a process known as anorexia aging. There is not a single contributing factor that causes malnutrition, it is a combination of physiological, environmental, and social factors.

Social Contributing Factors

- Lack of support because lack of friends and family who could encourage better eating and drinking
- Low mood and lack of interest in food as a result of living with a chronic disease
- Common misconception that it is normal to lose weight as you age, or family and care givers presuming a small appetite in normal in older adults

Physiological Contributing Factors

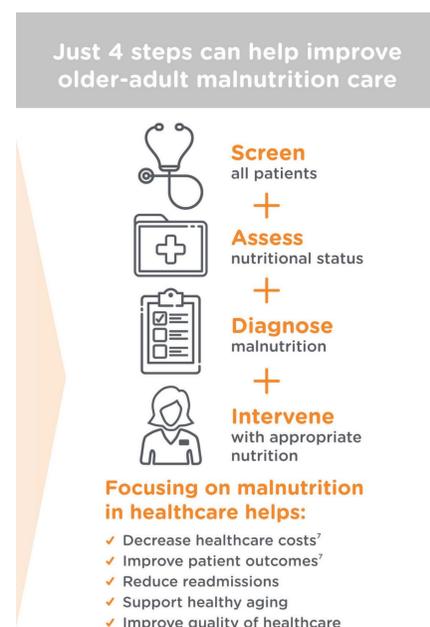
- Decreased sensation of thirst, taste, and appetite due to less energy expenditure
- Illness and diseases, such as dementia
- Reduced physical ability to eat due to poor muscle tone, impacting ability to self-feed and use cutlery
- Dysphagia
- Difficulty chewing due to oral status

Results

In a cross-sectional study, the nutritional status of 1,043 elderly patients were assessed with the Mini Nutritional Assessment, BMI, and factors related to their nutritional care were queried using a structured questionnaire. In addition, 53 nurses were asked if they considered their patients as malnourished. The nurses considered 15.2% of the patients to be malnourished, but the MNA reported that 56.7% were malnourished. Throughout the nation's nursing homes residents receive anywhere from 8 minutes to 3.5 hours of direct care from nursing staff. The Centers for Medicare and Medicaid Services (CMS) recommend a minimum of 4.1 total nursing hours per resident to avoid quality of care issues.

Interventions and Screenings

- Identify in advance subjects at risk for malnutrition
- Confirm their malnutrition status
- Analyze risk of complications to malnutrition
- Identify subjects needing nutritional supplements
- Choose type and modality of intervention
- Evaluate the effectiveness of the proposed treatment.



Conclusion

Malnutrition is one of the most challenging health problems across the country. Through education and experience, the Academy of Nutrition and Dietetics are positioning Registered Dietitians as key participants on interdisciplinary teams in addressing malnutrition.

References

1. Marcason W. Malnutrition: Where do we stand in acute care? *Journal of Academy of Nutrition and Dietetics*. 2012; 112(1):200. doi:10.1016/j.jand.2021.11.003
2. Hestevik CH, Molin M, Debasy J, Bergland A, Bye A. Healthcare professionals' experiences of providing individualized nutritional care for older people in hospital and home care: a qualitative study. *BMC Geriatrics*. 2019;19(1). Doi: 10.1186/s12877-019-1339-0
3. Volkert D. Malnutrition in the elderly – prevalence, causes, and corrective strategies. *Clinical Nutrition*. 2002;21:110-112. doi:10.1016/s0261-5614(02)80014-0
4. McEvelly A. Causes of malnutrition in older adults and what can be done to prevent it. *British Journal of Community Nursing*. 2017;22(10):474-476. doi: 10.12968/bjcn.2017.22.10.474
5. Suomien MH, Sandelin E, Soini H, Pitkala KH. How well do nurses recognize malnutrition in elderly patients? *European Journal of Clinical Nutrition*. 2007;63(2):292-296, doi:10.1038/sj.ejcn.1602916
6. Shipman D, Hooten J, Are nursing homes adequately staffed? The silent epidemic of malnutrition and dehydration in nursing home residents. *Journal of Gerontological Nursing*. 2007;33(7):15-18. doi:10.3928/00989134-20070701-03
7. Rondoni F, Simonelli G, Lunghi PM, Rosseti F, Bondi L, Institutionalized elderly people and malnutrition: research on the patients of a nursing home. *Italian Journal of Medicine*. Published online September 19, 2013: 183-192. doi:10.4081/ijm.2013.183
8. Russell M. Priority: prevent, identify, treat malnutrition. *Journal of the Academy of Nutrition and Dietetics*. 2019;119(1)11. doi:10.1016/j.jand.2018.10.024