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Multidisciplinary Effort to Improve the Diagnosis of Malnutrition in Hospitalized Patients

Publication: Nutr Clin Pract

Publish Date: 5 Apr 2021

Authors: Jennifer Quartarolo, Anlyn Dolopo, Byron Richard

The researchers started a system-wide effort to improve diagnosis of malnutrition in hospitalized patients in 2014. They utilized the Academy of Nutrition and Dietetics/American Society for Parenteral and Enteral Nutrition (AND/ASPEN) Clinical Characteristics and implemented the Nutrition-Focused Physical Exam/Assessment into clinical practice. Dietitians recorded malnutrition diagnoses in a flow sheet in the electronic medical record (EMR), the primary team was alerted when a patient met criteria for malnutrition, and an editable link to the malnutrition diagnosis was created in the discharge summary templates in the EMR. Over 4 years, these efforts led to an increase in the rate of diagnosis of malnutrition from 6% to 12%, which was sustained over the last 2 years. The study also found that the percentage of inpatients having serum prealbumin levels checked decreased from 13% to 8% over the study period.

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A Combination of Enteral & Parenteral Nutrition in the Acute Phase of Critical Illness: An Updated Systematic Review & Meta-analysis

Publication: JPEN J Parenter Enteral Nutr

Publish Date: 20 Apr 2021

Authors: Aileen Hill, Daren K Heyland, Luis A Ortiz Reyes, Elena Laaf, Sebastian Wendt, Gunnar Elke, Christian Stoppe

This systematic review and meta-analysis includes randomized controlled trials (RCTs) targeting the effect of enteral nutrition (EN) vs. a combination of EN with parenteral nutrition (PN) in the acute phase of adult critically ill patients. 12 RCTs with 5543 patients were included. Treatment with a combination of EN with PN led to increased delivery of macronutrients. No statistically significant effect of a combination of EN with PN vs. EN on any of the parameters were observed: mortality (Risk Ratio 1.0, 95% confidence intervals [CI], 0.79 to 1.28 p = 0.99), hospital LOS (mean difference -1.44, CI - 5.59 to 2.71, p = 0.50), ICU LOS and ventilation days. Overall, this publication shows that a combination of EN with PN improved nutrition intake in the acute phase of critically ill adults and was not inferior regarding the patient's outcomes.

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Associations of Early Nutrition with Growth & Body Composition in Very Preterm Infants: A Prospective Cohort Study

Publication: Eur J Clin Nutr

Publish Date: 31 Mar 2021

Authors: Han J, Zhang L, Li S, Zhang Y, Jiang Y, Chen X, Wang Y, Dou Y, Dong P, Lv Y, Cao Y, Yan W

This study investigated the impact of early postnatal macronutrient intakes on growth and body composition of 133 preterm infants within the first 6 months. The authors concluded macronutrient intakes during the first month of life have impacts on growth and body composition before 6 months of age. Higher daily protein intake is associated with a better growth and healthier body composition for VPT/VLBW infants.

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Recent Advances in Infant Nutrition: Human Milk Oligosaccharides

Publication *Pediatr Neonatol*

Publish Date: 26 Mar 2021

Authors: Cheng YJ, Yeung CY.

This narrative review aims to summarize the current knowledge toward HMOs and update the clinical experience and evidence of HMOs on infant health. Breast feeding and human milk are the standards for infant feeding and nutrition. HMOs are one of the major differences between human milk and formula milk. Currently available evidence demonstrates their various beneficial effects toward infants' health. HMOs serve as decoy receptors that prevent the attachment of pathogens to epithelial cells to protect against infectious disease. HMOs modulate host intestinal epithelial and immune cell responses. Breast milk feeding remains the best option for infants nutrition and development. However, when breast milk is not adequate or available, infant formula supplemented with HMOs may be considered as an alternative.

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Obesity Pandemic During COVID-19 Outbreak: Narrative Review & Future Considerations

Publication: *Clin Nutr*

Publish Date: 1 April 2021

Authors: Edda Cava, Barbara Neri, Maria Grazia Carbonelli, Sergio Riso, Salvatore Carbone

The high prevalence of obesity and obesity-related comorbidities has reached pandemic proportions, particularly in Western countries. Obesity has been recognized as major risk factor for coronavirus disease-19 (COVID-19)-related prognosis, contributing to worse outcomes in those with COVID-19. The review discusses how obesity might increase the risk of COVID-19 and potentially affect its prognosis once COVID-19 is diagnosed. The authors advocate for the implementation of strategies aimed at

preventing obesity, but also to minimize the metabolic anomalies that may lead to a compromised immune response and chronic low-grade systemic inflammation, especially in patients with COVID-19.

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