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Nutrition Research Review

Development of a Competency Model for Placement & Verification of Nasogastric & Nasoenteric Feeding Tubes for Adult Hospitalized Patients

Publication: Nutrition in Clinical Practice

Publish Date: 2021 May 22

Authors: Jan Powers, Britta Brown, Beth Lyman, Arlene A Escuro, Lorraine Linford, Kim Gorsuch, Kris M Mogensen, Jessica Engelbrecht, Amanda Chaney, Carol McGinnis, Beth A Quatrara, Jennifer Leonard, Peggi Guenter

This paper, approved by the American Society for Parenteral and Enteral Nutrition (ASPEN) Board of Directors, provides an overview and update of nasogastric/nasoenteric (NG/NE) techniques to guide practitioners in making clinical decisions. The authors stress that regardless of placement technique and verification practices employed, it is essential that training and competency are maintained and documented for all clinicians placing NG/NE feeding tubes.

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Phase Angle as a Marker for Muscle Abnormalities & Physical Function in Patients with Cancer

Publication: Clinical Nutrition

Publish Date: 2021 June 17

Authors: Nilian Carla Souza, Carla Maria Avesani, Carla M Prado, Renata Brum Martucci, Viviane Dias Rodrigues, Nivaldo Barroso de Pinho, Steven B Heymsfield, Maria Cristina Gonzalez

This cross-sectional study included 190 patients with colorectal cancer (CRC). The study results demonstrated that phase angle (PA) was highly correlated with skeletal muscle index (SMI) ($r = 0.70$) and moderately correlated with handgrip strength (HGS) ($r = 0.54$). In the multivariate model adjusted for age, sex, body mass index, performance status, comorbidities and cancer stage, 1-degree decrease in PA was associated with low SMI (Odds Ratio (OR) = 6.56, 95% CI: 2.90–14.86) and with low SMI and HGS combined (OR = 11.10, 95% CI: 2.61–47.25). In addition, Receiving Operating Characteristics curve analysis showed that PA had a good diagnostic accuracy for detecting low SMI and low SMI and HGS combined (AUC = 0.81, 95% CI: 0.74–0.88; AUC = 0.82, 95% CI: 0.74–0.89; respectively). Overall, this study showed that PA was a predictor of muscle abnormalities and functional impairment and had a good diagnostic accuracy for detecting low muscle mass and strength in patients with CRC.

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Early Enteral Feeding in Preterm Infants: A Narrative Review of the Nutritional, Metabolic & Developmental Benefits

Publication: Nutrients

Publish Date: 2021 July 1

Authors: Melissa Thoene, Ann Anderson-Berry

The purpose of this narrative review is to summarize health and clinical benefits of early enteral feeding within the first month of life in preterm infants. Likewise, this review also proposes methods to improve enteral delivery in clinical care, including a proposal for decision-making of initiation and advancement of enteral feeding. An extensive literature review assessed enteral studies in preterm infants with subsequent outcomes. The findings support the early initiation and advancement of enteral feeding impact preterm infant health by enhancing micronutrient delivery, promoting intestinal development and maturation, stimulating microbiome development, reducing

inflammation, and enhancing brain growth and neurodevelopment. Clinicians must consider these short- and long-term implications when caring for preterm infants.

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Malnutrition in Early Life & Its Neurodevelopmental & Cognitive Consequences: A Scoping Review

Publication: Nutr Res Rev

Publish Date: 2021 June 8

Authors: A Suryawan, M Y Jalaludin, B K Poh, R Sanusi, V M H Tan, J M Geurts, L Muhardi

The negative impact of stunting and severe underweight on cognitive neurodevelopment of children is well-documented; however, the effect of overweight/obesity is still unclear. This scoping review aims to document the impact of mild/moderate and severe underweight, stunting, and overweight/obesity among children aged 0-60 months on their cognitive neurodevelopmental trajectories.

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Nutritional Support in Malnourished Children With Compromised Gastrointestinal Function: Utility of Peptide-Based Enteral Therapy

Publication: Front Pediatr

Publish Date: 2021 June 7

Authors: Mukadder Ayse Selimoglu, Aydan Kansu, Sema Aydogdu, Aysugul Alptekin Sarioglu, Simge Erdogan, Buket Dalgic, Aysel Yuce, Fugen Cullu Cokugras

This review focuses on nutritional support in malnourished children with compromised gastrointestinal function addressing the interplay between malnutrition and gastrointestinal dysfunction, and the specific role of peptide-based enteral therapy in pediatric malnutrition. Malnutrition is associated with impaired gut functions such as increased intestinal permeability, malabsorption, and diarrhea, while pre-existing functional gastrointestinal disorders may also lead to malnutrition. Presence of

compromised gastrointestinal function in malnourished children is critical given that alterations such as malabsorption and increased intestinal permeability directly interfere with efficacy of nutritional support and recovery from malnutrition. Appropriate nutritional intervention is the key step in the management of malnutrition, while alterations in gastrointestinal functions in malnourished children are likely even in those with mild degree malnutrition. Therefore, nutritional therapy in children with compromised gastrointestinal function is considered to involve gut-protective interventions that address the overlapping and interacting effects of diarrhea, enteropathy and malnutrition to improve child survival and developmental potential in the long-term. Peptide-based enteral formulas seem to have clinical applications in malnourished children with compromised gastrointestinal function, given their association with improved gastrointestinal tolerance and absorption, better nitrogen retention/ balance, reduced diarrhea and bacterial translocation, enhanced fat absorption, and maintained/restored gut integrity as compared with free amino acid or whole-protein formulas.

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