



MEDICAL NUTRITION

WHAT IT IS AND WHY IT MATTERS

Medical Nutrition encompasses specialised products for nutritional therapy: **Oral Nutritional Supplements**, **Enteral Tube Feeding** (tube feeding via the nose or the gastrointestinal tract), and **Parenteral Nutrition** (intravenous feeding). The goal of Medical Nutrition is to help patients of all ages to address nutritional insufficiencies arising from a disease, disorder or condition, when they are unable to meet their requirements via normal foods. Medical Nutrition products are to be used under medical supervision. Depending on the situation they may be required for short or long term or even for life and may be administered in diverse healthcare settings or at home.



Disease-Related Malnutrition: an under-acknowledged public health issue

Disease-Related Malnutrition¹ (DRM) is a condition characterized by inadequate intake of energy, protein, and/or micronutrients as a result of a diverse number of diseases or their treatment, and it impacts individuals at all stages of life, from infancy to old age. It is particularly common in healthcare settings, but is also present in patients living at home. In Europe, 33 million adults are malnourished or at risk of DRM. This costs European countries €170 billion a year².

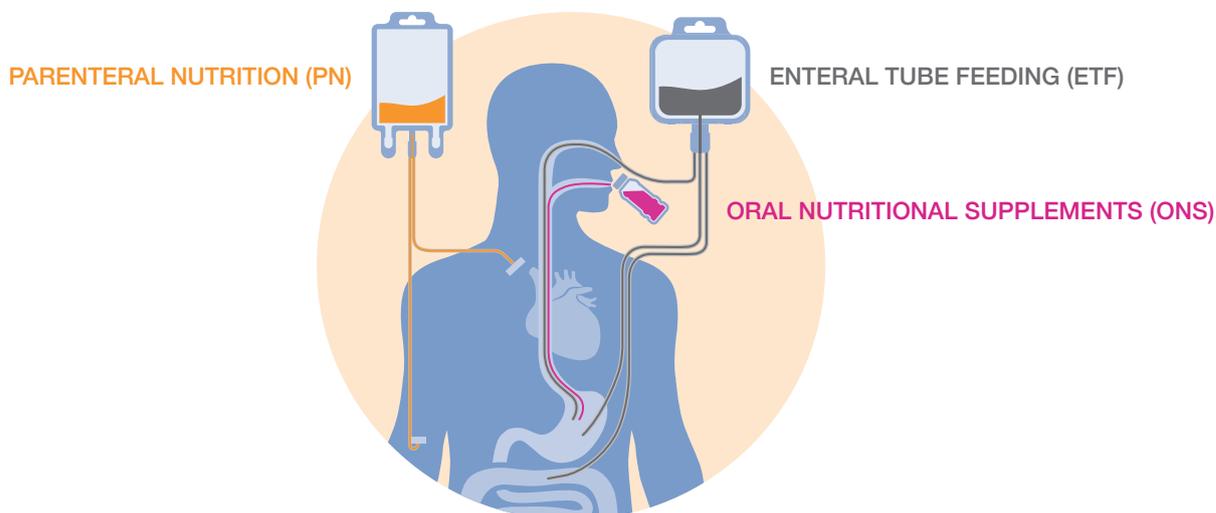
DRM is associated with:

- Higher complication rates and delayed recovery from illness
- Prolonged hospital stay and hospital (re)admissions
- Reduced independence, poor quality of life
- Increased mortality
- Higher healthcare costs

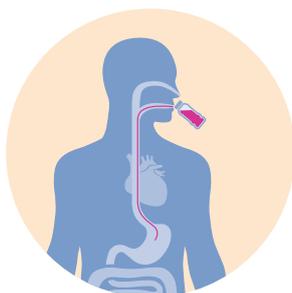
Getting the right nutritional care in a timely manner can help reduce medical complications, support recovery and independence, and lower healthcare resource use.

¹Sometimes referred to as malnutrition or under nutrition
² Ljungqvist O, de Man F. Under nutrition – a major health problem in Europe. Nutr Hosp 2009; 24(3):368–370.

Medical Nutrition includes Oral Nutritional Supplements, Enteral Nutrition and Parenteral Nutrition



ORAL NUTRITIONAL SUPPLEMENTS (ONS)



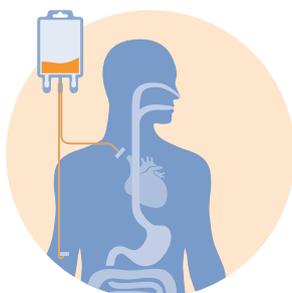
Oral Nutritional Supplements provide macronutrients and micronutrients and are designed to be consumed orally, thus taste and format are important considerations. ONS are available as ready-to-drink liquids or powders that can be prepared as drinks (also called 'sip feeds') but are also available in pre-thickened form. They may be suitable as a sole source of nutrition but are most commonly used as a supplement to normal foods. ONS are an effective and non-invasive solution to tackle DRM in patients who are typically able to consume some normal food, but not enough to meet all of their nutritional needs. ONS are effective in a large number of diseases and their treatment - including cancer, stroke, neurological and gastrointestinal conditions, and surgery.

ENTERAL TUBE FEEDING (ETF)



Enteral Tube Feeding is administered into the gastrointestinal tract via a nasogastric, nasoenteric or percutaneous tube. ETF is required when a patient is unable to consume sufficient nutrition via the oral route. Examples include severe cystic fibrosis, cerebral palsy, after a stroke or major surgery, such as head and neck surgery, and critical illness. ETF can be supplementary to oral intake or parenteral nutrition, or can be the sole source of nutrition.

PARENTERAL NUTRITION (PN)



Parenteral Nutrition - also known as 'intravenous feeding' - is a method of getting nutrition directly into the blood circulation, bypassing the gastrointestinal tract. PN is delivered via a catheter inserted into a peripheral or central vein. PN is needed when a patient is unable to obtain sufficient nutrition through normal food, ONS or tube feeding. For instance indications for PN include gastrointestinal failure which can occur after surgery or in critically ill patients, short bowel syndrome, intestinal obstruction, a fistula in the gastrointestinal tract, cancer patients with severe mucositis or premature infants.