



nutritionDay  
WORLDWIDE

# nutritionDay: vous devez en être...

**ou** voulez-vous utiliser un outil?

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[www.meduniwien.ac.at](http://www.meduniwien.ac.at)

# 1 cas unique: médecin?



- Gastroentérologue 61 a, 68 kg, 174 cm
- Fuite mitrale IV, reconstruction + anneau
- Hôpital universitaire 1200 lits

- J-1 bouillon 17H00, „pique 1 banane“
- J0 chirurgie ext+8h rien
- J1 sortie réa rien
- J2 surv cont, se lave thé, bouillon
- J3 chambre, se lève pd, bouillon pâte
- J4 chambre, marche, ment „selles oui“  
pd, repas léger
- J5 chambre pd, cook&chill
- J6 sortie domicile repas correct

# Pourquoi nutritionDay?

- Pour en **savoir** plus
  - „Hot spot“ de dénutrition
  - Variabilité
  - Groupes à risque
- Avoir des datas locaux, régionaux, nationaux **up-to-date** et qui **peuvent être comparés**
- accroire **l'attention**
- Créer une communauté qui se sert **d'une même langue** et puisse produire de l'évidence ensemble

# Le voyage des malades

screening

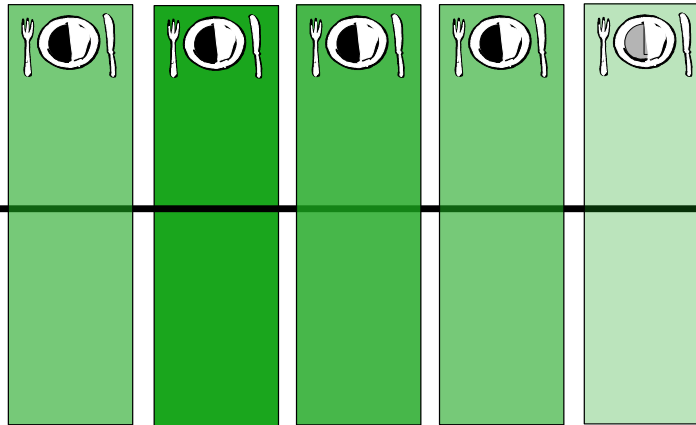
monitoring

*History*

*Risk factors*



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How much do I eat?  
Why do I eat less?

*dependency*  
*destitution*  
*disability*  
*death*

***What will be?***

# Question centrale ment „selles oui“ & Outline

- Qu'est-ce qui se passe avec un **patient**
  - dans une **unité**
  - dans un **hôpital**
  - en faisant le point avec **nutrition** et **outcome**

= le voyage type d'un malade
- essentiels du projet , importants résultats
- communication
- L'avenir ..... Audit?

# Le concept nutritionDay

- **1**-Journée d'acquisition de datas
- **Pas de savoir spécialisé** nécessaire pour la collection de datas
- **Open access** pour les unités participantes
  
- **Patients** sont des informateurs majeurs
  - pour **histoire nutritionnelle** et **évolution BMI**
  - pour indiquer **ce qui a été mangé** au nutritionDay
- **Équipe médical** (médecin/infirmière/diéticienne) décrit
  - but de **l'intervention nutritionnelle** et **la nourriture offerte** individuellement
  - **Outcome** J30 après nutritionDay
  
- **Rapport comparatif individuel pour chaque unité**

# Éléments clés

- **Pas** de **barrières** de langues
- audit **centré malade**
- Audit bidirectionnel: **feedback** pour l'équipe
- **database de référence** toujours récente
  - Critères pour réduire les biais
- facteurs **modifiables existent**
  
- Continuité de la prise en charge?



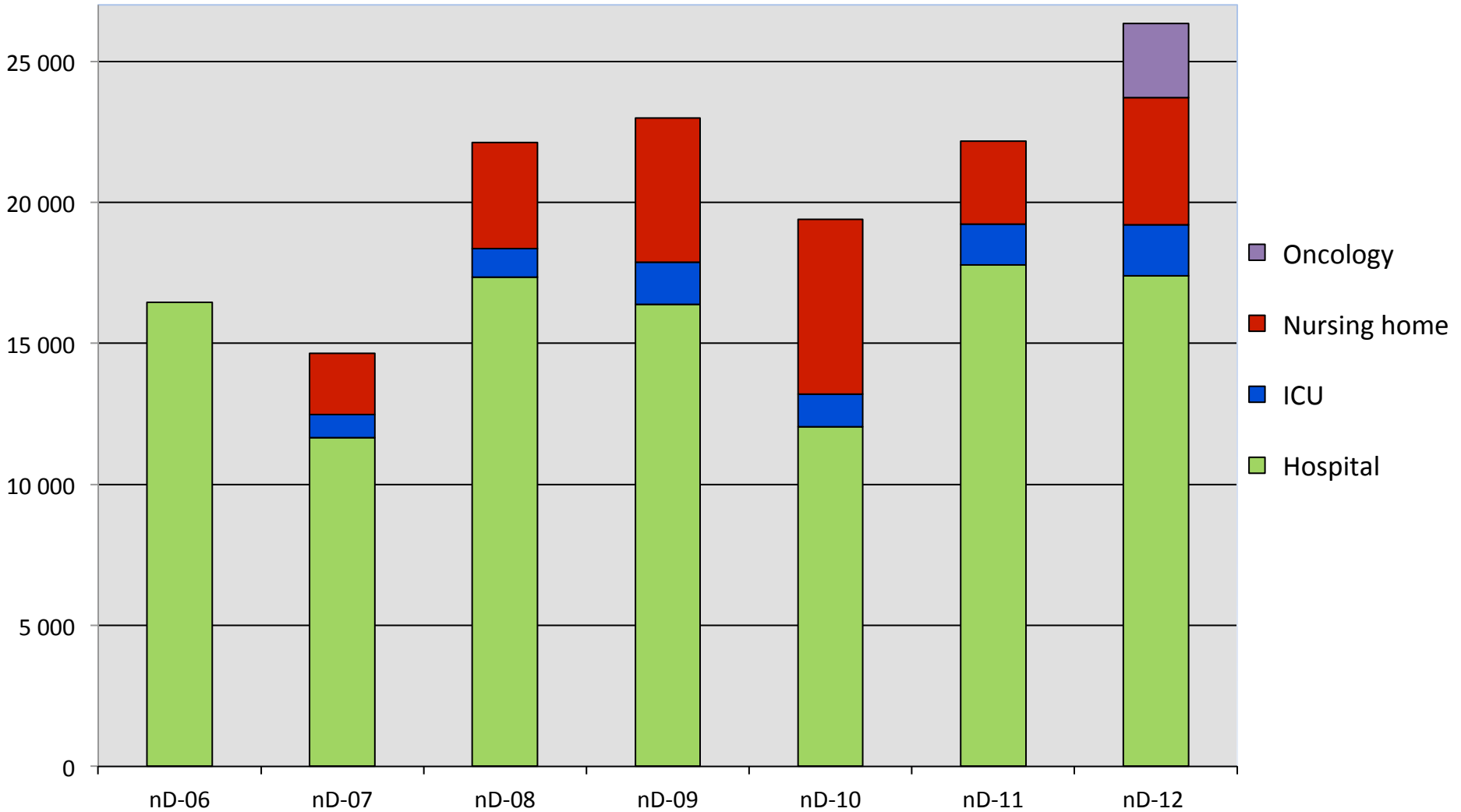




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15 1 6 17

# Évolution au fil des années



# nutritionDay participation 2012

Last update:  
8th May 2013



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17389 PATIENTS

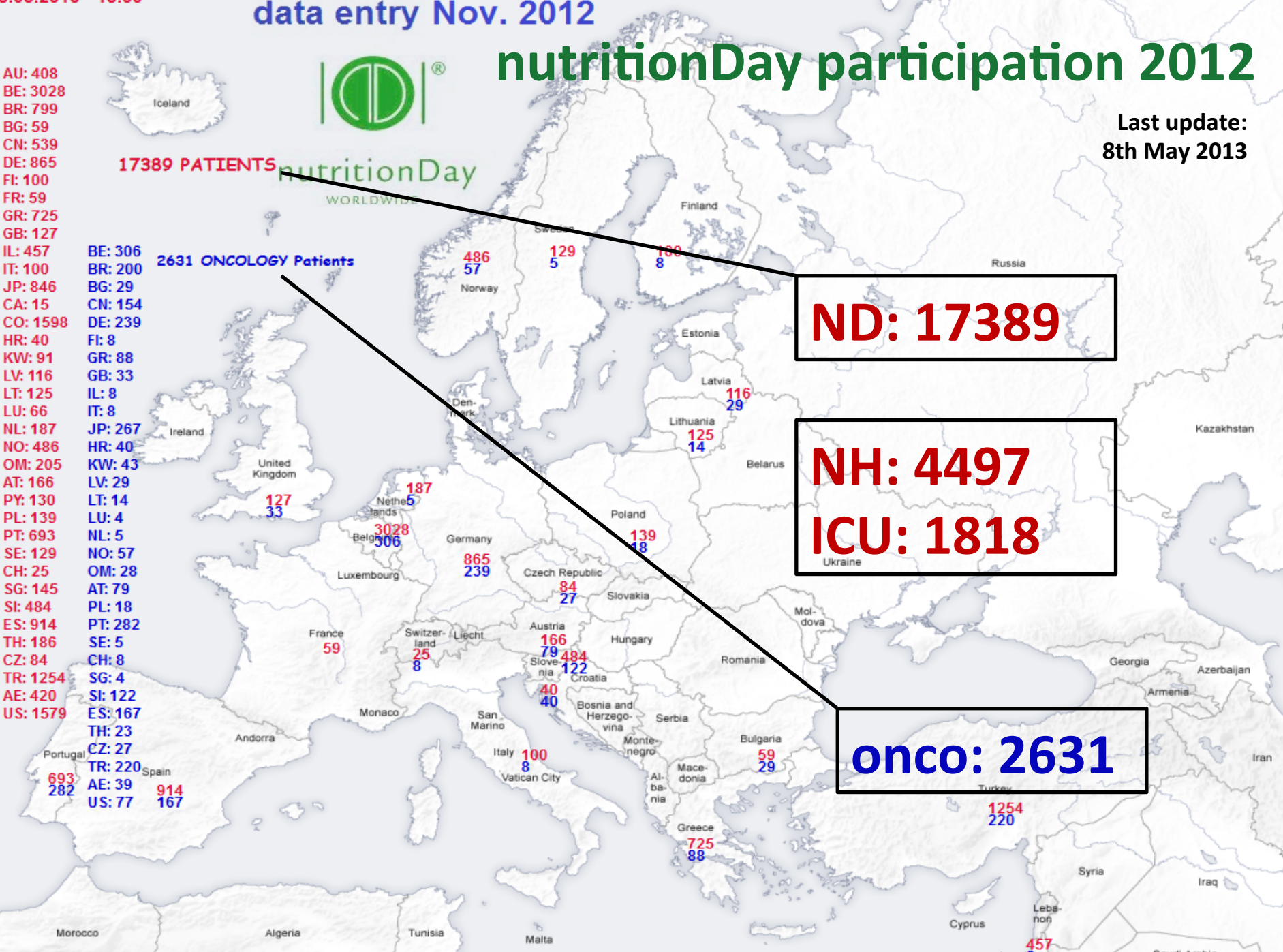
2631 ONCOLOGY Patients

**ND: 17389**

**NH: 4497**  
**ICU: 1818**

**onco: 2631**

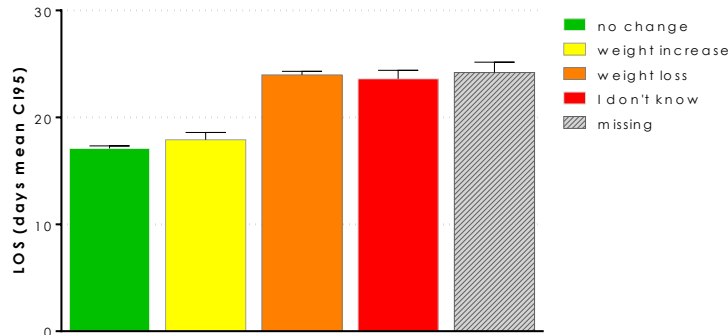
- AU: 408
- BE: 3028
- BR: 799
- BG: 59
- CN: 539
- DE: 865
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- FR: 59
- GR: 725
- GB: 127
- IL: 457
- IT: 100
- JP: 846
- CA: 15
- CO: 1598
- HR: 40
- KW: 91
- LV: 116
- LT: 125
- LU: 66
- NL: 187
- NO: 486
- OM: 205
- AT: 166
- PY: 130
- PL: 139
- PT: 693
- SE: 129
- CH: 25
- SG: 145
- SI: 484
- ES: 914
- TH: 186
- CZ: 84
- TR: 1254
- AE: 420
- US: 1579
- BE: 306
- BR: 200
- CG: 29
- CN: 154
- DE: 239
- FI: 8
- GR: 88
- GB: 33
- IL: 8
- IT: 8
- JP: 267
- HR: 40
- KW: 43
- LV: 29
- LT: 14
- LU: 4
- NL: 5
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- TR: 220
- AE: 39
- US: 77
- US: 167



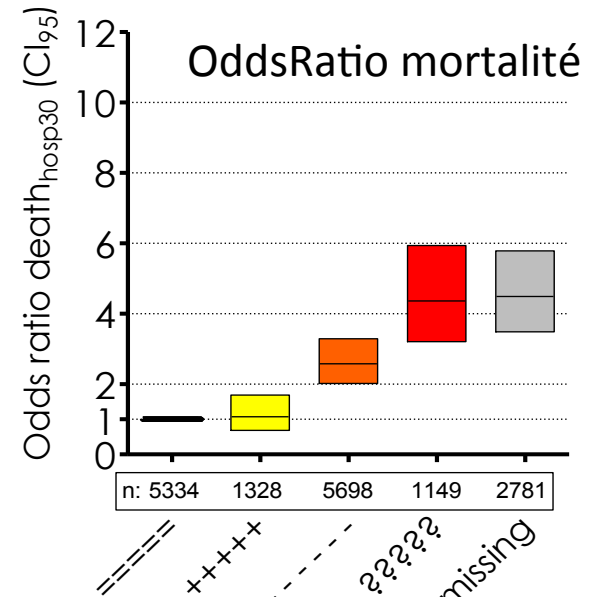
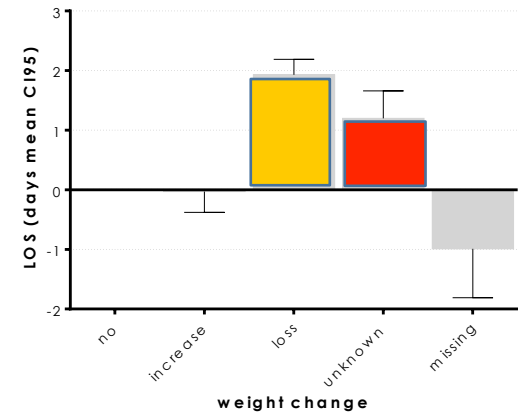


# poids – les derniers 3 mois

durée de séjour

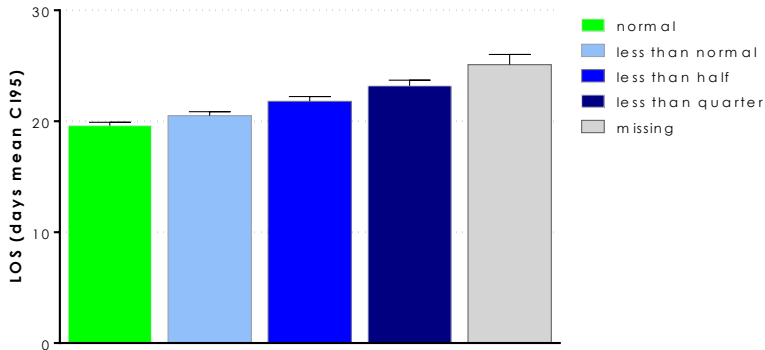


durée de séjour relative

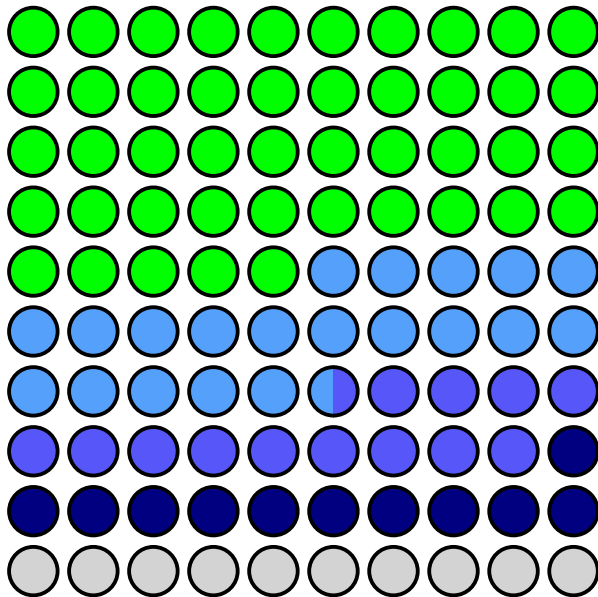
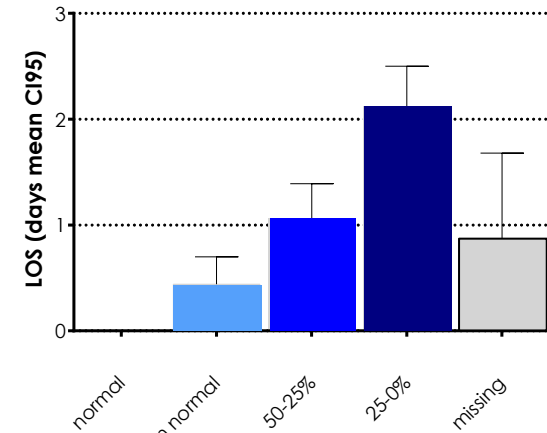


# manger 1 semaine avant ND

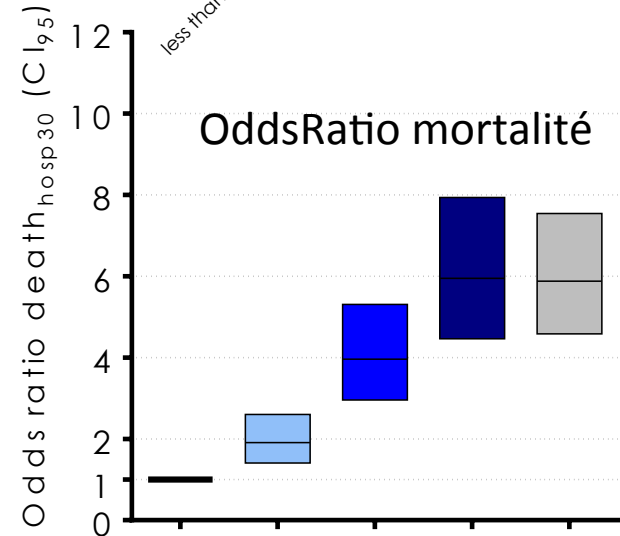
durée de séjour



durée de séjour relative

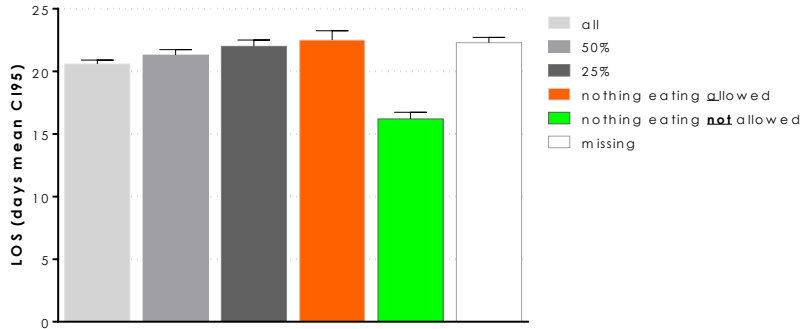


- normal
- less than normal
- less than half
- less than quarter
- missing

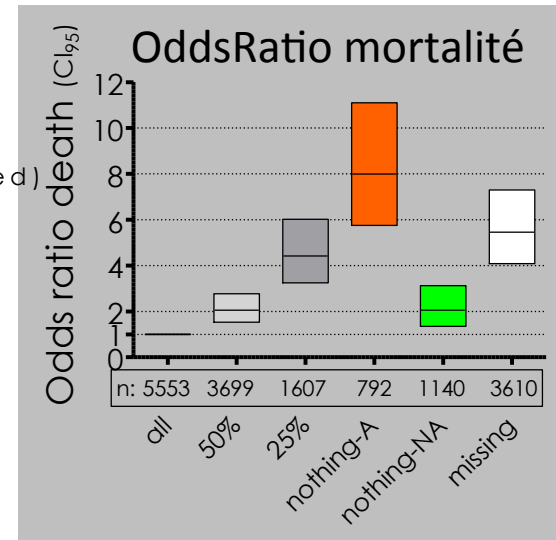
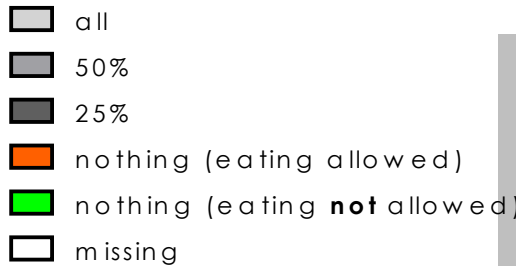
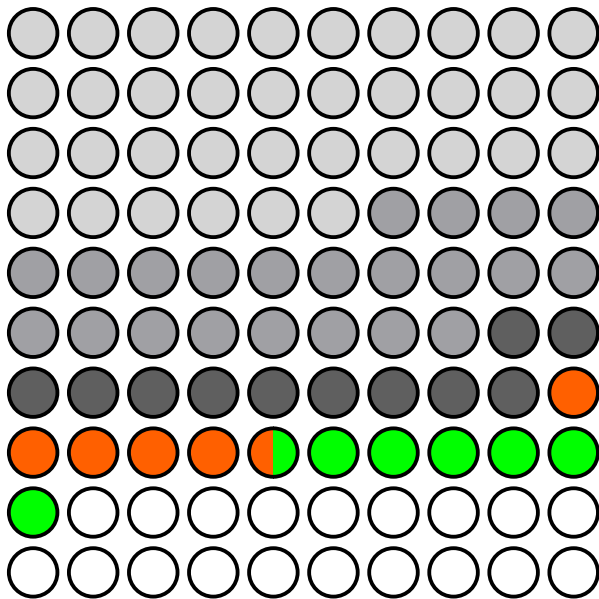
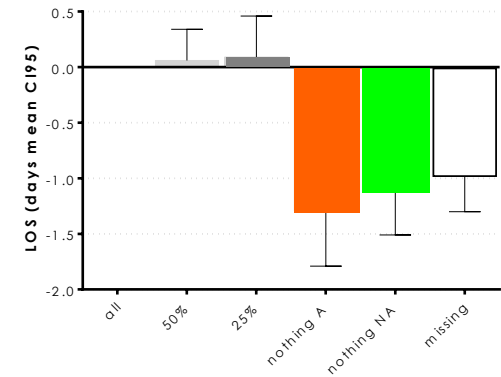


# ingesta - nutritionDay

durée de séjour

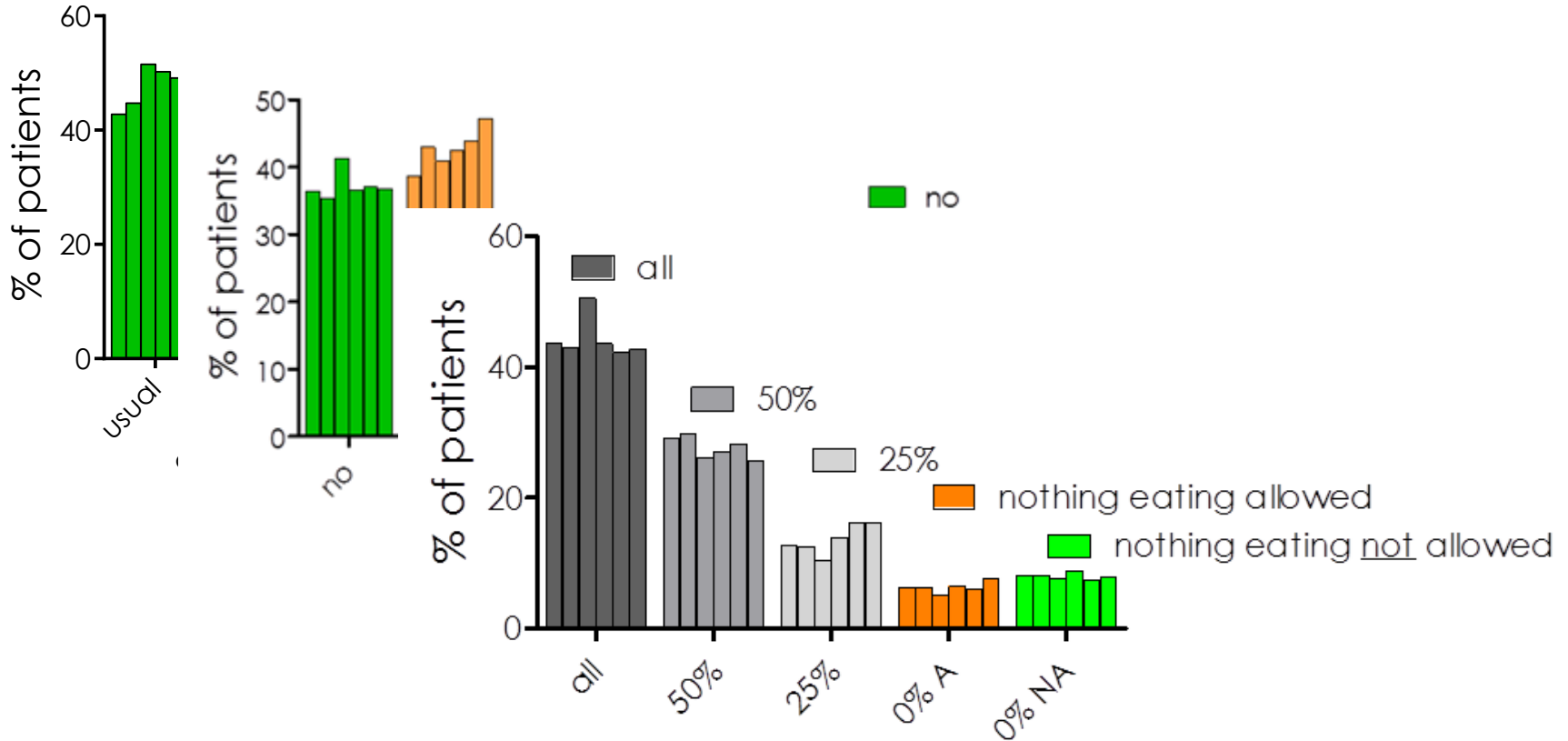


durée de séjour relative



# D'une année à l'autre

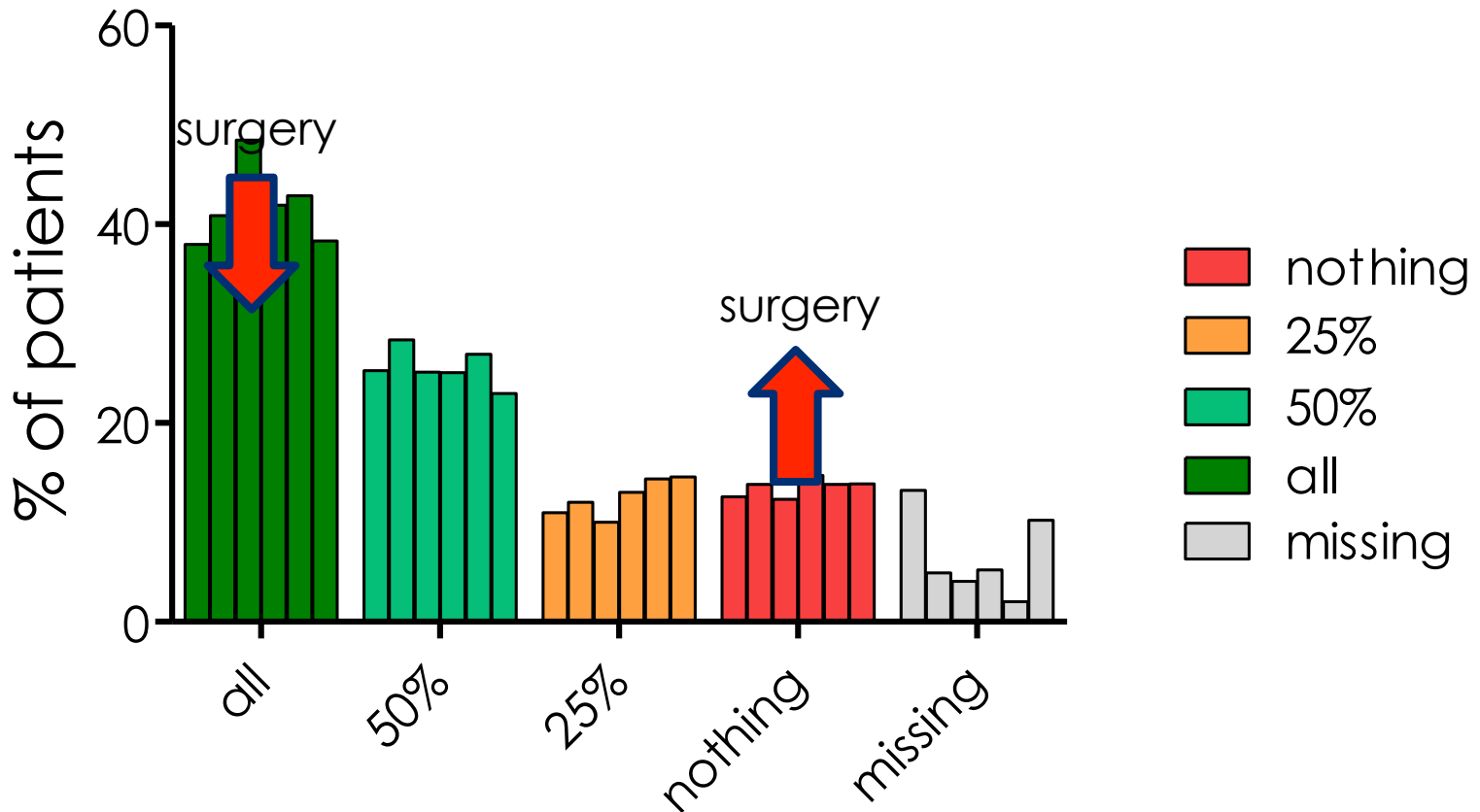
last week eating



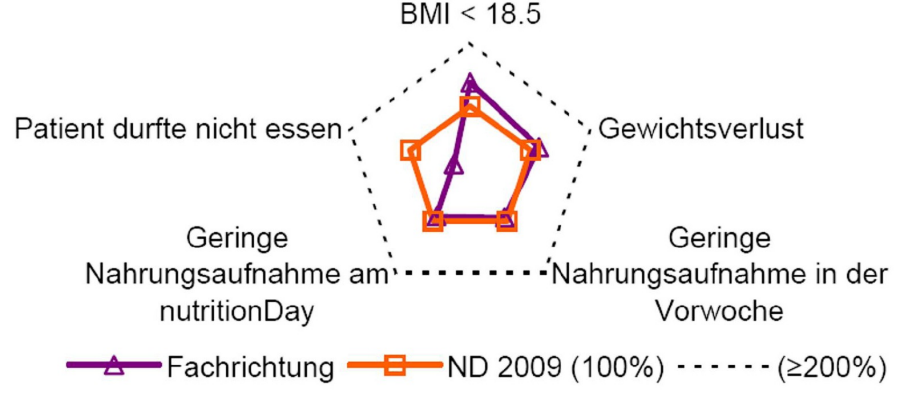


# Repas de midi à l'hôpital

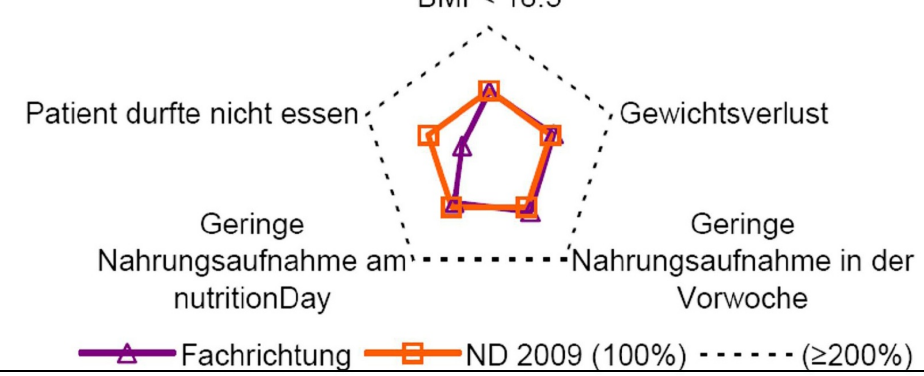
lunch eaten (2006-2011)



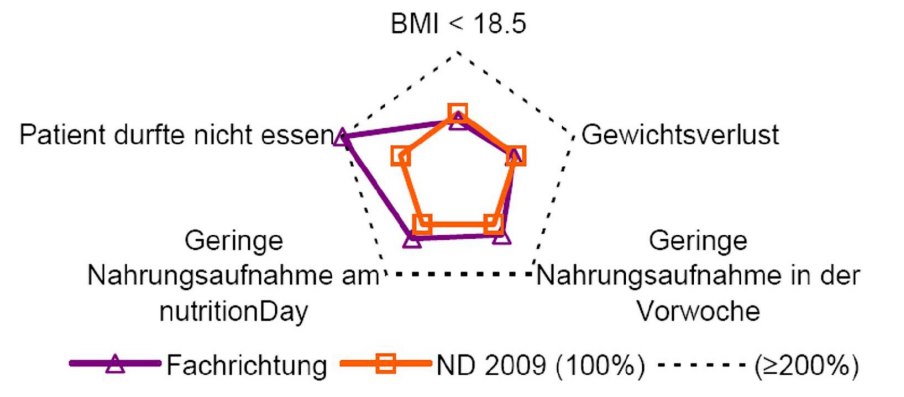
# GERIATRIE



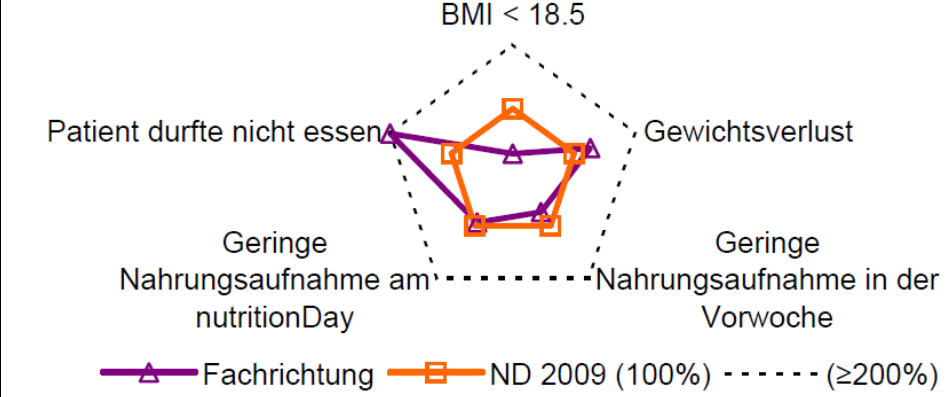
# MEDECINE INTERNE



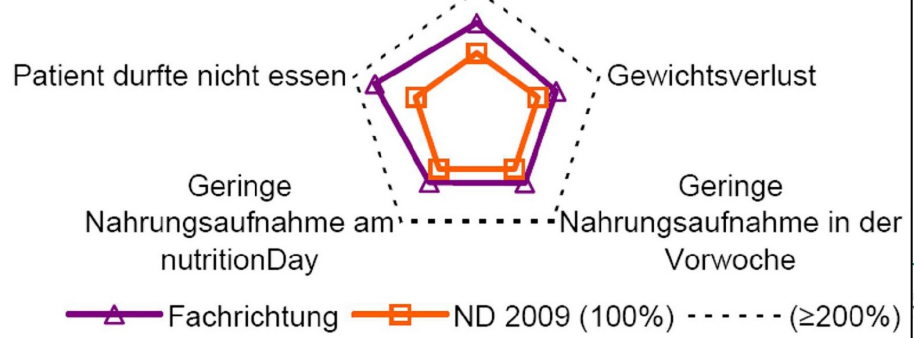
# CHIRURGIE



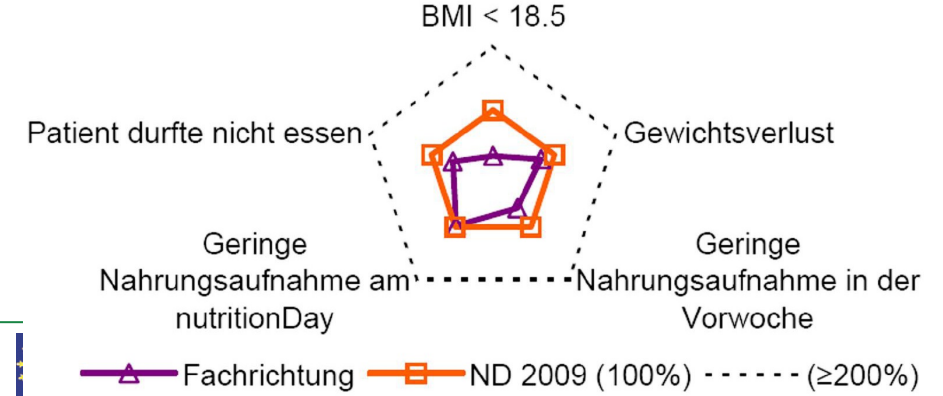
# CHIRURGIE CARDIOTHORACIQUE



# GASTROENTERO- und HEPATOLOGIE



# CARDIOLOGIE









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# nutrition **preoperative!!!**

**chirurgie**

**ND reference**

## Lunch intake (n):

 All	184 (38.0%)	4120 (43.4%)
 1/2	95 (19.6%)	2597 (27.4%)
 1/4	61 (12.6%)	1423 (15.0%)
 Nothing	129 (26.7%)	1198 (12.6%)
? No answer	15 (3.10%)	149 (1.57%)

## „I did not eat everything because” (n)\*:

I was not hungry	67 (22.3%)	1629 (30.4%)
I had nausea / vomiting	17 (5.67%)	523 (9.74%)
I was not allowed to eat	78 (26.0%)	479 (8.92%)
I kann not eat without help	1 (0.33%)	88 (1.64%)
I had an examination / surgery	58 (19.3%)	326 (6.07%)

**Des facteurs à modifier!**



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# Postoperative nutrition

**chirurgie**

**ND reference**

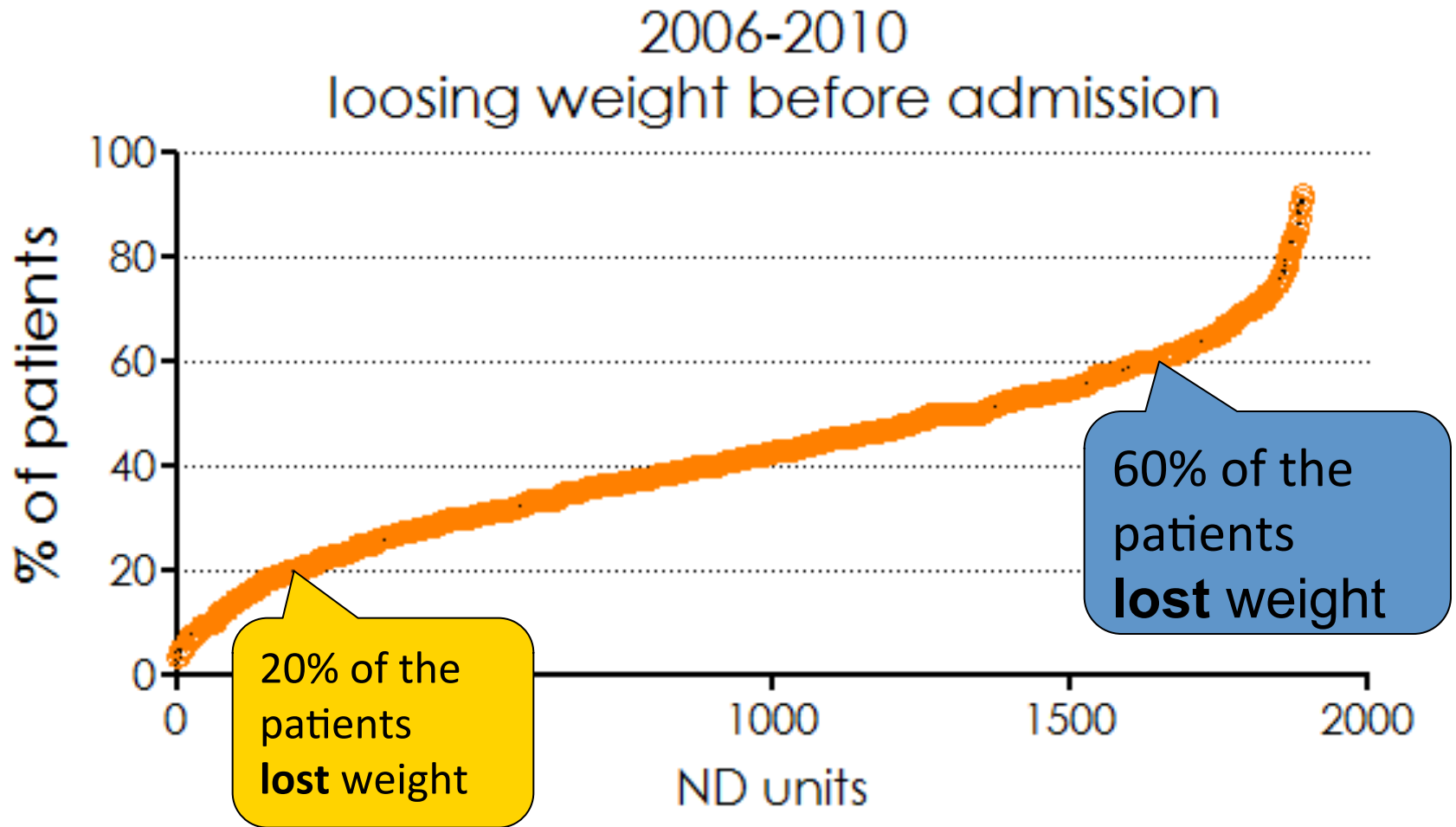
## Lunch intake (n):

	All	703 (36.6%)	4639 (42.5%)
	1/2	483 (25.1%)	2985 (27.3%)
	1/4	322 (16.8%)	1684 (15.4%)
	Nothing	375 (19.5%)	1444 (13.2%)
	No answer	38 (1.98%)	172 (1.57%)

## „I did not eat everything because” (n)\*:

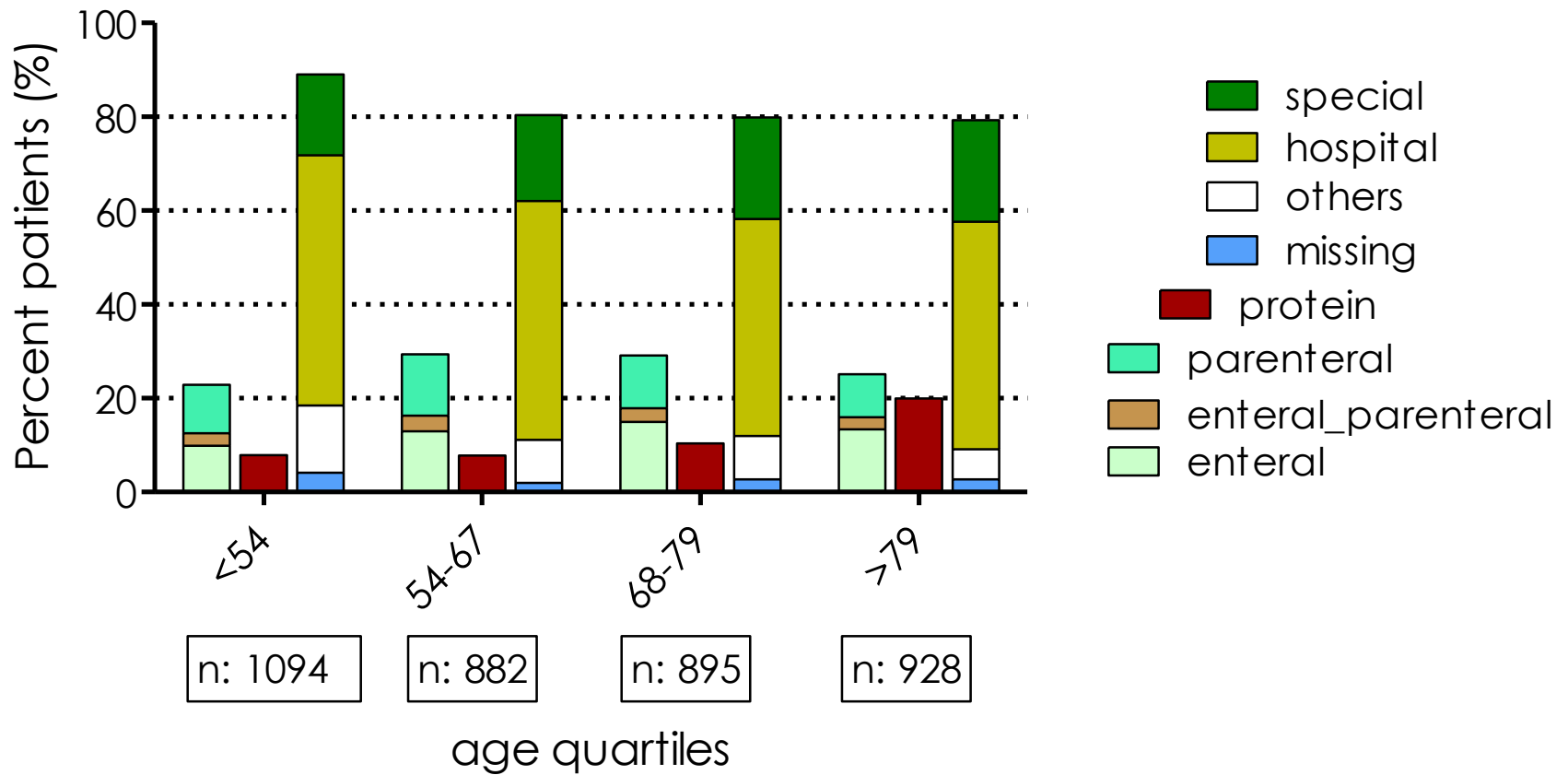
	I was not hungry	359 (29.5%)	1921 (30.6%)
	I had nausea / vomiting	129 (10.6%)	635 (10.1%)
	I was not allowed to eat	198 (16.3%)	599 (9.53%)
	I kann not eat without help	12 (0.99%)	99 (1.58%)
	I had an examination / surgery	97 (7.96%)	365 (5.81%)

# Perte de poids dans les unités!



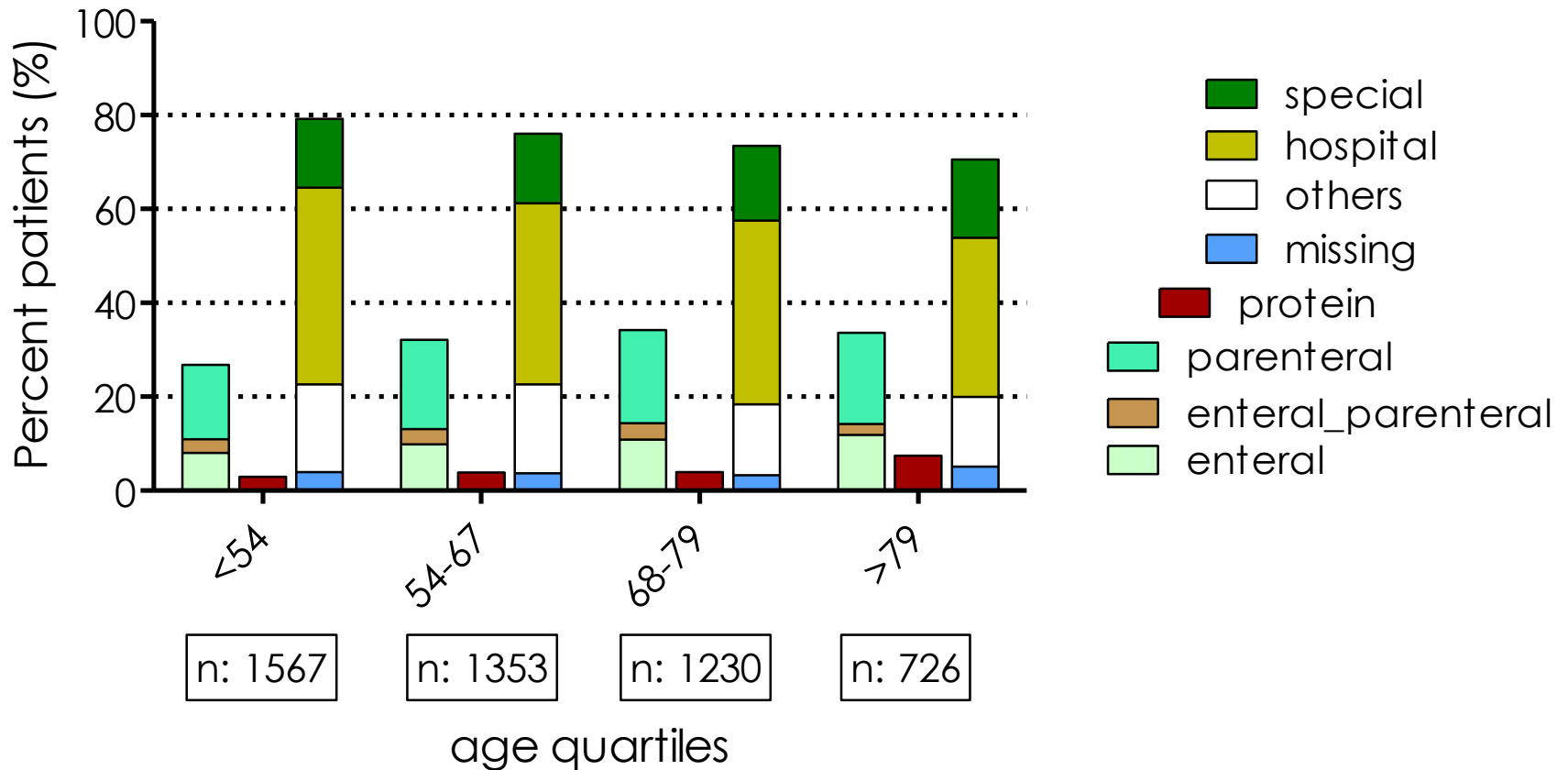
# Tx nutritionnel si je ne mange rien ?

## Nutrition Therapy not eating, eating allowed



# Et si manger c'est non?

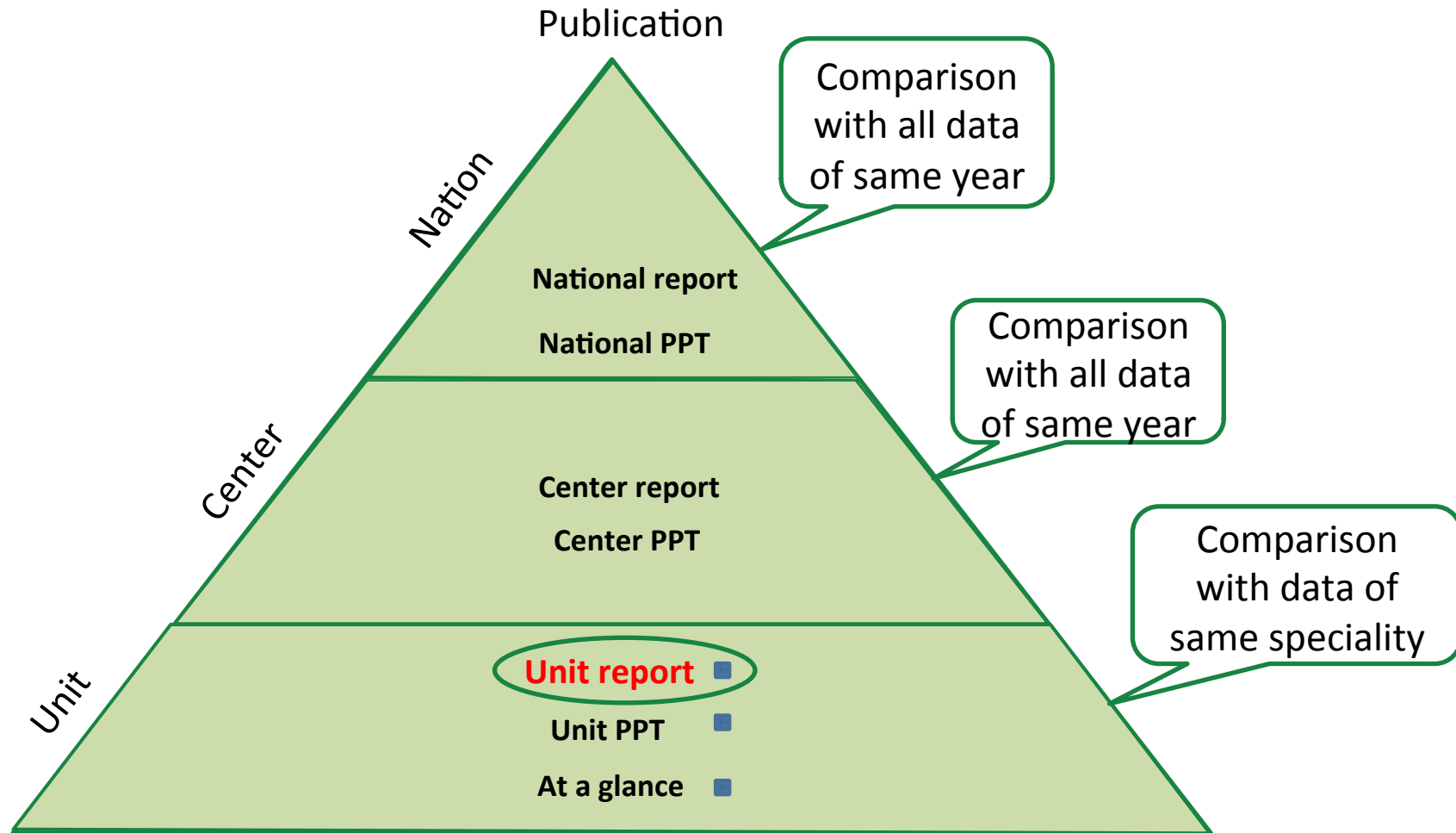
## Nutrition Therapy not eating, eating not allowed



# Le retour: des rapports ?



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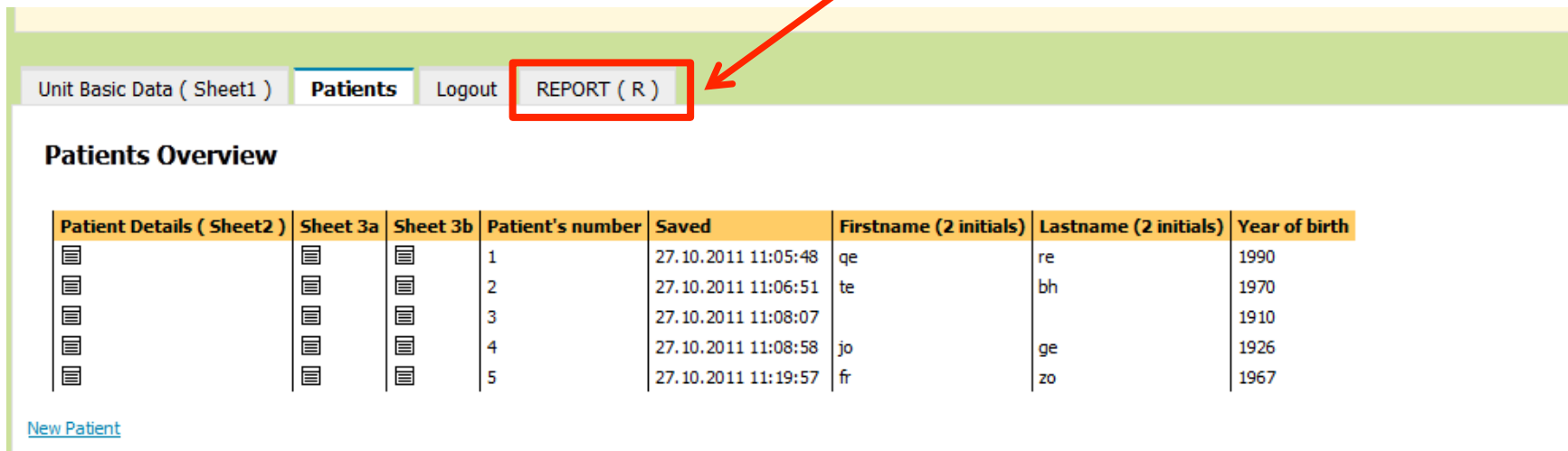


Hierarchy of nD Reports



# Comment recevoir mon rapport?

- dès qu'il y a des datas „REPORT“ existe
- Sélectionnez „REPORT“



Unit Basic Data ( Sheet1 ) Patients Logout **REPORT ( R )**

### Patients Overview

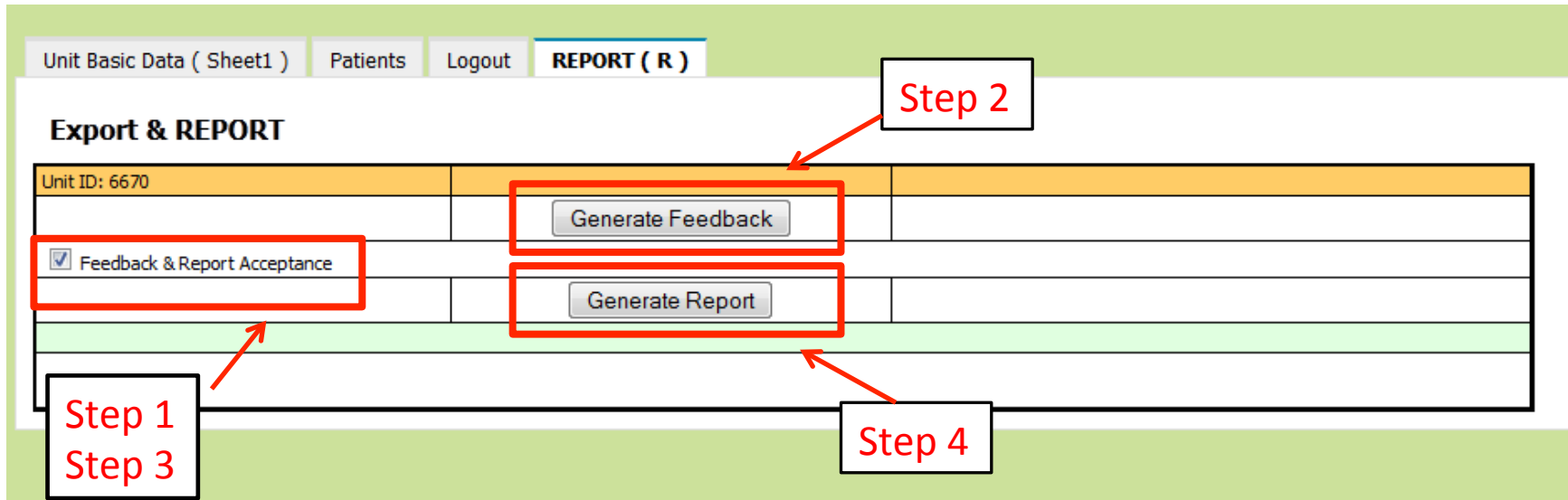
Patient Details ( Sheet2 )	Sheet 3a	Sheet 3b	Patient's number	Saved	Firstname ( 2 initials )	Lastname ( 2 initials )	Year of birth
			1	27.10.2011 11:05:48	qe	re	1990
			2	27.10.2011 11:06:51	te	bh	1970
			3	27.10.2011 11:08:07			1910
			4	27.10.2011 11:08:58	jo	ge	1926
			5	27.10.2011 11:19:57	fr	zo	1967

[New Patient](#)

# et mon rapport final?

To download your unit report you have to

- Step 1: Select „Feedback & Report Acceptance“
- Step 2: Select „Generate Feedback“ → download „feedback report file“ (pdf) → check and correct possible mistakes in your data entry
- Step 3: Again select „Feedback & Report Acceptance“
- Step 4: Select „Generate Report“ → download „Report file“ (pdf) → your unit report can be downloaded as often as you wish



Unit Basic Data ( Sheet1 ) Patients Logout **REPORT ( R )**

**Export & REPORT**

Unit ID: 6670	Generate Feedback	Generate Report
<input checked="" type="checkbox"/> Feedback & Report Acceptance		

Step 1  
Step 3

Step 2

Step 4

# Comment lire mon rapport final?



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Le rapport a 3 colonnes:

Name and short description

Unit results

Reference data of same specialty

## I. DESCRIPTION OF THE UNIT ("Sheet 1"):

Main patient group admitted: Others

(44 units, 582 patients)

**YOUR RESULTS**

**REFERENCE ND-10**

### Number of beds (n):

Actual	9	20 [7-140]
Maximum	17	26 [11-140]

### Number of patients on the nutritionDay (n):

Total	10	582
Did not give consent	-	48 (8.25%)
Needed help completing form	1 (10.0%)	248 (42.6%)
Terminally ill	-	19 (3.26%)

# Comment interpréter le rapport?



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- Les malades
  - représentatifs?
  - critères qualité
- Organisation et structure
- Démographie
- Historique alimentaire
- Risque nutritionnel
- Interventions nutritionnelles

# Echantillon représentatif?

## Unit A:

Number of patients on nutritionDay:	20
Number of patients completing Sheet 3a:	4
Number of patients completing Sheet 3b:	4



## Unit B:

Number of patients on nutritionDay:	25
Number of patients completing Sheet 3a:	21
Number of patients completing Sheet 3b:	20





# Malades consentants?

**Unit B**

Number of patients on nutritionDay:	25
Number of patients completing Sheet 3a:	21
Number of patients completing Sheet 3b:	20



DESCRIPTION OF THE UNIT ("Sheet 1")	UNIT RESULTS	REFERENCE RESULTS
<b>Number of beds (n):</b>		
Actual	16	25 (7-50)
<b>Number of patients on the nutritionDay (n):</b>		
Total	16	759
Did not give consent	4 (27.5%)	102 (12.9%)
Needed help completing form	-	352 (44.6%)
Terminally ill	-	33 (4.18%)
<b>Staff /Staff per patient (n):</b>		
Physicians	2	6.00 ± 5.84
Physicians per patient	0.13	0.20 ± 0.23
Consultants	1	3.00 ± 2.70
Consultants per patient	0.06	0.07 ± 0.10
Registered nurses	1	1.47 ± 1.89
Registered nurses per patient	0.06	0.06 ± 0.11
Nurses	7	6.12 ± 6.53
Nurses per patient	0.44	0.26 ± 0.17
Nursing aides	-	2.40 ± 2.45
Nursing aides per patient	-	0.08 ± 0.08
Dieticians and dietic assistants	-	1.02 ± 1.19
Dieticians and dietic assistants per patient	-	0.03 ± 0.04
<b>Nutrition Care:</b>		
Nutrition Team	YES	26 units (68%) YES
Written procedures		
- individual	?	24 units (60%) YES
- local	?	15 units (38%) YES
- national	?	13 units (33%) YES
- other	?	7 units (18%) YES
<b>Patients' weight assessed:</b>		
On admission	NO	27 units (68%) YES
When requested	YES	24 units (60%) YES
Once a week	NO	12 units (30%) YES
Occasionally	NO	9 units (23%) YES
Never	NO	- units (0%) YES



Number of patients on the nutritionDay (n):	Total	25	175
Did not give consent	1	4.00%	29 (16.6%)
Needed help completing form	11	44.0%	77 (44.0%)
Terminally ill	4	16.0%	7 (4.00%)

**Reference data**



## Unit A

### Number of patients (n):

Total	41	1748
Patients who completed sheet 3a	41 (100%)	1438 (82.3%)
Patients who completed sheet 3b	41 (100%)	1391 (79.6%)

### Demographic data:

Age (years)	73 [29-93]	66 [17-99]
Female gender	23 (56.1%)	837 (47.9%)
Weight (kg)	66.0 ± 12.2	70.6 ± 20.0
Height (cm)	158.1 ± 7.7	166.1 ± 10.1
BMI (kg/m <sup>2</sup> )	26.4 ± 4.6	25.3 ± 6.1

## Unit B

### Number of patients (n):

Total	17	941
Patients who completed sheet 3a	17 (100%)	753 (80.0%)
Patients who completed sheet 3b	17 (100%)	727 (77.3%)

### Demographic data:

Age (years)	65 [22-96]	69 [20-99]
Female gender	7 (41.2%)	403 (42.8%)
Weight (kg)	71.3 ± 16.2	67.6 ± 17.0
Height (cm)	178.0 ± 12.1	166.4 ± 10.3
BMI (kg/m <sup>2</sup> )	22.5 ± 4.8	24.3 ± 5.1

# Critères qualité?

- 60% of patients present on nD completed sheets
- 80% outcome evaluation



nD  
certificate

Final unit report

Internal medicine / general

Dear participant, June 2010

Thank you for your participation in nutritionDay worldwide 2010 and for your effort. We are now able to present you your final unit report of the following sample size:

Number of patients on nutritionDay:	39
Number of patients completing Sheet 3a:	37
Number of patients completing Sheet 3b:	35

Your unit report reference group is based on data of your main speciality (Internal medicine / general) from nutritionDay 2010.

The report consists of 3 parts:  
Part I reflects the organisation and the structure of the unit.  
Part II describes the patients according to questionnaire "sheet 2".  
Part III is the summary of information on nutrition given by the patients according to sheet 3a and 3b.

You will find some explanations how to read and interpret the data on the next page.

Michael Hiesmayr Karin Schindler Johanna Tripamer

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Number of patients on nutritionDay:	25
Number of patients completing Sheet 3a:	21
Number of patients completing Sheet 3b:	20





# Certificate

## *Unit (Institution)*

has participated in *year*  
in the annual worldwide hospital/nursing home nutrition benchmarking programme  
and fulfilled criteria to obtain this certificate.

This unit has contributed information to maintain and improve the quality of nutrition care  
in nutritionDay in hospitals worldwide.

**nutritionDay** is a 1-day audit which allows comparison between similar  
units/nursing homes and supports knowledge and awareness about nutrition care  
for hospital patients/residents.

[www.nutritionday.org](http://www.nutritionday.org)

## *Date of nutritionDay*



Prof. Dr. Michael Hiesmayr  
(Project Leader)

Prof. Pierre Singer  
(ESPEN Chairman)

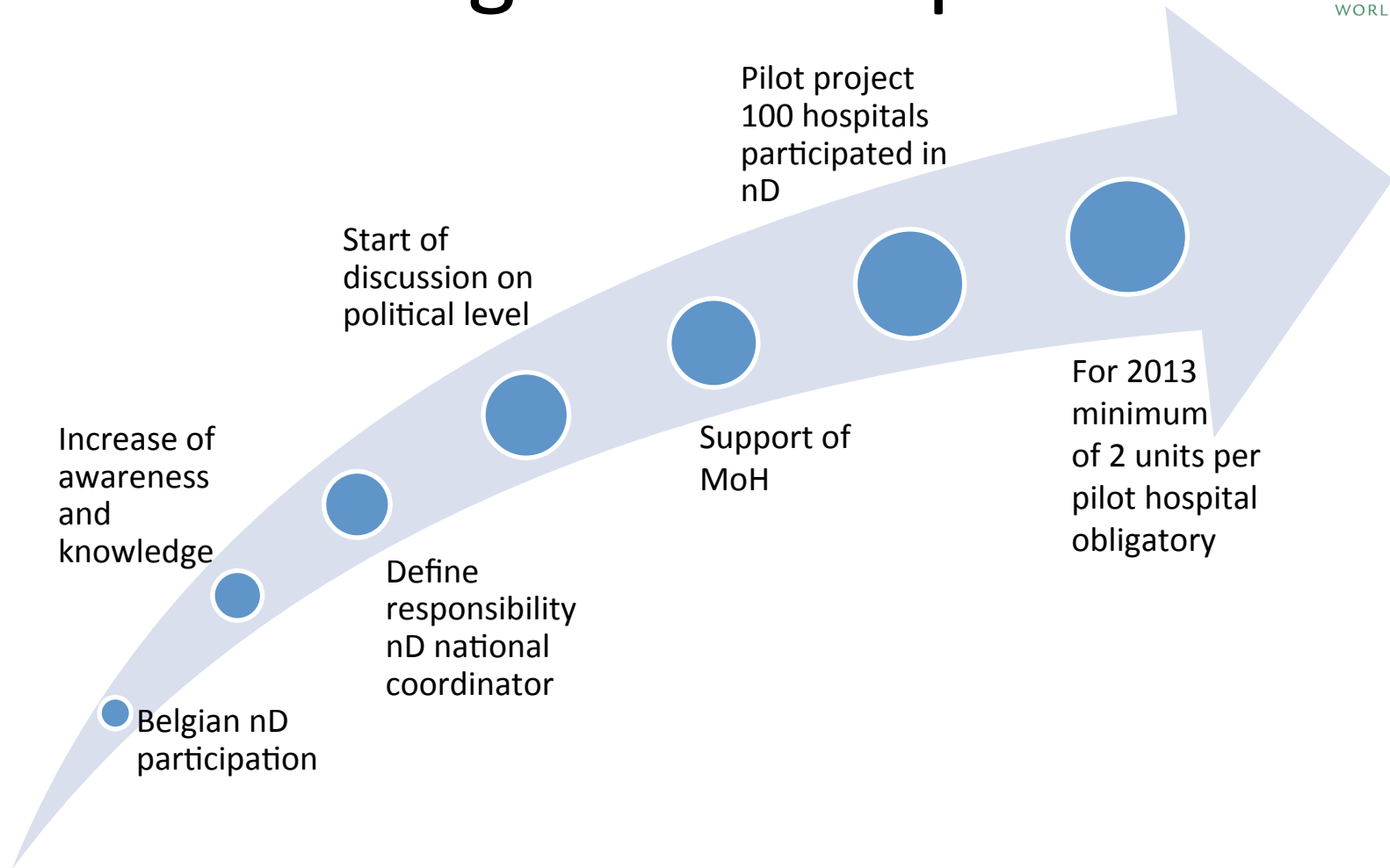
Dr. Karin Schindler  
(Project Coordinator)

Sigrid Kosak, MA  
(Project Manager)

nutritionDay is a joint project of the European Society for Clinical Nutrition and Metabolism, the Medical University of Vienna,  
the Austrian Society of Clinical Nutrition and national societies for clinical nutrition.



# Belgium Example



“ **Bien manger**  
est un **plus** pour la santé”



Ne sous-estimons pas une perte de poids involontaire et une perte d'appétit :  
**Restons tous vigilants !**

Cet hôpital se préoccupe de l'alimentation et du support nutritionnel des patients.  
Cet hôpital a une équipe nutritionnelle pluridisciplinaire.

Avec le soutien de la société belge de nutrition clinique et de la Vlaamse Vereniging voor Klinische Voeding en Metabolisme



# COMMENT DÉTECTER UN ÉTAT DE DÉNUTRITION ?

Etat nutritionnel

Impact

Etat général du patient



Agir

- Dépistage systématique, simple et reproductible.
- La prise en charge améliore le devenir du patient.



Quand ?

- Avant ou dès l'admission à l'hôpital :
- Dépistage.
  - Prise en charge rapide.



Comment ?

- Contrôler le poids.
- Signaler une perte de poids.
- Calculer le BMI (indice de masse corporelle) BMI = Poids (kg) / Taille<sup>2</sup> (m).
- Questionnaire d'évaluation du risque nutritionnel (NRS, MNA, MUST, ...).



Evaluation du risque nutritionnel  
**NRS 2002**  
Nutritional Risk Screening

1. Le BMI est-il inférieur à 20,5 ?
  2. La prise alimentaire a-t-elle diminué au cours de la semaine précédente ?
  3. Y a-t-il une perte de poids récente involontaire lors des six derniers mois ?
  4. Le patient est-il gravement malade ?
- Si une des réponses est positive, une évaluation nutritionnelle complète s'impose.

NutritionDay  
participation  
2014-2017-2008-2011  
Chirurgie - 2 centres  
111 contacts/année - 1013 patients

- Collaborating Partners
- Contributing Centers



Pourquoi ?  
[www.nutritiveday.org](http://www.nutritiveday.org)

RESULTATS D'UNE ETUDE EUROPEENNE\* :

- 40 % des patients perdent du poids avant l'admission à l'hôpital
  - 50 % des patients perdent l'appétit avant l'admission à l'hôpital
  - 55 % des patients mangent moins à l'hôpital
  - 8 % des patients dénutris décèdent en cours d'hospitalisation
- \* Hiesmayr H et al, Clinical Nutrition, 2009

Pour ceux qui veulent en savoir plus : contacter l'Equipe Nutrition de votre hôpital ou consulter l'un des sites suivants :  
[www.monplannutrition.be](http://www.monplannutrition.be) ou [www.abnursing.ugent.be/richtlijnen/voeding](http://www.abnursing.ugent.be/richtlijnen/voeding)

Avec le soutien de la Société Belge de Nutrition Clinique et de la Vlaamse Vereniging voor Klinische Voeding en Metabolisme



# “Beter eten = sneller beter”

Dit ziekenhuis houdt zich bezig met de voeding en de nutritionele ondersteuning van patiënten. Dit ziekenhuis heeft een pluridisciplinair voedingsteam.

Met de steun van de Société Belge en de Nutrition Clinique en de Vlaamse Vereniging voor Klinische Voeding en Metabolisme

Orderschat een onvrijwillig gewichtsverlies of een gebrek aan eetlust niet, maar wees hiervoor op uw hoede!

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# Domaines d'analyse actuels?

- Epidémiologie
  - Niveau de santé et nutrition hospitalière
  - Repas et “snacks” pour les dénutris
- Analyse & standard
  - Devenir / mortalité / un score nutrition++++
  - Durée de séjour
  - ...

# Score de mortalité hospitalière

## avec nutrition

	Question / Variable	Answer categories with points	Points			
			14 <sup>1</sup>			
BOX I To be filled out by physicians/nurses	Specialty of ward	Surgery or neurology	-4			
		Other	0			
	Age <sup>2</sup>	BOX I To be filled out by the patient	<30	0		
			[30-40)	0		
			[40-50)	1		
			Can you walk without assistance?	Yes	0	
			No, only with assistance	5		
			No, I stay in bed	10		
	Days since admission	BOX I To be filled out by the patient	If YES, how far do you walk?	In the room	2	
				In the corridor	0	
			To the hospital admission area/shops	-3		
BOX II To be filled out by physicians/nurses	Disease(s) (if possible)	BOX II To be filled out by the patient	Have you lost weight unintentionally within the last 3 months?	0-4 kg	0	
				5-10 kg	1	
				> 10 kg	2	
	Patient is on parenteral nutrition or protein/enzyme supplement Fluid status	BOX II To be filled out by the patient	How well have you eaten during the last week?	Normal	0	
				Less than normal	2	
				Less than half of normal	4	
					Less than a quarter to nearly nothing	5
			Please tick a circle for dinner to indicate how much you ate today	All	0	
				Half	4	
				Quarter	6	
Nothing	10					
	Have you eaten snacks today?	Yes	-2			



**Merci**

- Collaborating Partners
- Coordinating Centre
- Expected partners



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**bien sur vous devez en être**



**7.11.2013**

1.11.2007

contact :

**www.nutritionday.org**

A world map with a light blue background and green landmasses. A hand cursor icon is positioned over France. Several white and yellow circles of varying sizes are overlaid on the map, suggesting a global network or connectivity.

**Merci!**

**Bien que vous devez en être!**

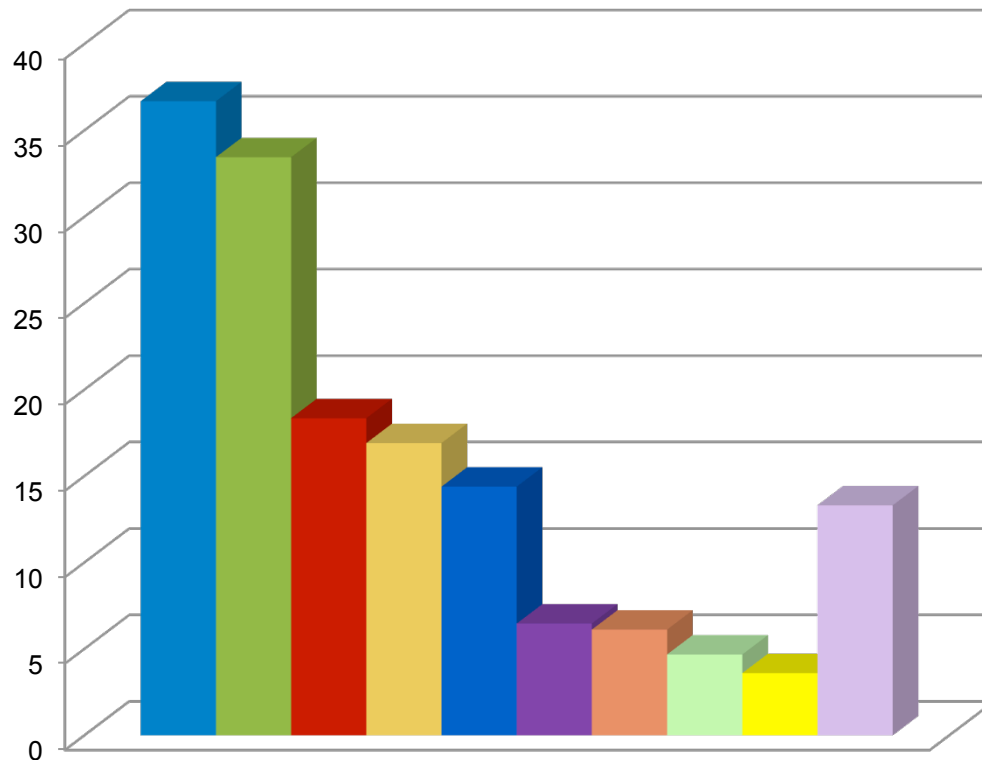
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**7.11.2013**



# nD Evaluation in hospitals and nursing homes

## In my unit nutritionDay did...



- increase interest in clin. nutr. generally
- increase awareness about malnutrition
- raise interest of administering nutrition
- establish further projects concerning nutrition
- increase usage of nutrition
- raise involvement of patients
- establish structural changes in daily routine
- create a community of participating units in my hospital
- raise involvement of relatives/families
- I don't know

# nD Evaluation in hospitals and nursing homes

## What barriers did you face during the participation process?

