



# Agreement between PG-SGA Short Form, MUST and SNAQ in hospital patients

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### **Rationale:**

The Patient-Generated Subjective Global Assessment (PG-SGA) is a validated instrument to assess malnutrition and its risk factors in clinical populations. Its patient component, the PG-SGA Short Form (SF), can be used as screening instrument.

#### Aim:

To assess agreement between the PG-SGA SF, Malnutrition Universal Screening Tool (MUST) and Short Nutritional Assessment Questionnaire (SNAQ) in patients at the University Medical Center Groningen, The Netherlands.

	MUST Low risk	MUST Medium risk	MUST High risk	Total
PG-SGA SF Low risk	50	2	1	53
PG-SGA SF Medium risk	12	3	4	19
PG-SGA SF High risk	4	2	3	9
Total	66	7	8	81

Figure 1. Agreement between PG-SGA SF and MUST

# Results:

- Prevalence of malnutrition risk by PG-SGA SF, MUST and SNAQ:
  - Low risk: 65%, 81%, and 80%
  - Medium risk: 24%, 8% and 6%
  - High risk: 11%, 10% and 14%
- Agreement between PG-SGA SF and MUST:  $\kappa$ =0.452, ICC=0.448; p<0.001
- Agreement between PG-SGA SF and SNAQ:  $\kappa$ =0.395, ICC=0.395; p<0.001
- In patients from the Departments ENT and OMS, PG-SGA SF classified more patients at medium/ high malnutrition risk (n=26) as compared to MUST (n=12) or SNAQ (n=14)

#### **Methods:**

- •81 patients from the Departments Ear Nose Throat (ENT), Oral and Maxillofacial Surgery (OMS) and Orthopedics
- Malnutrition risk: PG-SGA SF, MUST, and SNAQ
- Definition of medium malnutrition risk: PG-SGA SF=4-8, MUST=1, and SNAQ=2
- Definition of high malnutrition risk: PG-SGA SF≥9, MUST≥2, and SNAQ≥3
- Agreement: weighted kappa (κ) and intraclass correlation coefficient (ICC)
- Statistical significance: p-value < 0.05

	SNAQ Low risk	SNAQ Medium risk	SNAQ High risk	Total
PG-SGA SF Low risk	48	3	2	53
PG-SGA SF Medium risk	12	2	5	19
PG-SGA SF High risk	5	0	4	9
Total	66	7	8	81

Figure 2. Agreement between PG-SGA SF and SNAQ

# **Conclusion:**

- Only fair agreement between PG-SGA SF vs. MUST and between PG-SGA SF vs. SNAQ, respectively
- PG-SGA SF identified respectively three and four times more patients at medium malnutrition risk, compared to MUST and SNAQ, due to its scoring on symptoms and activities/functioning
- PG-SGA SF may facilitate proactive prevention of malnutrition, by identifying modifiable risk factors with known interventions (e.g. specific symptoms)



