ESPEN 2017 Abstract Submission

PREVALENCE AND FEATURES OF RISK FOR MALNUTRITION IN PATIENTS PRIOR TO VASCULAR SURGERY

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Rationale: Malnutrition is an important indicator for adverse post-operative outcomes. We aimed to assess prevalence and features of malnutrition risk, using the Patient-Generated Subjective Global Assessment Short Form (PG-SGA SF), and to test how risk relates to co-variables, i.e. smoking, Body Mass Index (BMI), comorbidities, and type of scheduled surgery. Second, we aimed to compare the prevalence of risk for malnutrition between the PG-SGA SF and the Malnutrition Universal Screening Tool (MUST).

Methods: In total, 236 patients visiting the vascular surgery outpatient clinic in 2015 were assessed for malnutrition risk by PG-SGA SF. Demographics, medical history and data on MUST were retrieved from the electronic hospital registry. Medium risk was defined as PG-SGA 4-8 points, and high risk as ≥9 points. Associations between risk for malnutrition and smoking status and BMI, were tested by Pearson Chi-Square and Mann Whitney U test. Fisher's exact was used to test difference in prevalence of risk between MUST and PG-SGA SF scores.

Results: According to the PG-SGA SF, 24% of patients were categorized as medium or high risk for malnutrition. In these patients, domain scores were highest for nutrition impact symptoms (NIS) (median 3.5; IQR: 2 to 5) and for activities and function (median 2; IQR: 1 to 3). Patients who smoke (28/87) were significantly more often at risk than non-smoking patients (29/147) (P=0.03). No differences in risk between patients with BMI <25 kg/m^2 (31/107) and BMI ≥25 kg/m^2 (26/126) were found (P=0.14). Malnutrition according to MUST was 8% (9/107).

Conclusion: Prior to vascular surgery, a substantial proportion of patients (24%) is at risk for malnutrition, which is mainly characterized by NIS and limitations in activities and function. BMI appeared to be not discriminative for risk. Prevalence of risk for malnutrition by PG-SGA SF is 3.5 times higher than by MUST.

Keywords: PG-SGA, risk for malnutrition