

Patient malnutrition reduces the chances of recovery and increases treatment costs

Malnutrition associated with disease and undernutrition negatively affects the treatment of patients in European countries. Each patient should be systematically screened, and if identified or at risk of becoming malnourished, should have access to adequate, equitable and high-quality nutritional care.

Prague, 19.5.2017 Based on recommendations by among others the European Parliament, the **Optimal Nutritional Care for All (ONCA)** campaign was launched in 2014. This is a multi-stakeholder initiative which aims to allow access to optimal nutritional care for all citizens through coordination of national plans and best practices for nutritional care in European and other countries. Malnutrition and undernutrition in Europe threaten more than 33 million adults. Patients with acute and chronic disease who suffer from malnutrition and its consequences are more costly to manage than patients with good nutritional status. The impact on health care costs has been estimated to be €170 billion per year in Europe.

Inadequate nutrition is a major problem across many patient groups, irrespective of age, disease or healthcare setting. Malnutrition reduces the chance of recovery and leads to increased incidence of complications and the loss of independence. "Malnutrition and inadequate nutritional support greatly reduce or even negate the efficacy of the often expensive therapy of the underlying disease. Inadequate nutrition also raises the patient's dependency on social care support which ultimately reduces the quality of hospital care and medical costs increase disproportionately" said Pavel Tesinsky, chairman of the Society for clinical metabolic maintenance and intensive care.

The ONCA workshop identifies best practices to achieve the necessary changes in public health and health care practice across Europe. "The key challenge is how can we translate scientific evidence and policy support into better nutrition and nutritional care in daily health care practice. In European policies, public health and health care are so called 'subsidiary' issues, meaning that member states are primarily responsible. The EU and WHO have no or only very limited operational mandate" said Frank de Man, the Secretary General of ENHA. Delegates presented the experience of individual countries and further steps to take, based on their activities and experiences to date.

The results of the regular international nutrition audit *NutritionDay*, which also took place in many Czech hospitals, show that the level of nutritional care in hospitals and long-term care facilities in the Czech Republic is comparable to the rest of the world. "There is an elevated level of nutritional risk among hospitalized patients, there is a high number of geriatric patients with low body mass index (BMI) and a high proportion of patients with substantial weight loss" explained Frantisek Novak, scientific secretary of the Society, and continues "The Czech Republic recorded a smaller number of doctors, nurses and nutritional therapists per patient. Patients from healthcare facilities are released to home care later than in other countries. An underlying problem is the underdeveloped system of patient transfer to home care (*trans care*)".

ONCA

The Optimal Nutritional Care for All program was developed with the support of the European Parliament in 2010-2011, and has been operating since 2014. It focuses on:

- improving health through prevention and health care programs
- promoting public and private sector cooperation in nutrition and health across Europe
- integrating nutrition as an integral part of health and healthcare
- creating continuous innovation by sharing good practices among European countries

Full implementation of the ONCA program will positively impact the quality of healthcare, improve patient health, and reduce healthcare costs.

Today's ONCA workshop is held under the auspices of the Committee on Health and Social Policy of the Senate of the Czech Republic in cooperation with the European Nutrition for Health Alliance and the Society for Clinical Nutrition and Intensive Metabolic Care of the Czech Medical Society JEP. The Minister of Health of the Czech Republic, Miloslav Ludvík, grants his auspices. The chairman of the meeting is Professor Olle Ljungqvist (ENHA Co-Chair and ESPEN representative) and Professor Anne de Looy (Chair of the European Federation of Associations of Dietitians and ENHA Trustee). More than 50 delegates representing 15 countries participate in the meeting.

European Nutrition for Health Alliance (ENHA)

ENHA is a multi-stakeholder platform functioning at a European level that promotes the implementation of nutrition risk screening across Europe, public awareness, partnership working, policy development and health education and training. ENHA is co-chaired by Professor Olle Ljungqvist, representing the European Society for Clinical Nutrition and Metabolism (ESPEN) and Professor Cornel Sieber, representing the European Union Geriatric Medicine Society (EUGMS) and the International Association of Gerontology and Geriatrics for the European region (IAGG). ENHA is a charity and has a board of trustees that is responsible for decision making. (www.european-nutrition.org).

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