Five Years of Progress

Sadly, for me my five year tenure as Chairman of BAPEN is coming to an end. An opportunity affords itself for me to look back on what has been achieved under my Chairmanship. In so doing, I fondly record the progress and achievements we have made which has come about as a consequence of team work amongst the different disciplines that make up our multi-disciplinary association.

Educational Initiatives

High on our list of achievements has been the progress that Education Committee have made under Pat Howard's leadership. An increasing number of Nutrition Support Teams have attended the Grasmere Course.

Many other educational initiatives have been put into place. Ann Micklewright has made enormous progress establishing the regional Representatives who in turn have moved education forward in different regions throughout the UK.

Early on, BAPEN received recognition as a Specialist Society by the Royal Colleges. Senior members of BAPEN have played important roles in inter-collegiate education initiatives and BAPEN is represented on the Standing Committee of Clinical Nutrition at the Royal College of Physicians. Importantly, BAPEN has succeeded in fostering the relationship with the Department of Health and the clinical nutrition portfolio is now carried with gastroenterology.

BANS

One of the core activities of Council has been the establishment of British Artificial Nutrition Survey (BANS) under the chairmanship of Dr Marinos Elia. Very significant progress has been made in establishing the database on all patients on artificial nutrition support in the home and the hospital. A number of important publications describing the findings have already appeared with more to come.

Communications

Throughout the greater part of my chairmanship, Mr Niall Bowen has chaired the Communications Committee. Niall and his colleagues have achieved an enormous amount in terms of increasing the awareness of all BAPEN's activities and it was at least in part, due to his foresight and energy that the Malnutrition Advisory Group was formed.

With regard to communications, I am particularly grateful to Vera Todorovic and Ann Micklewright for taking over the editorship of the BAPEN's newsletter "In Touch". Five issues have now been published. Issue No 5, in my opinion, is a masterpiece.

First Class Evidence

As a prelude to submitting evidence based data to NICE, BAPEN commissioned Dr Ceri Green to assist us in gathering evidence of the efficacy of nutritional support. Ceri wrote for us a first-class evidence based document entitled "Existence, causes and consequences of disease-related malnutrition in the hospital and the community, and clinical and financial benefits of nutritional intervention". This was published as part of Clinical Nutrition Supplement in August 1999. Dr Green is to be congratulated on the scholarly nature of the paper.

During my Chairmanship, five BAPEN reports have been published. First of these was: "Standards and Guidelines for Nutritional Support of Patients in Hospitals-". This was followed by "Current Perspectives on Parenteral Nutrition in Adults" and recently by "Current Perspectives on Enteral Nutrition in Adults".

Seminal Document

Professor John Lennard-Jones' report on "Ethical and Legal Aspects of Clinical Hydration and Nutritional Support" is a seminal document and one which Council
Five Years of Progress

D B A Silk MD FRCP
Chairman BAPEN

I hope one of my most satisfying achievements as Chairman has been to promote co-operation between BAPEN and the Industry. The formation of Main Industry Group (MIG) has enabled the close co-operation to proceed and it has been very pleasing to see MIG represented on all working parties and committees. Progress in my opinion will only continue to be made by close co-operation between multi-disciplinary workers in clinical nutrition and the industry. I would like to take the opportunity to thank our Main Industry Group for their support as well as our Organisational Affiliate Companies. 

I hope very much that before my tenure as Chairman comes to an end we will have been able to set the foundations for increasing our research output and I envisage the setting up of a Research and Science Committee to achieve this.

Help and Support

None of what we have achieved would have been possible without the help of the Officers. Ann Micklewright succeeded Prof Ivan Johnston as the Honorary Secretary. Ken Cottam worked tirelessly as our Hon Treasurer throughout my years of being associated with BAPEN. It remains for me to wish BAPEN the very best for the future. It has been an honour being associated with BAPEN.

D B A Silk MD FRCP
Chairman BAPEN

BAPEN Annual Meeting - The Cybercafe

A popular stop at the first day of the conference was the CYBERCAFE - a BAPEN initiative to connect delegates to the information superhighway 'live' from the conference.

Delegates were invited to surf the net at on-line stations, and the first 100 visitors received a computer disk containing essential web addresses for BAPEN members.

Duncan Alexander of Health

Directions is to be thanked for his tireless efforts. Without his dedicated input the event would not have been the undoubted success that it was.

KM Younger (Honorary Editor of The Nutrition Society)

Most of those involved in BAPEN will have encountered the Nutrition Society only as the publisher of the Proceedings of the Nutrition Society; of the abstracts and some symposium papers presented at BAPEN's annual meeting.

However, there is more to the Nutrition Society than this, as those who attended BAPEN 1999 discovered when they visited the Editorial Desk. The interest shown was unlike anything we had seen at previous BAPEN annual meetings.

Several delegates signed up as members of the Nutrition Society when they discovered that they would receive the Proceedings (6 issues per year) as part of their Membership Subscription (around £50), as well as reduced subscriptions to the other journals.

Other benefits of membership include being able to attend the meetings organized by the Nutrition Society each year for a modest Registration fee (less than £50) with low accommodation and other costs; the Society is a registered charity and hence does not expect to make profit from its members.

Student members get an even better deal as their Subscription is only £10, and they get all the above plus the chance to claim a bursary of up to £60 to attend Nutrition Society meetings.

Most members of the Nutrition Society find the opportunity to attend meetings and meet others interested in the same field to be the best thing about being in the Society. The fields of interest included in the remit of the Nutrition Society cover everything from micronutrients to nutrition and behavior, together with clinical metabolism, public health, reproduction and development, macronutrients, and animal nutrition and metabolism.

Meetings are often held jointly with other learned societies such as the Association for the Study of Obesity, the British Society for Immunology, or indeed, BAPEN. The Nutrition Society was started over 50 years ago in order to run and publish its own meetings, and this role has been expanding ever since as the needs and interests of the membership have changed and developed.

Education is seen as an important area to be expanded, and the Nutrition Society is engaged in commissioning and publishing four new undergraduate texts, including one on Clinical Nutrition,
has down-loadable membership forms and links with the publisher of the four journals, CABI. The widening role of clinical nutrition along with an increasing emphasis on research means that many members of BAPEN would benefit from the scientific and other areas of expertise offered by the Nutrition Society, so do take a look!

A further reason for visiting the Nutrition Society website relates to the handling of the short Original Communications (OC’s) presented at meetings. As described in revised ‘Directions’ (available from the website), these are now to be submitted, edited and printed entirely from disk, which should make life easier for everyone in the long run, we hope!

Thus authors, having prepared their OC (using either of the most widely-used Windows programs, Word or Wordperfect) will simply mail the disk with their submission and copyright assignment forms, and the technical

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Nutritional Support
The search for evidence!

Nutritional support in patients who are critically ill was a major theme of the 1999 meeting. Opening the BAPEN Symposium “Nutritional Support-The search for evidence”, Dr Barry Jones, Consultant Gastroenterologist, Russells Hall Hospital, Dudley, stressed the importance of evidence based medicine, however he reminded delegates “It is not only what, or how much we know, but what we put into practice that determines outcome.”

Oral nutritional supplements produce clinical benefits - including functional benefits - in many patients with chronic conditions, according to research dietician Dr Rebecca Stratton, and Dr Marinos Elia, University of Cambridge.

A critical, systematic review of the existing literature suggested that oral nutritional supplements produce clinical benefits, including functional benefits, but the nature and extent of these benefits varies with the underlying chronic condition.

Immunonutrition, came under scrutiny by Dr Richard Beale, Director of Intensive Care, Guys Hospital, London. He proposed that there may be a sound rational basis for using food supplements such as Impact to modify the patient’s immune system.

“We know that many critically ill patients are malnourished and that malnutrition is associated with immune depression..., we also know that the biological response to dietary nutrients is powerful and complex and that the effects of giving nutrients (such as arginine,glutamine, fatty acids and nucleotides) may be both physiological and pharmacological," he said.

Studies show that immunotherapy can significantly reduce risk of infection, length of hospital stay and ventilator days, for treated versus control patients.

More recently interest had grown in the concept of perioperative immunonutrition. “If there is good evidence for immunomodulation of the surgical stress response with post-operative feeding, why not give these immune enhancing diets before planned major surgery?” said Dr Beale.

Research to date seemed to confirm the benefit of earlier studies with effects on infectious complications, reductions in hospital stay and cost savings. The results of ongoing studies were eagerly awaited, said Dr Beale.

News & Reports from BAPEN 1999
by Ian Mason, Freelance Journalist

BAPEN’s four question nutrition screening tool (weight, height, recent dietary intake and unintentional weight change) is an effective tool for identifying patients with a nutritional problem.

Although less sensitive at categorising nutritional status, the tool significantly increased the dietetic referral rate when all nurses on the medical admissions ward were trained to use it, said Elizabeth Weekes, from the Department of Nutrition and Dietetics St. Thomas’ Hospital, London.

They speculate that more intensive nutritional intervention on the ward, might improve nutritional status and post-discharge quality of life.

Careful selection of patients for percutaneous endoscopic gastrostomy via a pre-specified protocol improves short term mortality in those undergoing invasive procedures, according to an audit by dietitian Nicola Assassa and colleagues at Edinburgh’s Royal Infirmary.

Dietitians have to get out into the community and give GPs and other primary care workers some "essential" training to cut inappropriate prescribing of nutritional supplements, according to Kent and Surrey dietitians.

There were no changes in cellular immunity, as measured by lymphocyte subset numbers, in ulcerative colitis patients receiving omega-3 essential fatty acids, reported researchers from Aberdeen Royal Infirmary’s Division of Gastrointestinal Surgery.

With home enteral tube feeding increasing at 20% per annum, concern has been expressed about the appropriateness of Percutaneous Endoscopic Gastrostomy (PEG) and the impact of large numbers on community services.

However, according to an audit by Barbara Abrahams, a dietitian at London’s Central Middlesex Hospital, PEGs are being placed appropriately. Community impact is being assessed as the second phase of this ongoing audit.
XIII INTERNATIONAL CONGRESS OF DIETETICS
23 - 27 July
A one day conference for professionals involved in the nutritional management of patients with intestinal failure.
For Information please contact
Cheryl Goff or Fiona Fullerton
XIIIth International Congress of Dietetics
c/o Meeting Makers Ltd
Tel: +44 (0) 141 434 1500
Fax: +44 (0) 141 434 1519
Email: dietetics@meetingmakers.co.uk


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<tr>
<th>Date</th>
<th>Event</th>
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<tr>
<td>29 Feb - 3 Mar</td>
<td>British Association for Parenteral and Enteral Nutrition</td>
<td>Wordsworth Hotel, Grasmere Contact: Pat Howard, Head of Nutrition &amp; Dietetics, Bristol Royal Infirmary Bristol, BS2 8HW Tel: 0117 928 2049 email: <a href="mailto:pat.howard@ubht.swest.nhs.uk">pat.howard@ubht.swest.nhs.uk</a></td>
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<td>9 March</td>
<td>Conference Colorectal Cancer</td>
<td>The Royal Society of Medicine, 1 Wimpole Street, London W1M 8AE Tel: (+44) (0)171 290 2900</td>
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<tr>
<td>21 - 23 Mar</td>
<td>Annual BSG Meeting International Convention Centre, Birmingham</td>
<td>Annual BSG Meeting Contact British Society of Gastroenterology, 3 St Andrews Place Regent's Park, London NW1 4LB Telephone: 0171 387 3534 Fax: 0171 487 3734 email: <a href="mailto:bsg@mailbox.ulcc.ac.uk">bsg@mailbox.ulcc.ac.uk</a></td>
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<td>25 -29 Apr</td>
<td>PEN Group Clinical Update 2000</td>
<td>Queen Margaret College, Edinburgh Contact: Jacklyn Hart, Dept of Dietetics, Astley Ainsley Hospital, 133 Grange Loan Edinburgh, EH9 2HL Tel: 0131 537 9251</td>
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<tr>
<td>23 - 27 July</td>
<td>13th International Congress of Dietetics</td>
<td>c/o Meeting Makers, Jordanhill Campus, 76 Southbrae Drive, Glasgow G13 1PP Tel: (+44) (0)141 434 1500 Fax: +44 (0) 141 434 1519 email: <a href="mailto:dietetics@meetingmakers.co.uk">dietetics@meetingmakers.co.uk</a></td>
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<td>28 - 30 Nov</td>
<td>BAPEN 2000 British Association for Parenteral and Enteral Nutrition</td>
<td>Harrogate International Centre</td>
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<td>14 - 15 Mar</td>
<td>VI Annual conference (ISPEN)</td>
<td>The Indian Society for Parenteral And Enteral Nutrition India Habitat Centre, New Delhi, India. For further information email: <a href="mailto:nf@rent02.nic.in">nf@rent02.nic.in</a> or <a href="mailto:crnss@hotmail.com">crnss@hotmail.com</a></td>
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<td>10 -13 Sept European Society for Parenteral and Enteral Nutrition</td>
<td>Palacio Municipal de Congresos, Madrid. ESPEN 2000 c/o MCI Congress, Rue de Lyon 75 CH 1211, Geneva 13 - Switzerland Tel +41 22 33 44 580 Fax +41 22 33 99 621 email: <a href="mailto:espen@mciquest.com">espen@mciquest.com</a></td>
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<td>10-13 Sept European Society of Intensive Care Medicine</td>
<td>International Congress Centre, Berlin, Germany. Contact: Joseph Wybran European Society of Intensive Care Medicine, 40 avenue B-1070 Brussels</td>
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Any changes in the scientific content that are required can generally be made at the Editorial desk at the meeting, and authors can go home knowing that their OC is in its final form, ready to be printed. It is hoped that the publication of the OC’s in the Proceedings will be significantly faster using this system, which will please authors!

So, don’t be surprised when BAPEN send out the revised ‘Directions’, abstract submission and copyright forms for the 2000 annual meeting - they will be different from before; however, we anticipate that by now most intending authors should be able to access the technology needed to comply with the new system- as is only appropriate in this new millennium!

Nutritional Aspects of Renal Disease

The joint National Nurses Nutrition Group (NNNG) and Parenteral and Enteral Nutrition Group (PEN) symposium at BAPEN 1999 on ‘Nutritional Aspects of Renal Disease' heard that undernourishment in chronic renal failure was associated with increased morbidity and mortality. "Nutritional therapy is a cornerstone of the long term management of these patients".

"Preservation of nutritional status with maintenance of energy intake are paramount," said Nicki Stewart, Senior Renal Dietitian, St Thomas’ Hospital, London.

George Hartley, Chief Renal Dietitian, Freeman Hospital, Newcastle, said that in renal failure patients, the traditional approach of dietary restriction was now being replaced by nutritional support.

"The significance of malnutrition is becoming increasingly recognised. The challenge for dietitians and the renal team to is to detect malnutrition, and then implement suitable nutritional support."

Session chair Carole-Anne McAtear, a Nutrition Support Dietitian at Glasgow Royal Infirmary, said that the major changes currently underway in the dietetic approach to renal patients are unlikely to go away. “The focus has shifted from restriction of protein intake to providing optimum nutritional support, improving health, and slowing or halting disease progression.”