Malnutrition among older people must be recognised earlier where it starts - in the home, in the community - if we are to tackle it effectively and reduce its personal, medical and financial cost,” declared Baroness Sally Greengross (Chair of the International Longevity Centre UK) at the launch in the House of Commons of a challenge to Government to take effective action.

BAPEN, the International Longevity Centre UK (ILC-UK) and the European Nutrition for Health Alliance (ENHA) championed a multi-disciplinary round table meeting to set out the agenda and the challenges to effectively address malnutrition among older people. The outcome of that meeting; the report ‘Malnutrition among Older People in the Community: Policy Recommendations for Change’, was launched on 17 May 2006 and attended by representatives from government, the opposition parties, health, housing, catering and older people’s services.

Partners at our meeting recognised that a great deal is currently underway to address the issue of malnutrition in hospital and in care settings,” continued Baroness Greengross, “but that there are few initiatives currently in place working in the community with older people themselves or their support networks to address the issue.”

“Hospitals are beginning, through screening, to identify malnutrition as patients are admitted. Nutrition policy and standards in care homes are currently under scrutiny. This is all good news,” declared Professor Marinos Elia, Chair of BAPEN, “however, malnutrition does not happen overnight – it can take months to develop in individuals living at home, many of whom will be receiving personal or nursing support. If those suffering from or at risk of malnutrition could be helped to identify that risk themselves, or be identified by one of the agents delivering support, there is a chance of reducing the medical, social and personal costs associated with under-nutrition.”

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Nicky Hayes, Consultant Nurse for Older People, said of the report: “I have seen many older people admitted to hospital with problems arising from malnutrition, yet early detection in the community could prevent some of this. It could trigger simple solutions such as more timely help with shopping, food preparation or just the provision of a social environment for enjoying meals again. We must do more to raise awareness, knowledge and action amongst both professionals and the public.”

Although the toll of malnutrition on health and health care costs exceeds £ 7.3 billion per year, much more than obesity, malnutrition remains a ‘forgotten problem’ in policy discussions about nutrition. Over half of this cost is expended on people aged 65 years and over.

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Among the key recommendations and challenges identified in Malnutrition among Older People in the Community are:

- Raise awareness of the risks and consequences of malnutrition amongst older people, their carers and families.
- Develop a recognised route for a qualification in nutrition for individuals regularly working with older people.
- Develop and share best practice in relation to schemes that tackle the social causes of malnutrition among older people, such as isolation and depression.
- Undertake research to revalidate a screening tool for malnutrition for use by older people themselves, with help from their carers and professionals working in the community.
- Define a clear pathway for the identification of treatment of malnutrition in the community.

Professor Marinos Elia, Chairman of BAPEN concluded: “As with obesity, the problem of malnutrition is complex. It cannot be adequately addressed by Government alone but Government must ensure it is given priority. A ‘delivery chain’ must be established involving partnerships between Government, national and local statutory agencies, and non-governmental organisations from the professions, voluntary and community sectors.

This Report challenges Government and all policy makers to take the lead in establishing such an integrated delivery chain to effectively address malnutrition among older people in the community.”

Report by Rhonda Smith

BAPEN Executive – what’s new?

Many of you may be aware that the number of officers in the Executive group increased after the last AGM from three to five. Thus, as well as the Chairman, Honorary Secretary and Honorary Treasurer, there are now two additional Executive officers. It is hoped that the expansion of the group may, in time, result in the following benefits:

- Greater overlap at the time when one or two of the group step down, thereby providing improved continuity and increased organisational ‘memory’
- Increased diversity of the founder groups within the Executive (OK, I know there are three doctors currently, but not for lack of asking for other willing volunteers. !)
- Improved liaison between the Executive and various BAPEN committees, both through existing representation of executive members on such groups and formation of new links between nominated executive officers and individual committees
- Re-distribution of the workload of the Executive among more people in the hope that it may encourage more individuals from all member organisations to step up and volunteer for such roles in the future...

Other roles of the Executive Group (taken directly from the ‘Terms of Reference’ document) are as follows:

- Preparation and development of BAPEN strategy in association with Council
- Development and progress of Council items
- Dealing with any interim issues or press enquiries
- Discussing and hopefully resolve any sensitive BAPEN issues
- Fulfilling the requirements of the Charity Commission
- Liaising with the BAPEN faculty
- Undertaking responsibility for financial issues (including management, consideration and preparation of financial plans and finances, for discussion and approval by Council).

We think the new configuration is working well, with increased opportunities for liaison resulting in greater transparency across the organisation and a sense of cooperative working. This is particularly welcome at a time when BAPEN is going through some fairly major changes in terms of finances and strategic planning. However, we are also keen to know of your views or suggestion for improvement, and please note, if you fancy taking a more active part in BAPEN, there will be vacancies from November 2007...!

And finally – a word about our commercial partners...

I am pleased to be able to provide an updated list of BAPEN’s current commercial partners. We are very grateful to our previous commercial partners for their ongoing support, as well as welcoming the support of some new members to the Organisation. As you will know, there are various grades of financial support, ranging from gold to standard. These are as follows:
What’s in the media?

Malnutrition – a positive angle at last?

Post the launch of the NICE Guidance, malnutrition has continued to generate media coverage, fuelled largely by more newspaper ‘revelations’ about poor practice in care homes.

This coverage culminated in a double page spread in a recent edition of Saturday Times Body & Soul – ‘Care for the elderly that is hard to swallow’ – which focused on the generally inflexible approach to nutrition in care homes. But there were some hints in this article that the tide may be turning.

Best practice dissemination

The article featured some very good practice in some homes in terms of food choice, flexible timing, access to snacks, relaxing and attractively decorated dining rooms.

Jane Clarke, the newspaper’s nutritionist, followed up this article with a feature on food for older people – ‘Tickling the old taste buds’ – Jane says in the opening paragraph;

‘Restaurants in this country have started to serve fresh food because customers have demanded it. Schools have been forced by Jamie Oliver to look to their laurels. Elderly people in care homes cannot vote with their feet. And so, far too often, they continue to get what they are given.’

Jane continues with advice for both older people themselves and relatives and recipes. It is worth a look if you have time – Google The Times and the date: 3 June 2006.

Malnutrition – a consumer affair?

There was also positive coverage of the issue of addressing malnutrition in hospital in a recent edition of the BBC Radio 4’s consumer affairs programme, You & Yours. The programme did not start from a positive news point – the disbanding of the Better Hospital Food Programme’ panel and activity, chaired by Lloyd Grossman.

But BAPEN Council members, Rick Wilson and Lynne Colagiovanni, were able to contribute positively to the discussion and draw on BAPEN’s recently published Health Economic Report, as well as their own practical experience of food and nutritional policy in their respective hospitals in London and Birmingham.

You will read elsewhere in this edition of In Touch, about the launch of the Malnutrition among Older People on the Community: Policy Recommendations for Change. This was a very successful launch, the aim being to attract a broad section of government, policy and professional stakeholders. Dissemination activity both at and after the launch has been focused on continuing to raise awareness and understanding in political circles. Media activity will follow at a later stage.

If you have seen coverage mentioning BAPEN or any of our key players and initiatives, please do drop me an email so that we can capture that coverage. Do also let me know if you are approached by any media contacts, or would like to initiate media contact locally.

I look forward to hearing from you!

Rhonda Smith
rhonda.smith1@btinternet.com
An update on healthcare policy
Our health, Our care, Our say: A new direction for community services

**Introduction**

In 2005, over 140,000 people were invited to share their thoughts on changes they would like to see in the provision of health and social care services in the community. Subsequently, the Government white paper ‘Our health, Our care, Our say: a new direction for community services’ was published in January 2006.

The white paper aims to establish coordinated, patient focussed care in the community and identifies 3 key themes:

- **Putting people more in control of their own health and care**
- **Enabling and supporting health, independence and well-being**
- **Rapid and convenient access to high quality and cost-effective care closer to home**

The paper recognises that health and social care must shift towards preventative and community based care, acknowledges that this must be delivered in a way that offers value for money, and must also meet the expectations of the public.

**Empowering and enabling patients**

Patient education and empowerment is central to the proposed reforms. Much of the white paper considers how care for people with long-term conditions can be improved and be provided closer to home. Patients will take on more of their own care (Figure 1) and in order to enable this, the Expert Patient Programme will expand and diversify to better respond to patient needs. By 2008, everyone with a long-term condition should be offered an ‘information prescription’ with details about his or her condition and sources of support.

The ‘information prescription’ will mean individuals will get tailored information on staying healthy and the services available. The emphasis will be on prevention. Local projects will help address exercise, healthy eating and combat mental and physical health problems. These services will be offered via a number of places, including surgeries, pharmacies, voluntary organisations, leisure centres, sheltered housing and schools. Ultimately there will be greater integration of health and social care records.

Figure 1: Empowering and enabling patients to take control of their own care. Briefing 128, The NHS Confederation, February 2006.

**Enabling and supporting health, independence and well-being**

A number of initiatives are identified to help achieve this goal, including:

- **NHS life check** – this will be developed in 2007 and will consist of an initial self-assessment followed by an appointment with a health trainer where the initial assessment indicates significant risk of ill health. Initially this will be developed for children and adults over 50 years in higher risk areas e.g. social deprivation. This initiative will help tackle obesity

- **Mental health** - steps will be taken to help people combat stress, depression and anxiety, and clear standards for these services will be developed. Pilot studies are to be conducted to determine the best way of dealing with mental health needs

- **Caring for people with ongoing needs** – more than 15 million people in the UK have long-term health needs. Better support is to be provided to enable people to live independent and fulfilled lives. By 2008, PCT’s and local authorities should have established joint health and social care teams to give people more control over the care and support they receive

- **Direct Payments** – many people eligible for social services will opt to receive money from the local authority so they can choose and purchase the right services from their preferred supplier

**Access to high quality and cost-effective care closer to home**

Some of the proposed reforms to enable people to access healthcare closer to home are listed below. The objective is to allow people to access healthcare at locations and times that are convenient for them.

- **Many GP surgeries will stay open for longer and open on Saturdays**

- A growing number of GP’s will offer specialist care

- More NHS Walk-in Centres will open in commuter areas around the country to make it easier to see a GP or nurse

- New practices will be built and appointments should be available within 48 hours
Update on healthcare policy (continued)

• New NHS community hospitals will be built over the next 5 years to provide diagnostic services, specialist day clinics, social services and out-patient facilities closer to home/workplace
• Consultants will operate out of community-based centres
• Better social care will enable people to continue living at home
• The use of assistive technology such as ‘telemonitoring’ will become more commonplace

How will these improvements be achieved?

PCTs will be expected to review the services they commission to make certain they provide equity, quality and value for money. The Department of Health envisage that ‘third sector’ organisations will play a greater role in service provision.

Health partners will be encouraged to work together to develop services in line with white paper priorities, and PCT and local authority joint commissioning arrangements should be improved to ensure better integration of services and optimise use of resources.

The Payment by Results tariff will be revised to ensure it provides incentives to support the changes identified.

Summary

As a result of the white paper:

• People will be helped in their goal to remain healthy and independent
• Patients should be offered personalised care with improved access, and funding increasingly following the patient
• Where possible, care will shift from hospital to community, with greater investment in community hospitals
• There should be better coordination between local councils and the NHS, and a number of initiatives aimed at preventing ill health should be implemented

To download a full copy of the white paper visit: www.dh.gov.uk

Carole Glencorse
Head of Nutritional Services
Abbott Nutrition

ESPEN corner

Clinical Nutrition Education... a new and innovative online programme of learning is being developed by eminent members of ESPEN and is open to doctors, dietitians, nurses and pharmacists. The following information gives further details about the programme.

Enjoy learning with the ESPEN-Leonardo da Vinci Life-Long learning (LLL): Continuing Education in Nutrition

TIME to REGISTER: NOW!

www.espen.org/Education/life_long_learning.htm

The ESPEN Leonardo da Vinci Life Long Learning Project is an ESPEN-EU global effort to improve daily practice in Clinical Nutrition and Metabolism and develop quality care in nutrition by means of more than 100 web-based modules (organized in topics) and 24 live courses given during ESPEN congresses by experts. The web-based modules are freely accessible on the LLL-Nutrition website providing a worldwide opportunity for distance training in Nutrition.

The main objectives are

To improve knowledge, competence and skills of health professionals and students in Clinical Nutrition and Metabolism while providing CME credits and European certification for medical doctors.
## South West Regional Nutrition Support Group
### Annual Clinical Nutrition Meeting

**Mount Somerset Hotel and Conference Centre**  
**Thursday 28 September 2006**

"NICE guidance and team working"

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:15am</td>
<td>Overview to the NICE guidelines</td>
</tr>
<tr>
<td></td>
<td>Dr. Jeremy Nightingale, Consultant Gastroenterologist, St Mark's Hospital</td>
</tr>
<tr>
<td>10:30am</td>
<td>Optimal timing for feeding before/after surgery</td>
</tr>
<tr>
<td></td>
<td>Ms. Ruth McKee, Consultant Surgeon, Glasgow Royal Infirmary</td>
</tr>
<tr>
<td>11:15am</td>
<td>COFFEE</td>
</tr>
<tr>
<td>11:30am</td>
<td>The Enhanced recovery program in surgery</td>
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<tr>
<td></td>
<td>Miss Polly King, Torbay Hospital</td>
</tr>
<tr>
<td>11:50am</td>
<td>Teaching and training issues for nurses</td>
</tr>
<tr>
<td></td>
<td>Ms Alison Young, Royal Liverpool University Hospital</td>
</tr>
<tr>
<td>12:40pm</td>
<td>LUNCH</td>
</tr>
<tr>
<td>1:45pm</td>
<td>Refeeding guidelines and issues for dietitians</td>
</tr>
<tr>
<td></td>
<td>Ms Jo Prickett, Chief Dietitian, Southmead Hospital, Bristol</td>
</tr>
<tr>
<td>2:30pm</td>
<td>Setting up a nutrition team and its effects on PEG referrals</td>
</tr>
<tr>
<td></td>
<td>Judith Bruce, Lena Franklin and Cheltenham Nutrition Team</td>
</tr>
<tr>
<td>3:30pm</td>
<td>Short talks - MRSA and PEG infection, Dr Iain Murray, Royal Cornwall Hospital, Truro Dr John Smithson, Southmead Hospital, Bristol, RIG audit – Sarah Tobin, Torbay Hospital</td>
</tr>
<tr>
<td>4:15pm</td>
<td>TEA AND FINISH</td>
</tr>
</tbody>
</table>

The cost will be £50 for BAPEN members and £60 for non-members. For further details contact: Dr Emma Greig, Consultant in Gastroenterology, Taunton & Somerset NHS Trust. Tel: 01823 342126 email: [Emma.Greig@tst.nhs.uk](mailto:Emma.Greig@tst.nhs.uk)  
Accreditation from the Royal College of Physicians for CPD is being sought.
Thursday 2nd November 2006

08:30 - 08:30 Registration
09:00 - 11:00 Symposium 4
   "MANAGING COMPLICATIONS IN LONG-TERM PARENTERAL NUTRITION"
   Chair: Angie Davidson Consultant Nurse in Nutrition and Intestinal Failure
   St. Mark's Hospital, Harrow
   09:00 - 09:30
   "Managing Metabolic Bone Diseases in Long-Term Parenteral Nutrition"
   Dr Jon Shaffer
   Intestinal Failure Unit
   Hope Hospital, Salford
   09:30 - 10:00
   "Managing Liver Dysfunction in Parenteral Nutrition"
   Dr Simon Gabe Consultant Gastroenterologist & Hon. Senior Lecturer
   St. Marks Hospital, Harrow
   10:00 - 10:30
   "Managing Micronutrient Deficiency and Toxicity in Long-Term Parenteral Nutrition"
   Lindsay Hayes
   Principal Clinical Pharmacist
   Hope Hospital, Salford
   10:30 - 11:00
   "The Intestinal Transplantation now an alternative to HPNP"
   Stephen Mickley
   Addenbrookes Hospital, Cambridge
   11:00 - 11:30 Coffee and Exhibition
   11:30 - 13:30 Symposium 5 - Joint Symposium with the Nutrition Society
   "EATING, ILLNESS AND THE GUT - Disorder in the house?"
   Chair: Gary Frost Theme Leader for Clinical Nutrition - Nutrition Society
   University of Surrey
   11:50 - 12:00
   "Signs of which Generate Amebiasis during Acute Illness"
   Professor Wolfgang Langhans
   Swiss Federal Institute of Technology
   Zurich, Switzerland
   12:00 - 12:30
   "Critical Illness and Changes in Sensory Perceptions"
   Professor Susan Schuitman
   Department of Psychiatry and Behavioural Sciences
   Duke University Medical Centre, North Carolina, USA
   12:30 - 13:00
   "Strategies to Improve Ingestive Behaviour in the Critically-ill"
   Dr Jacqui Davidson
   Diabetes, Alimentation and Biomedical Sciences
   Queen Margaret University College, Edinburgh
   13:00 - 13:30 Original Communications

PROVISIONAL PROGRAMME

Thursday 2nd November 2006

11:00 - 11:45 Symposium 4
   "MALNUTRITION IN THE COMMUNITY"
   Chair: Ms Christina Russell
   Honorary Treasurer
   SABEN
   11:45 - 12:00
   "Economics of Malnutrition: a Community Perspective"
   Professor Marina Byra
   Honorary Chairmen
   SABEN
   12:00 - 12:30
   "Malnutrition of Older People in the Community: Recommendations for Change"
   Suzanne Pott
   Director of Research
   International Longevity Centre, London
   12:30 - 12:45
   "Sheltered Housing: a forgotten sector"
   Lesley Pugh
   Head of Policy
   Emerging Role of Sheltered Housing (England)
   12:45 - 13:30
   "Managing Stomalation in Care Homes"
   Rachael Martin
   Specialist Stoma Therapist for Older People
   Darlington
   13:30 - 14:15
   "Remembering Nutrition in Dentistry"
   Penny Flaherty
   Advanced Nurse for Tobacco Control, Canterbury
   14:30 - 15:15
   Sir David Cuthbertson Medal Lecture
   15:15 - 16:15 Symposium 5
   "DIABETES TECHNOLOGY: PUTTING THEORY INTO PRACTICE"
   Chair: Peter Turner
   Senior Scientist
   Royal Liverpool University Hospital
   15:15 - 15:45
   "Intensive Insulin Therapy - How Do We Do It?"
   Dr Dave Harper
   Consultant Endocrinologist
   Royal Liverpool University Hospital
   15:45 - 16:15
   "Concerns in Estimating Energy Requirements - conclusions of the PENDO report"
   Dr Elizabeth Mower
   Paediatric Development & Clinical Research Lead
   St Thomas Hospital, London
   16:30 - 17:15
   "Protein, Patients and Information - Do we know what to give?"
   Dr Mike Brouwer
   Consultant Gastroenterologist & Senior Lecturer in Medicine & Nutrition
   Institute of Human Nutrition, Southampton General Hospital
   17:15 Close of Conference followed by Tea

For a registration form please contact;
Sovereign Conference
with your details

CONFERENCE ORGANISERS

To request a registration form contact:

Sovereign Conference
Secura Hold Business Centre, Studley Road
Redditch, Worcestershire, B98 7LG
Tel: +44(0) 1527 518777 Fax: +44(0) 1527 518781
Email: association@sovereignconference.co.uk

Further details are available:
see our website - bapen.org.uk

2006 Annual Conference
The British Association for Parenteral and Enteral Nutrition
to be held at
Hilton Brighton Metropole
1st - 2nd November 2006

PROVISIONAL PROGRAMME

PROVISIONAL PROGRAMME

BAPEN
Advancing Clinical Nutrition

BAPEN
Advancing Clinical Nutrition
The ESPEN LLL program has been running since July 2005

New web modules are continuously developed. The first four live courses were held during the ESPEN congress in Brussels 2005.

During the ESPEN congress in Istanbul, 8 live courses in English and 3 live courses in Turkish will be given:

The live courses will cover:

- **Nutritional Support in the Perioperative Period** *(Chair: O. Ljungqvist)*
  - Wednesday 18 October 09.00-13.00

- **Approach to Oral and Enteral Nutrition** *(Chair: M. Pirlich)*
  - Wednesday 18 October 09.00-13.00

- **Nutritional Assessment and Techniques** *(Turkish language)*
  - Wednesday 18 October 09.00-13.00

- **Nutritional Support in Intensive Care Patients** *(Chair: J.C. Preiser)*
  - Wednesday 18 October 14.00-18.00

- **Nutritional Support in Cancer Patients** *(Chair: K. Fearon)*
  - Wednesday 18 October 14.00-18.00

- **Nutritional Support in Intensive Care Patients** *(Turkish language)*
  - Wednesday 18 October 14.00-18.00

- **Home Parenteral Nutrition in Adult Patients** *(Chair: A. Van Gossum)*
  - Thursday 19 October 09.00-13.00

- **Nutrition in Metabolic Syndrome** *(Chair: M. Leon Sanz)*
  - Thursday 19 October 09.00-13.00

- **Nutritional Support in the Perioperative Period** *(Turkish language)*
  - Thursday 19 October 09.00-13.00

- **Nutritional Assessment and Techniques** *(Chair: Y. Berner)*
  - Thursday 19 October 14.00-18.00

- **Nutritional Support in Elderly Patients** *(Chair: S.M. Schneider)*
  - Thursday 19 October 14.00-18.00

Registration is easy!

- The [web-based modules](#) are free of charge and mandatory registration is available from the ESPEN website
- To attend a [live course](#) (mainly physicians and medical students; some places for dietitians, nurses and pharmacists are available) a registration fee is required (smaller for several modules and ESPEN members) at the same time as the congress registration ([online secure registration](#)): [www.espen.org/Istanbul](http://www.espen.org/Istanbul)

Costs for live courses

<table>
<thead>
<tr>
<th>ESPEN member:</th>
<th>1 course = €30</th>
<th>2 courses = €60</th>
<th>3 or 4 courses = €90</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-ESPEN member:</td>
<td>1 course = €100</td>
<td>2 courses = €150</td>
<td>3 or 4 courses = €180</td>
</tr>
</tbody>
</table>

Non-ESPEN members can apply for membership and benefit from their new status after payment of the fees.

“Attendance for each course will be limited to the 50 first registered participants”

ESPEN-LLL Course Director
Professor Rémy Meier

Each participant of a live course receives:

- An ESPEN -LLL module catalogue
- An ESPEN LLL certificate (credit)
- A list of participants (to promote networking).
The group of Parenteral Nutrition enthusiasts supporting IPaNEMA (International Parenteral Nutrition Education and Methodology Advancement) were active during the latter part of 2005 and early 2006, organising symposia in collaboration with several of the major clinical nutrition societies around the world.

In October 2005 AuSPEN held its annual meeting at the Australasian Gastroenterology Week in Brisbane. The IPaNEMA workshop covered PN in sepsis, intensive care and gastroenterology with lectures and case studies by Dr Andrew Davies, president of AuSPEN, Professor Patrick Ball (Aus) and Professor Gil Hardy (UK). The AuSPEN-IPaNEMA award was presented to the Nutritional Support Team (NST) in Auckland, lead by gastroenterologist Dr Russell Walmsley, for their presentations on experiences with standard versus individualised PN.

FELANPE (Federation of Latin American PEN Societies) held their bi-annual conference at Montevideo in Uruguay in early November.

More than 2000 delegates and international speakers from 26 countries attended the many concurrent symposia on nutritional topics ranging through bariatric surgery, control of hyperglycemia, novel substrates and sports nutrition. IPaNEMA organised a workshop on ‘Safe and effective PN’ with presentations on catheter care from one of the most experienced American Nutrition Support Nurses; Ms Lee Varella from Syracuse New York, Safe use of lipid PN by past ESPEN president Professor Yvon Carpentier (Be), and clinical experiences with structured lipids from ASPEN President Dr Gordon Jensen (USA). A second multi-disciplinary IPaNEMA symposium on ‘Pharmaceutical developments in PN’ heard lectures from pharmacists Maria Ocana (Peru), Professor Luc Cynober (Fr) and dietitian Laura Matarese (USA). The IPaNEMA 2005 Award for services to PN was presented to Dr Luis Nin, from Uruguay and president of FELANPE.

Later in November the Brazilian Congress of PEN took place in the northern resort city of Fortaleza and attracted approximately two thousand clinicians, pharmacists, dietitians and nurses from all over Brazil. The IPaNEMA Nutrimed symposium was well attended by delegates who heard reports on basic research and clinical developments with glutamine and di-peptides presented by Dr Paulo Vasconcelos with other Brazilian researchers and on the anti-microbial properties of arginine from BPNG research award winner Ines Hardy (NZ) above, second left.

Clinical Nutrition Week, hosting the 2006 ASPEN congress had to be moved at relatively short notice from New Orleans to Dallas in February because of the knock-on effects of hurricane Katrina. Nevertheless, the conference was well attended and the IPaNEMA symposium on ‘International lipid developments’ attracted a large multi-disciplinary audience, despite being an early morning session immediately after the welcoming party! Immunological aspects of lipid therapy were addressed by Dr Dan Waitsberg (Br), practical experiences and cost comparisons between hospital and industrial manufactured lipid-containing PN were reported by ESPEN president Professor Claude Pichard (CH) and the BPNG Clogbusters project investigating methods for avoiding catheter occlusion was summarised by ex-BPNG Chairman Gil Hardy. In his concluding remarks, President Gordon Jensen thanked IPaNEMA for organising the satellite symposium and emphasised the importance placed by the ASPEN Board on international exchanges of scientific research and clinical practices, pledging to continue promoting multidisciplinary education and nutrition support through national and international societies such as ASPEN and IPaNEMA.

Further IPaNEMA symposia are planned in Europe, Latin America, South East Asia and USA. Any BAPEN members interested in promoting their PN experiences internationally, offering their lecturing/training services for future satellite symposia or otherwise supporting IPaNEMA can view the aims and objectives of the charitable trust on www.parenteral-nutrition.net or email ipanema@auckland.ac.nz
Journal Watch – from a nurse’s perspective


This article considers the ethical principles of beneficence, non-maleficence, respect/autonomy, justice and veracity and draws them together in the ethical dilemmas encountered in PEG insertion in patients with dementia. Although the principles are not new, Christine Dennehy nicely highlights some of the difficult situations faced in clinical practice. The section on veracity is particularly interesting and relevant to the entire multi-disciplinary team and not just nurses, at whom this article is primarily aimed. A useful read, especially for those new to the field of nutrition support.


Central venous catheters (CVCs) are used to deliver a variety of therapies, including parenteral nutrition, but one well recognized complication associated with their use is the occurrence of catheter-related blood stream infections (CRBSI). This paper gives a general overview of the problem and points to exit site infections as one potential source of CRBSI. The use of three products; 2% chlorhexidine, Biopatch and transparent split dressings, is then considered in the prevention of exit site infections. A brief summary of ASPEN and CDC guidelines are given along with a particularly useful description of the application of Biopatch, which is a relatively new product to the UK market, and the local protocols around its use.


There are many factors that influence wound healing following PEG insertion. This small animal study looked at tissue tension and compression caused by the placement of the external bolster against the abdominal wall following the procedure. The occurrence of tissue damage with the external bolster at 0cm from the abdominal wall, 1cm and 4cm was studied. It was found that the occurrence of inflammation and wound infection was greatest with the bolsters positioned against the abdominal wall (0cm) and least with the bolsters positioned at 4cm from the abdominal wall. From this the conclusion is drawn that looser may be better. This was a very small study carried out in dogs and so cannot be directly extrapolated to clinical practice in humans. Nonetheless, the findings are interesting in that, if proven in human studies, they point to a significant change in practice.

Deepest Wishes

NNNG Founder group update

The first part of the year got off to a busy start for the National Nurses Nutrition Group (NNNG) and, no doubt, will continue to be a time of development and change. Towards the end of the year we will be losing Lynne Colagiovanni as the Chair of the NNNG, after many years service to the group, and we are in the process of sorting nominations and organising the election for a new Chair.

Developments

Our membership numbers are already over 130 for the year with many more expected! The Yahoo groups chat room has been a great success with members taking part in an open forum for discussion and information sharing. As with any new development there have been teething problems but these are being sorted out and the chat room has already seen a lot of activity and lively debates.

Conference

Unfortunately, the spring conference due to be held on the 15th and 16th June this year, has had to be cancelled.

However, preparations are already being put in place for 2007 conference when the NNNG celebrates its 21st birthday. There will be more on that later in the year beginning with a members’ competition to design the NNNG celebratory logo for the year. The first prize is likely to be an all expenses paid trip to the conference and celebrations.

Finally, Lynne Colagiovanni and Kate Pickering are currently representing the NNNG on an NPSA working group looking at enteral feeding syringes and devices and this information is due out shortly.

Jane Fletcher
Membership Secretary - NNNG
**BAPEN Official Contact Details**

### Executive Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prof Marinos Elia</td>
<td>BAPEN Chairman</td>
<td>Tel: 0208 725 3429 Fax: 0208 725 3520 Email: <a href="mailto:elia@soton.ac.uk">elia@soton.ac.uk</a></td>
</tr>
<tr>
<td>Dr Penny Neild</td>
<td>Hon Secretary</td>
<td>Tel: 0208 725 3429 Fax: 0208 725 3520 Email: <a href="mailto:penny.neild@stgeorges.nhs.uk">penny.neild@stgeorges.nhs.uk</a></td>
</tr>
<tr>
<td>Mrs Christine Russell</td>
<td>Hon Treasurer</td>
<td>Tel: 01327 830012 Fax: 01327 831 055 Email: <a href="mailto:ca.russell@btinternet.com">ca.russell@btinternet.com</a></td>
</tr>
</tbody>
</table>

### Chairmen of Standing Committees

<table>
<thead>
<tr>
<th>Name</th>
<th>Committee</th>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Barry Jones</td>
<td>BANS</td>
<td>Tel: 01384 244 074 Fax: 01384 244 262 Email: <a href="mailto:b.j.m.j@btinternet.com">b.j.m.j@btinternet.com</a></td>
</tr>
<tr>
<td>Dr Ian Fellows</td>
<td>Education and Training Committee</td>
<td>Tel: 01603 288 356 Fax: 01603 288 368 Email: <a href="mailto:ian.fellows@nnuh.nhs.uk">ian.fellows@nnuh.nhs.uk</a></td>
</tr>
<tr>
<td>Prof Agostino Pierro</td>
<td>Research and Science Committee</td>
<td>Tel: 020 7 905 2175 Fax: 020 7 404 6181 Email: <a href="mailto:a.pierro@ich.ucl.ac.uk">a.pierro@ich.ucl.ac.uk</a></td>
</tr>
<tr>
<td>Mrs Justine Bayes</td>
<td>PINNT</td>
<td>Tel: 01933 316 399 Email: <a href="mailto:justine@bayes3721.fsnet.co.uk">justine@bayes3721.fsnet.co.uk</a></td>
</tr>
<tr>
<td>Dr Jeremy Nightingale</td>
<td>Regional Representatives</td>
<td>Tel: 0208 235 4038 Fax: 0208 235 4001 Email: <a href="mailto:jeremy.nightingale@nwlh.nhs.uk">jeremy.nightingale@nwlh.nhs.uk</a></td>
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### Meetings - National

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<td>PEN Group Summer Meeting</td>
<td>London House, William Goodenough College, London, W1N 2AB</td>
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<tr>
<td>5th - 8th September</td>
<td>The 24th Leeds Course in Clinical Nutrition</td>
<td>Manchester Conference Centre, UMIST, West End Road, South Rushlip, M1 3BB</td>
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<td>13th September</td>
<td>Improving Nutrition on the Wards</td>
<td>Institute of Physics, 76 Portland Place, London, W1 1NT</td>
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<td>5th October</td>
<td>Current Understanding of the Health Benefits of Probiotics</td>
<td>Yakult UK Ltd, Artens, Odyssey Business Park, West End Road, South Rushlip, Middlesex HA4 6QE</td>
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<tr>
<td>1st - 2nd November</td>
<td>16th Annual BAPEN Meeting</td>
<td>Hotel Metropole, Brighton, For further information and registration, contact: Liz Costin Tel: 01442 825568 Email: <a href="mailto:e.costin@nutsoc.org.uk">e.costin@nutsoc.org.uk</a> <a href="http://www.nutrition">www.nutrition</a> society.org</td>
</tr>
<tr>
<td>Thursday 7th December</td>
<td>Choosing, eating, living – Institute of Food Research Open Day</td>
<td><a href="http://www.bapen.org.uk">www.bapen.org.uk</a></td>
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</tr>
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<tr>
<td>19th – 22nd October</td>
<td>ESPEN</td>
<td>Istanbul, Further information visit: <a href="http://www.espen.org">www.espen.org</a></td>
</tr>
</tbody>
</table>

### BAPEN Office

Secure Hold Business Centre, Studley Road, Redditch, Worcs. B98 7LG Tel: 01527 457850 Fax: 01527 458718

To contribute to ‘In Touch’, please contact: Vera Todorovic - Tel: 01909 502773 Email: vera.todorovic@dbh.nhs.uk

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**In Touch Issue No. 42**

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**Diary Dates 2006**

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**National Dates**

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<tr>
<td>London House, William Goodenough College, London, W1N 2AB</td>
<td>Tel: 020 8547 2300 <a href="http://www.healthcare-events.co.uk">www.healthcare-events.co.uk</a></td>
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</table>
**BAPEN Medical**  
**Clinical Nutrition Training day for SpRs and Consultants**

**Wednesday 13th September 2006**  
**Clinical Lecture Theatre**  
Francis Bancroft (Formerly Basic Medical Sciences) Building,  
Queen Mary University of London, Mile End Road, London E1 4NS.

**Programme**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>9:00-9:30am</td>
<td>Registration and Coffee</td>
</tr>
<tr>
<td>9:30am</td>
<td>Welcome</td>
</tr>
<tr>
<td>9:35am</td>
<td>Nutritional assessment + establishing requirements</td>
</tr>
<tr>
<td>11:00am</td>
<td>Coffee</td>
</tr>
<tr>
<td>1:15pm</td>
<td>PEG placement and ethics</td>
</tr>
<tr>
<td>1:30pm</td>
<td>LUNCH</td>
</tr>
<tr>
<td>2:45pm</td>
<td>Tea</td>
</tr>
<tr>
<td>3:00pm</td>
<td>Short bowel syndrome</td>
</tr>
<tr>
<td>4:45 - 5:00pm</td>
<td>Feedback and concluding comments</td>
</tr>
</tbody>
</table>

All sessions interactive and case-based multi-disciplinary faculty  

**All Welcome**

- Members of BAPEN Medical
- Any clinician with an interest in nutritional support
- Trainees of all disciplines are welcome

**Enquiries to:**  
Dr Tim Bowling, Hon. Secretary BAPEN Medical,  
Clinical Nutrition Unit, Queen's Medical Centre  
Nottingham NG7 2UH.  
(email: tim.bowling@nuh.nhs.uk)

Application form available on the BAPEN website [www.bapen.org.uk](http://www.bapen.org.uk)

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**St Mark’s 9th Intestinal Failure Study Day**  
**Wednesday 4th October 2006**

A multidisciplinary study day focused on Intestinal Failure & Home Parenteral Nutrition

Apply soon as places are limited

Contact St. Mark's Academic Institute: 020 8235 4046  
Cost £95 incl. refreshments

---

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**South West (West)**
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**South West (East)**
Peter Austin — Peter Austin