Parenteral nutrition given in the peroperative period in abdominal surgery: compliance with guidelines

C. Van Wetter(1), P. Mestrez(2), E. Cambier(3), N. Tinton(3), D. Brandt(3), O. Tassin(1)
(1) Pharmacist [celine.vanwetter@ghdc.be] (2) Doctor in nutrition (3) Abdominal Surgeon
Grand Hôpital de Charleroi | Site HSJ
rue M. Depasse 6 | 6060 Gilly
Belgique

Abstract number: CP-018

Background

A significant proportion of patients are receiving parenteral nutrition (PN) for elective surgery in our abdominal surgery unit. The purpose of this study was to assess accordnace of prescription with international guidelines.

Method

Patients who underwent elective surgery and that received PN were selected during a 6-month period (January 2013 – June 2013). ESPEN guideline (Braga et al., 2009) was considered as guideline of reference. The clinical pharmacist assessed conformity to guidelines with information from prescriptions and medical files.

Results

23 patients were selected: 15 patients had uncomplicated surgery (US) and 6 had postoperative ileus (PI) and 2 another complication (OC) (fig 1).

ESPEN guidelines recommend preoperative PN in severely undernourished patients who cannot be adequately orally or enterally fed. Postoperative PN is recommended to undernourished patients in whom enteral nutrition is not feasible or tolerated, or when patients with postoperative complications impairing gastrointestinal functions are unable to meet energy requirements for at least 7 days. Only 6 treatments (26%) complied with guidelines: As none of the patients were qualified as undernourished and all patients had gastrointestinal impairment due to surgery, only patients with PN at least 7 days after surgery complied with guidelines (fig 2 and 3 : blue : complies, green : does not comply).

Conclusion

This study demonstrates most PN treatments in elective abdominal surgery are not in agreement with guidelines. A multidisciplinary group (nutritionist, dietician, surgeon and pharmacist) was created to implement specific protocols. Measures of improvement will be taken and measured in 2014.