

High risk of malnutrition in older people

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Associate Professor Carol Wham is calling for screening at hospital admission for older patients, who are at a higher risk of malnutrition. Credit: Massey University

Almost 75 per cent of older adults involved in a recent Massey University study were at risk of malnourishment, or were malnourished, when they were admitted to hospital.

The study, led by Associate Professor Carol Wham from the College of Health, aimed to investigate malnutrition risk in [older adults](#) at the point of hospital admission. It follows an earlier pilot study which showed 23 per cent of respondents were malnourished and 35 per cent were at [high risk](#) of malnourishment at hospital admission. The average age of the 234 participants involved in the latest study was 84. The research was undertaken in Auckland within the Waitemata District Health Board region, between July 2014 and September 2015.

"Malnutrition is preceded by a state of malnutrition risk and is associated with poor health outcomes. In many cases it can be prevented or the trajectory slowed by identifying and addressing risk factors," Dr. Wham says.

The study used a validated screening tool, the Mini

Nutritional Assessment Short Form (MNA-SF), which provides a simple and rapid method to identify those at high risk, by assessing appetite, weight loss, mobility, psychological stress or acute disease, depression and body mass index

"Nearly half [46.6 per cent] were identified at malnutrition risk and just over a quarter [26.9 per cent] malnourished. This means, almost three-quarters were malnourished or at malnutrition risk," Dr. Wham says.

Significant predictors of malnutrition risk at hospital admission were dysphagia risk (problems with swallowing), low [body mass index](#) (BMI), low muscle strength and poor cognition. Some level of cognitive impairment was indicated in 62 per cent of the participants

Dr. Wham says two-thirds of the participants required daily help with various tasks such as cooking, cleaning, showering and dressing. "This may suggest loss of physical function among the participants and may relate to the low muscle strength observed. Eighty-eight per cent of participants were admitted from the community, so their own homes rather than rest homes or care facilities. This suggests the high prevalence of [hospital](#) malnutrition may be a result of unrecognised community malnutrition."

If we are to address malnourishment that is occurring in the community before an older adult reaches crisis point and hospitalisation, screening in GP medical centres is needed, Dr. Wham says.

"Malnutrition in community-living older adults is often attributed to long-standing inadequate intake. Making screening of the most vulnerable part of the routine in primary care is important to identify those at risk. Screening needs to be followed by referral to a dietitian, who are the experts in nutrition assessment and treatment, to ensure the right people are receiving the right care at the right time."

Dysphagia risk, low muscle strength and poor

cognition predict [malnutrition](#) risk in older adults at [hospital admission](#) was recently published in *BMC Geriatrics*.

More information: Idah Chatindiara et al.

Dysphagia risk, low muscle strength and poor cognition predict malnutrition risk in older adults at hospital admission, *BMC Geriatrics* (2018). [DOI: 10.1186/s12877-018-0771-x](#)

Provided by Massey University

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