



Summary of the Education and Outreach Plan of the Academy/A.S.P.E.N. Regarding the Consensus Statement on Characteristics for the Identification and Documentation of Adult Malnutrition (Under-nutrition)

Developed by: Academy/A.S.P.E.N. Adult Malnutrition Education and Outreach Workgroup

Purpose

The following information is provided to facilitate awareness and implementation of a standardized approach to the recognition and documentation of adult malnutrition across health care settings. Information contained in the consensus statement is briefly summarized, expected outcomes are identified, and links to relevant resources are provided. Benchmarking health care outcomes observed is encouraged.

A plan for revision of this approach is offered as validation of the characteristics ensues. A study to validate these standardized adult characteristics of malnutrition is currently underway by the Academy/A.S.P.E.N. Adult Malnutrition Feasibility and Validity Testing Workgroup utilizing the Dietetic Practice Based Research Network (DBRN) and ANDHII (Academy of Nutrition and Dietetics Health Informatics Infrastructure). This study will help determine if the current recommended characteristics are valid. If you are interested in participating in the validity testing of the standardized adult characteristics of malnutrition, please contact Lindsey Field, MS, RDN, LD at <u>lfield@eatright.org</u>.

Scope/Impact of the Problem

Adult undernutrition is a major contributor to increased morbidity and mortality, decreased function and quality of life, increased frequency and length of hospital stays, and higher health care costs.

A uniform set of diagnostic characteristics to evaluate nutritional status had not been established until 2012. Consequently, estimates of the prevalence/incidence of adult malnutrition in the United States vary widely, and consistent data about treatment outcomes for malnutrition are lacking. Despite the variability in diagnostic criteria and data for nutritional status, it is evident that the prevalence/incidence of adult malnutrition tends to increase as the acuity of the care setting increases.





Academy/A.S.P.E.N. Consensus Statement

(J Acad Nutr Diet. 2012;112(5):730-738; JPEN J Parenter Enteral Nutr. 2012;36(3):275-283.)

- Purpose:
 - Provision and widespread adoption of a standard set of diagnostic characteristics to be used to identify and document adult malnutrition in routine clinical practice
 - Revision of the ICD-9/ICD-10 nomenclature used to document malnutrition (undernutrition) to recognize and acknowledge the impact of inflammation on nutritional status and intervention outcomes
 - Jensen GL, Mirtallo J, Compher C, et al. Adult starvation and diseaserelated malnutrition. A proposal for etiology-based diagnosis in the clinical practice setting from the International Consensus Guideline Committee. JPEN J Parenter Enteral Nutr. 2010;34(2):156-159.
- Types of Adult Malnutrition:
 - o Starvation-related malnutrition (no inflammation)
 - o Chronic disease-related malnutrition (mild to moderate inflammation)
 - Acute disease- or injury-related malnutrition (marked inflammatory response)
 - White JV, Guenter P, Jensen GL, et al. J Acad Nutr Diet. 2012;112(5):730-738; co-published in <u>JPEN J Parenter Enteral Nutr.</u> 2012;36(3):275-283.
- Attributes of the Diagnostic Characteristics:
 - The characteristics to support a diagnosis of malnutrition consist of basic parameters of nutritional status (not disease severity) that change readily as nutritional status improves or deteriorates. These characteristics are few in number and can be readily measured in all health care settings.
 - The diagnostic characteristics are predominantly evidence-based. However, expert opinion was employed to reach consensus when sufficient evidence was lacking. The characteristics are a "work in progress" and are expected to change over time as validation studies are conducted.
- List of Diagnostic Characteristics: (documentation of two or more is necessary):
 - Inadequate energy intake (consumption of energy requirements during a specified time period)
 - Weight loss (percentage of weight loss for a specified time period compared to a baseline weight)
 - Loss of muscle mass
 - Loss of subcutaneous fat
 - Fluid accumulation
 - Reduced hand-grip strength



 See Table 1. Clinical Characteristics that the clinician can obtain and document to support a diagnosis of malnutrition. In: <u>White JV,</u> <u>Guenter P, Jensen GL, et al. J Acad Nutr Diet.</u> 2012;112(5):730-738; co-published in <u>JPEN J Parenter Enteral Nutr.</u> 2012;36(3):275-283.

Expected Practice Outcomes

- Use of the co-published adult malnutrition diagnostic characteristics will become routine in all clinical settings, which will enable:
 - Standardization of the identification and documentation of adult malnutrition
 - Timely implementation of appropriate nutrition intervention(s) based on the clinician's assessment and subsequent monitoring
 - Benchmarking of health care outcomes observed when adult malnutrition is appropriately recognized and addressed, versus outcomes observed when adult malnutrition is undiagnosed, or underdiagnosed and untreated or inadequately treated

Future Directions

- Revision of the characteristics based on validation studies
- Approach NCHS/ICD-9/ICD-10 Coordination Committee with a revised coding nomenclature
- Develop characteristics to diagnose pediatric malnutrition (undernutrition)
- Provide annual updates of the status of the above activities

Additional Resources/Links:

- Journal of the Academy of Nutrition and Dietetics Malnutrition Resource Center and <u>Academy of Nutrition and Dietetics Website</u> (must be an Academy member to access the latter link)
- A.S.P.E.N. Malnutrition Toolkit
- Table of diagnostic characteristics (Academy member)
- Figure depicting revised nomenclature (<u>Academy member</u>)
- FAQs (<u>Academy member</u>)
- Speakers: contact Academy of Nutrition and Dietetics staff

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