Chelsea and Westminster Hospital Wilson



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What are the nutritional issues of HIV individuals referred to a specialised dietitian in an inpatient setting?

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Background

Unintentional weight loss greater than 5% is associated with increased risk of morbidity and mortality and severe weight loss is an AIDS-defining illness. We evaluated the cause of clinically significant weight loss in HIV inpatients, and the effectiveness of inpatient dietetic care received during admission.

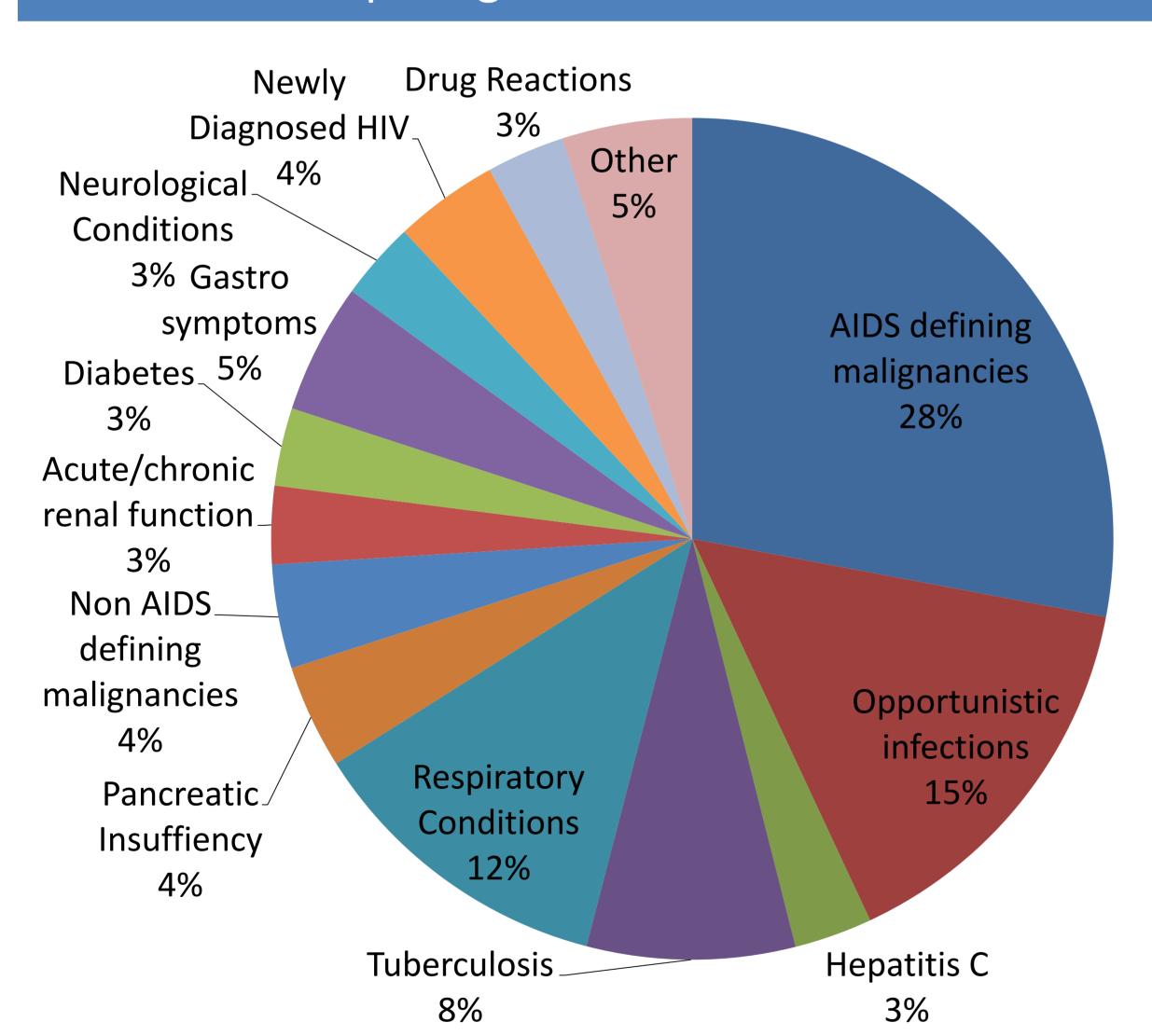
Method

A retrospective analysis of all HIV inpatients that were admitted from January to November 2012, and were assessed by a dietitian was conducted. Outcomes assessed were, the total number of individuals seen by a dietitian, presenting condition, percentage unintentional weight loss prior to admission, (within ≤ 6 months), body mass index (BMI) on admission and discharge and the nutritional intervention given by the dietitian. All patients seen were placed on a nutritional care plan as per the dietitians instruction, with 75% commenced on oral nutritional support and 17.4% enteral tube feeding.

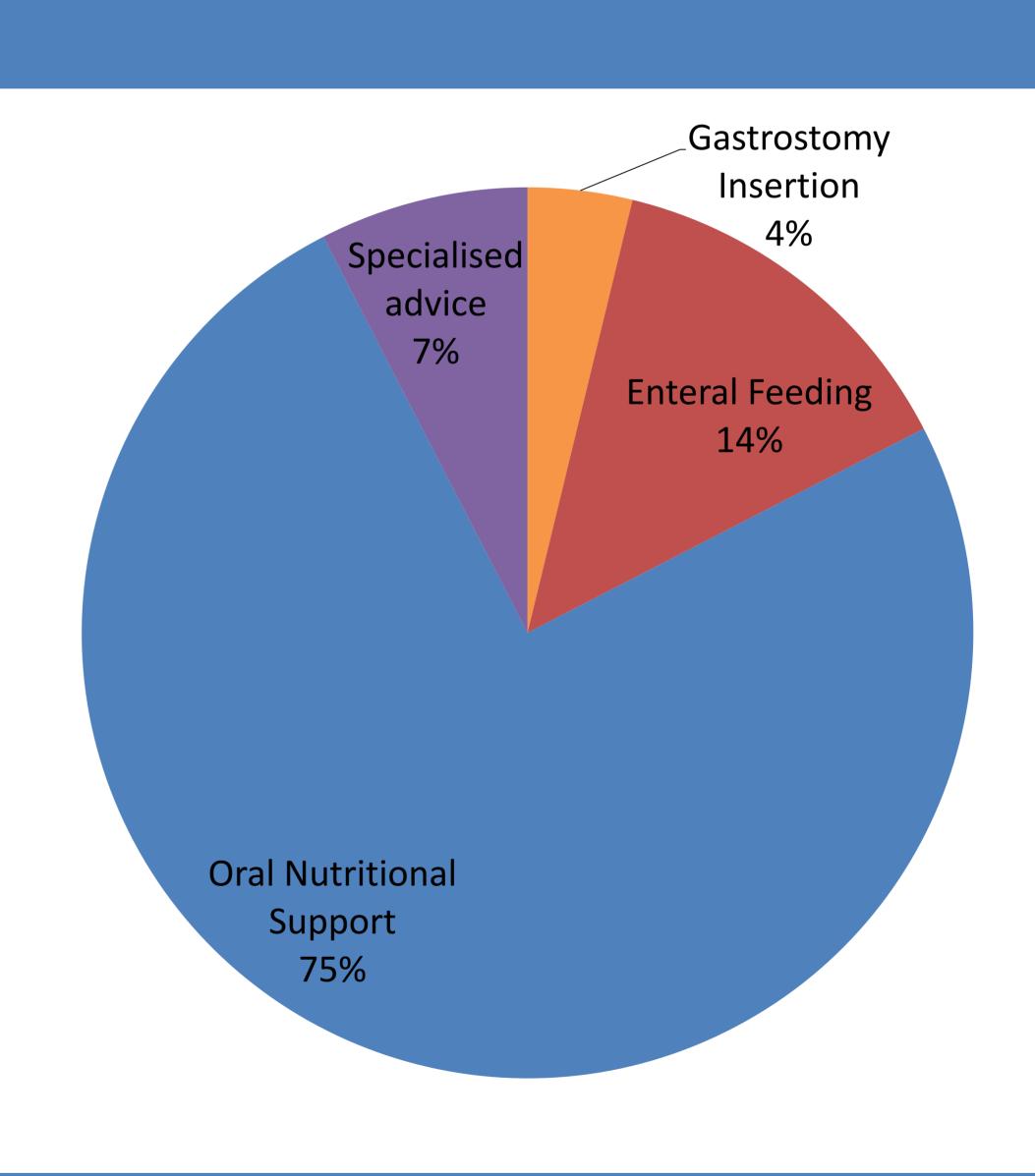
Results

A total of 132 individuals were referred for dietetic support via the multi-disciplinary team or highlighted on the trust malnutrition screening tool as at high risk of malnutrition. 350 reviews occurred of these individuals, with each being seen a mean of 3.2 times (range 1-17). Average pre admission reported weight loss was 11.4% (range 0-45%). Average BMI on admission was 21.4kg/m² and average BMI on discharge was 22.1kg/m².

Percentage of patients and their presenting conditions requiring nutritional intervention



Nutritional Interventions



Conclusion

HIV wasting is an AIDS defining illness and often associated with opportunistic infections. Our data indicates that patients admitted to acute centres are at risk of pre admission malnutrition and clinically significant weight loss. Nutritional care plans specific to patient needs can aid to prevent further weight loss and improve both BMI and patient outcomes. Malnutrition screening should form a routine part of all HIV positive patients admitted to an acute centre, with referral to a specialist dietetic team.

References:

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