

THE GELDERLAND VALLEY NUTRITION ALLIANCE

Eating out on the ward

One in five patients at the local hospital are undernourished. Wageningen researchers are helping to find ways of tempting reluctant eaters, because patients who eat well feel better and require less care and medicine.

TEXT ASTRID SMIT PHOTOGRAPHY AGE FOTOSTOCK & HOLLANDSE HOOGTE

No sooner have you reached the main entrance of the Gelderland Valley hospital in Ede, near Wageningen, than you are offered nutritional advice. 'Eat well through the winter: a varied diet with enough vitamins and fluids' proclaims the poster on the revolving door. It is not for nothing that the hospital greets you this way. It wants to be known as the 'nutrition hospital' of the Netherlands. In other words, the hospital that closely monitors its patients' nutritional status, carries out advanced research and provides patients with an optimal diet, adapted to their needs, tastes and diagnosis.

This is all based on the conviction that good nutrition has much to contribute to a patient's treatment. Being ill is top sport, taking its toll on the body. So it should go together with top nutrition: that is the theory. But patients do not always act on it. In fact, quite a number of patients are undernourished when they are admitted to the hospital, while others lose kilos during their

stay. According to an estimate in a national report on problems in health care in the Netherlands in 2010, one in five patients, whether in hospitals and nursing homes or receiving home-based care, are undernourished, while another 40 percent are at risk of becoming so. Sometimes it is a case of not getting enough calories but it is also a question of insufficient protein or vitamins. These deficiencies can slow recovery, necessitating longer hospital stays and longer periods of requiring care and drugs. In 2008, the Institute for Medical Technology Assessment at the Erasmus University in Rotterdam calculated that undernourishment costs Dutch health care services a full 1.7 million euros per year.

FASTER RECOVERY

So there is a lot to be gained by preventing undernourishment, and the Gelderland Valley Hospital and the Human Nutrition department at Wageningen University (part of Wageningen UR) decided to tackle it together. >



‘Nutrition was for the dieticians’

In 2007, they launched the Gelderland Valley Nutrition Alliance with the aim of ensuring a close collaboration between the university and the hospital in the field of patient nutrition. How could patients’ nutrition before, during and after a hospital stay be improved? Which knowledge was lacking and how could research provide it?

‘The department of Human Nutrition has always tended to focus on preventing diseases’, says Nicole de Roos, coordinator of the Nutrition Alliance on behalf of the university. ‘The reality is that people are getting older and older and end up getting one or more chronic diseases. We want to be able to do something for them too now. Are the old nutritional recommendations still relevant to them?’

Quite a number of research projects are under way already. Research is being done on whether patients make a faster recovery from operations in the chest or abdomen if they take extra vitamin D. Another project is looking at dialysis patients, who run raised risks of cardiovascular disease. Can that be blamed on the strict nutritional advice they receive? De Roos: ‘Collaboration with just one regional hospital has big advantages for us. It gives us access to substantial patient populations and the communication lines are short. If we want to consult our colleagues there we can just get in the car or jump onto our bikes.’

For the hospital too, there are benefits to having a direct

link with the nutrition experts at the university. ‘The most important thing is that we can now link clinical observations and research with fundamental research’, says geriatrician André Janse. ‘Nutrition used to be an issue for a couple of doctors who were doing a bit of clinical research, but now the topic is taken seriously across the board and is on a sound scientific footing. We have gone beyond amateurism.’

The geriatrician is currently studying the relationship between the use of multiple drugs and deficiencies in micronutrients such as vitamins and minerals. Drugs can suppress people’s appetites, leading them to grow weaker. Why it is that undernutrition among patients has received so little attention hitherto, he is not quite sure. ‘I think it is partly to do with our training. We were taught primarily about diseases. Nutrition was for the dieticians.’ But that is changing, Janse hopes. He and his colleagues are drawing up Guidelines on Undernutrition for doctors working with geriatric patients. The idea is that nutrition should be a concern for all the members of the treatment team, not just the dieticians. ‘For us ‘fluids and food’ are now a fixed item on the weekly multidisciplinary consultation’, says Janse.

Joke Huitinck, head of the dietetics department, is trying to get patients’ diet high on the agenda. According to a national guideline, hospitals should screen every patient staying longer than 24 hours for undernutrition. ‘Not every doctor or nurse is very alert to this. But we are managing it now with 80 percent of the patients, and that is quite high compared with other hospitals.’ The patients who turn out to be undernourished are advised on a diet that will enable them to build up their strength fast.’

FASTER RECOVERY

A big problem in hospitals is that patients do not finish their meals. This is partly because they feel unwell and have poor appetites, but the strictly scheduled mealtimes, the predetermined menus and the hospital atmosphere do not help either. ‘We want to make some changes there’, says Menrike Menkveld-Beukers, who coordinates the Nutrition Alliance from the hospital side. She shows a pleasantly decorated room in the neurology department, furnished with wooden tables, linen photo prints of windmills and cows on the walls, and large pot plants on the windowsill. ‘People could

COLLABORATION À LA CARTE

In the Gelderland Valley Nutrition Alliance, Wageningen University (part of Wageningen UR) and the Gelderland Valley Hospital are working together to improve patients’ nutritional status. A proportion of Dutch hospital patients are undernourished and this can slow down their recovery. The alliance is exploring how nutrition before, during and after hospital treatment can be improved.

Wageningen UR Food & Biobased Research is working on this topic outside the alliance too. The focus is on the question of how changing the ambience around mealtimes in nursing homes could improve old people’s appetites and help prevent undernutrition. The department is exploring the effect of pleasant surroundings on the consumption of drugs and diet products, and on health care costs. It is collaborating on this research with the Phliss company, national research organization TNO and the National Institute for Public Health and Environment RIVM.



Atmosphere has a big effect on appetite.

eat here with their visitors, choosing from an à la carte menu. Last year we piloted 'At your Request', a concept designed by the Sodexo company. It was a great success; patients were very satisfied, particularly with the choice of menu and of the timing of their meal, as well as with the different ambience. Here patients can get away from the hospital smells and atmosphere for a little while', says Menkveld-Beukers. 'But it also makes a difference that the food is mostly freshly prepared, so it is tastier. Before the pilot, patients gave the food 7.8 out of 10, and during the pilot more than 8 out of 10.

FORMICA TABLES

That atmosphere has a big effect on appetite was confirmed by a pilot study by Wageningen UR Food & Biobased Research last year. The residents of an old people's home in the Dutch village of Veghel were served their meals in a different setting for two months: no more Formica tables, no more warmed-up meals on compartmentalized plates. Instead they could help themselves to portions of organic meals, seated at nicely laid tables. It worked wonders. They ate one third more vegetables and carbohydrates and three quarters more apple sauce, and they gained an average of half a kilo.

In the same period, elderly people in a nursing home in Oss who continued to eat the old way lost almost half a kilo. 'The old people in Veghel also thought they had been at the table for a shorter time, whereas that was not the case. So the atmosphere matters with meals too – or rather, especially with meals', says Herman Peppelenbos, the coordinator of this project. He has received a grant of almost one million euros from the Ministry of Economic Affairs, Agriculture and Innovation and the Ministry of Health, Welfare and Sport in order to follow up this pilot in other care homes. 'We are convinced that this approach will cut costs. If people eat better, they will probably need fewer drugs and expensive diet products and will feel better, therefore requiring less health care.' The Gelderland Valley Hospital is already convinced of the advantages of a pleasant atmosphere for patients. Before long, the hospital board would like to see all patients' gastronomic tastes being catered to in congenial surroundings. It just has to be agreed on by the various advisory bodies. 'The Gelderland Valley will be the first hospital in Europe to have such luxurious dining rooms', says Menkveld-Beukers proudly. 'We hope that other hospitals will follow our example.' ■