

International Nutrition Survey 2009

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December 1st: Deadline for Data Entry

Please be aware that you should have **all daily nutrition data and patient baseline information** entered online by December 1st, especially if you wish to be considered for the Best of the Best award. We recognize, however, that you may not have access to all 60-day outcomes by this date. Please finalize as many patients as you can, but you may wait until early January to finalize the remainder of your patients. As always, please contact us with questions or concerns.

Please see the 2nd page of this newsletter for a more detailed timeline of the survey.



December 2009
NEWSLETTER



Critical Care
Nutrition

HOT OFF THE PRESS

We are pleased to announce that the second journal article utilizing the 2007 International Nutrition Survey data has been published, and is now available online through Critical Care Medicine:

Jones NE, Dhaliwal R, Day A, Jiang X, Heyland DK. **Nutrition therapy in the critical care setting: What is "best achievable" practice? An international multicenter observational study.** Crit Care Med 2009, DOI 10.1097/CCM.0b013e3181c0263d

The objective of this study was to describe current nutrition practices in intensive care units and determine "best achievable" practice relative to evidence-based Critical Care Nutrition Clinical Practice Guidelines. Adherence to Clinical Practice Guideline recommendations was high for some recommendations: use of enteral nutrition in preference to parenteral nutrition, glycemic control, lack of utilization of arginine enriched enteral formulas, delivery of hypocaloric parenteral nutrition, and the presence of a feeding protocol. However, significant practice gaps were identified for other recommendations. Average time to start of enteral nutrition was 46.5 hrs (site average range, 8.2–149.1 hrs). The average use of motility agents and small bowel feeding in patients who had high gastric residual volumes was 58.7% (site average range, 0%–100%) and 14.7% (site average range, 0%–100%), respectively. There was poor adherence to recommendations for the use of enteral formulas enriched with fish oils, glutamine supplementation, timing of supplemental parenteral nutrition, and avoidance of soybean oil based parenteral lipids. Average nutritional adequacy was 59% (site average range, 20.5%–94.4%) for energy and 60.3% (site average range, 18.6%–152.5%) for protein. Despite high adherence to some recommendations, large gaps exist between many recommendations and actual practice in intensive care units, and consequently nutrition therapy is suboptimal. We have identified "best achievable" practice that can serve as targets for future quality improvement initiatives.

It is through your participation in the International Nutrition Surveys that we are able to shed light on such important research topics. We'd like to sincerely thank you for all of your hard work that makes projects like this possible, and we look forward to your continued enthusiasm for improving nutrition practices in the Intensive Care Unit. We encourage you to circulate this newsletter and the Critical Care Medicine journal article in your department so that your colleagues can appreciate the contribution that your site has made to scientific research through participation in the survey.



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I'm done! Now what?

When you have finished entering data and finalizing your patients, please click on **"Edit ICU Information"**. On this page, check the box beside "Is data entry finalized at your ICU?" Please also answer the questions about screening that can be found at the bottom of this page. You can obtain the answers to these questions by reviewing your screening log, and counting up the number of patients in each column.

Added Extra Patients or Days Online by Mistake?



If you have accidentally added extra days or patients online, and need these patients or days deleted, please

contact Fernando at ferrerf@kgh.kari.net, and state your hospital name, ICU name (if multiple in the same hospital are participating) and the patient number

and days you would like deleted. Please be patient. Fernando will ensure these patients and days are removed before begin data queries and generation of site reports.

Nutrition Quality Improvement Tools

In a new collaboration, Nestle Canada in consultation with Critical Care Nutrition, has developed several tools to assist practitioners in moving their current practice to the best achievable practice. These tools will help to reinforce and implement key Canadian Clinical Practice Guidelines to optimize patient care and outcomes in the ICU.

Please see the "Achieving Best Practice" tab at the Quality Improvement section of www.criticalcarenutrition.com to download some of these tools!



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Did you know?

As of late November we have about 210 sites registered online to participate in the survey from 22 countries! We also already have over 2100 patients online, and almost two thirds of those patients finalized! This year's survey is proving to be quite a success.

Thank you for all of your hard work and enthusiasm!



The International Nutrition Survey's Timeline for 2009/2010

