

MALNUTRITION IN SURGICAL EMERGENCY PATIENTS: UNKNOWN ISSUE

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INTRODUCTION: Malnutrition in hospitals is increasingly becoming more problematic, although its severity in surgical emergency patients has yet to be researched in depth. It entails higher rates of morbimortality as well as an increase in both days hospitalized and re-admissions which inflates health care-related costs.

MATERIAL AND METHODS: Using GLIM (Global Leadership Initiative on Malnutrition) criteria, we evaluated the nutritional state of 84 patients admitted through the emergency department in the Oesophago-Gastric and Bariatric Surgery Unit in our centre.

RESULTS: Of the total patients sampled, 57 (67,85%) were at risk of malnutrition. The percentage of patients suffering malnutrition was 44.04%, of which 15.8% were diagnosed with moderate malnutrition and 48.1% severe malnutrition.

Patients suffering malnutrition stay at hospital for 24 days on average, which implies a longer stay than those without malnutrition (13 days hospitalized on average), but no relation was found regarding any increase in overall complications.

After performing an analysis, malnutrition was significantly higher in oncological patients than in those who were admitted for other causes (58,3% vs 36.6%). However, the age analysis (over-70 vs under-70) showed no significant difference.

CONCLUSION: 50% patients admitted through emergency services were diagnosed from malnutrition.

Oncological patients suffer greater risk and severity of malnutrition. Malnutrition does imply longer stays at hospital; however there is no correlation with further complications.