

The Role of Food for Special Medical Purposes in Managing Malnutrition – A Dietitians Perspective

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1. Introduction

Malnutrition and Disease Related Malnutrition (DRM) are primarily managed by dietary fortification and micronutrient supplementation. Food for Special Medical Purposes (FSMPs) may be used when dietary changes alone are insufficient due to poor appetite or high energy needs⁽¹⁻³⁾.

FSMPs are food products specially formulated for the dietary management of people with certain diseases or disorders⁽⁴⁾. Such products include oral nutritional supplements (ONS), enteral nutrition, FSMPs for infants and foods for dysphagia⁽⁵⁾.

Aim: To investigate the experiences and attitudes of registered dietitians towards the effectiveness of FSMPs to treat people with malnutrition and DRM in Ireland.

2. Methods

- Ethics approval: TU Dublin Research Ethics & Integrity Committee (REIC-21-82).
- Figure 1 summarises the methodology applied.
- Inclusion criteria: being a registered CORU dietitian in Ireland and granting consent to complete the survey.
- Thematic analysis was performed using the method outlined by Braun and Clarke (2006)⁽⁶⁾.

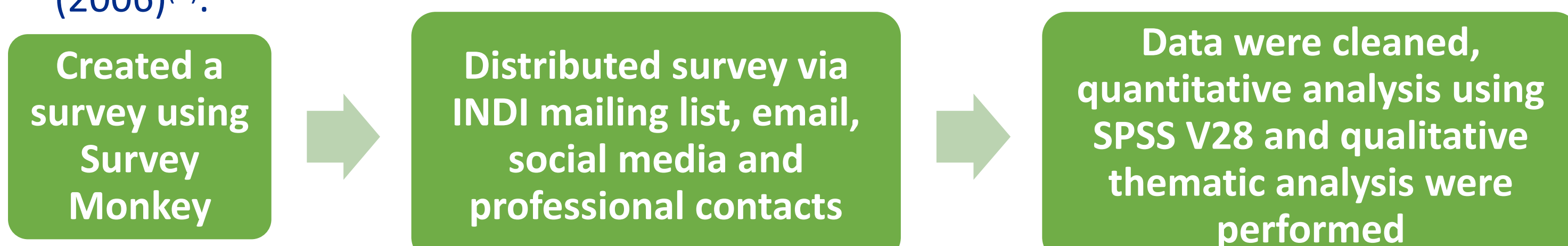


Figure 1: Study Methodology

3. Results

The survey received n=319 responses with n=146 meeting the inclusion criteria (Table 1). Not all questions were mandatory.

Of those respondents meeting the inclusion criteria:

- 64% have a speciality area of dietetics (Table 2).
- 84.4% (n=141) treat people with malnutrition and 82.2% (n=135) treat people with DRM (Figure 2).
- 98.4% and 99.1% find FSMPs useful in the management of malnutrition (n=122) and DRM (n=106), respectively.
- Older adults > 65 years present with malnutrition (45.4%) and DRM (44.1%) most frequently (Figure 3).

Table 1: Demographical Characteristics of Respondents.

Demographical Characteristics of Participants		N	%
Dietitians	CORU Registered	146	100
Work Setting	Inpatient (Hospital) Setting	67	45.9
	Community Setting	34	23.3
	Private Setting	13	8.9
	Academic	11	7.5
	Outpatient (Clinical) Setting	9	6.2
	No Response	6	4.1
	Public Health Policy/Promotion	3	2.1
Level of Experience	Self Employed	3	2.1
	Little Experience (1-2yrs)	15	10.3
	Some Experience (2-5yrs)	27	18.5
	Experienced (5-10ys)	29	19.9
	Very Experienced (10ys+)	74	50.7
No Response	1	0.7	

Table 2: Area of Speciality among Respondents.

Area of Speciality	N	%
Oncology/Renal	16	11.0
Paediatric/Neonatology	13	8.9
Older Persons	11	7.5
Gastroenterology/Bariatric	9	5.5
Home Enteral Feeding and Nutrition Support	7	4.9
Other ¹	6	4.2
Diabetes and Obesity	5	3.4
Inherited Metabolic Disorders	5	3.4
CAHMS ² /Eating Disorders/Mental Health	4	2.7
Critical/Palliative Care	4	2.7
Sports Rehabilitation	3	2.1
Cystic Fibrosis	2	1.4

Footnote: ¹ Other: Disabilities, Motor Neurone Disease & Neurology, Public Health, Maternity, Strokes, Surgery. ² CAHMS: Child and Adolescent Mental Health Services.

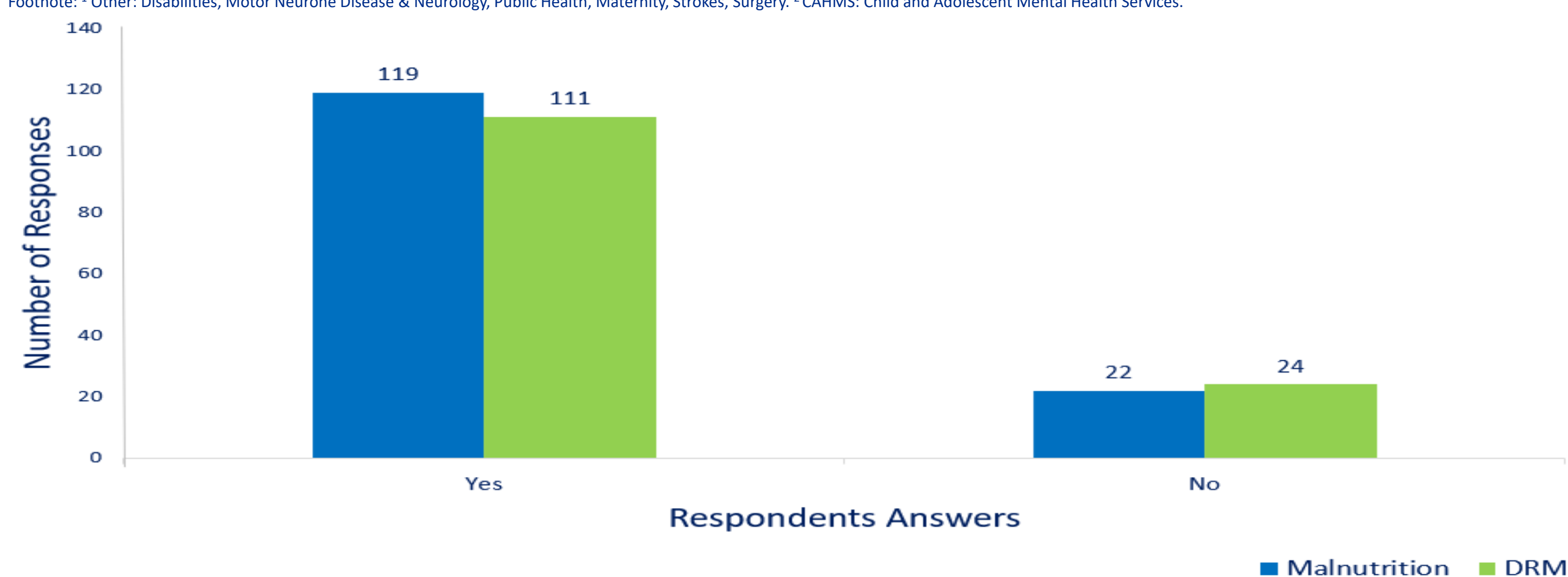


Figure 2: Number of Respondents that treat people with malnutrition and DRM.

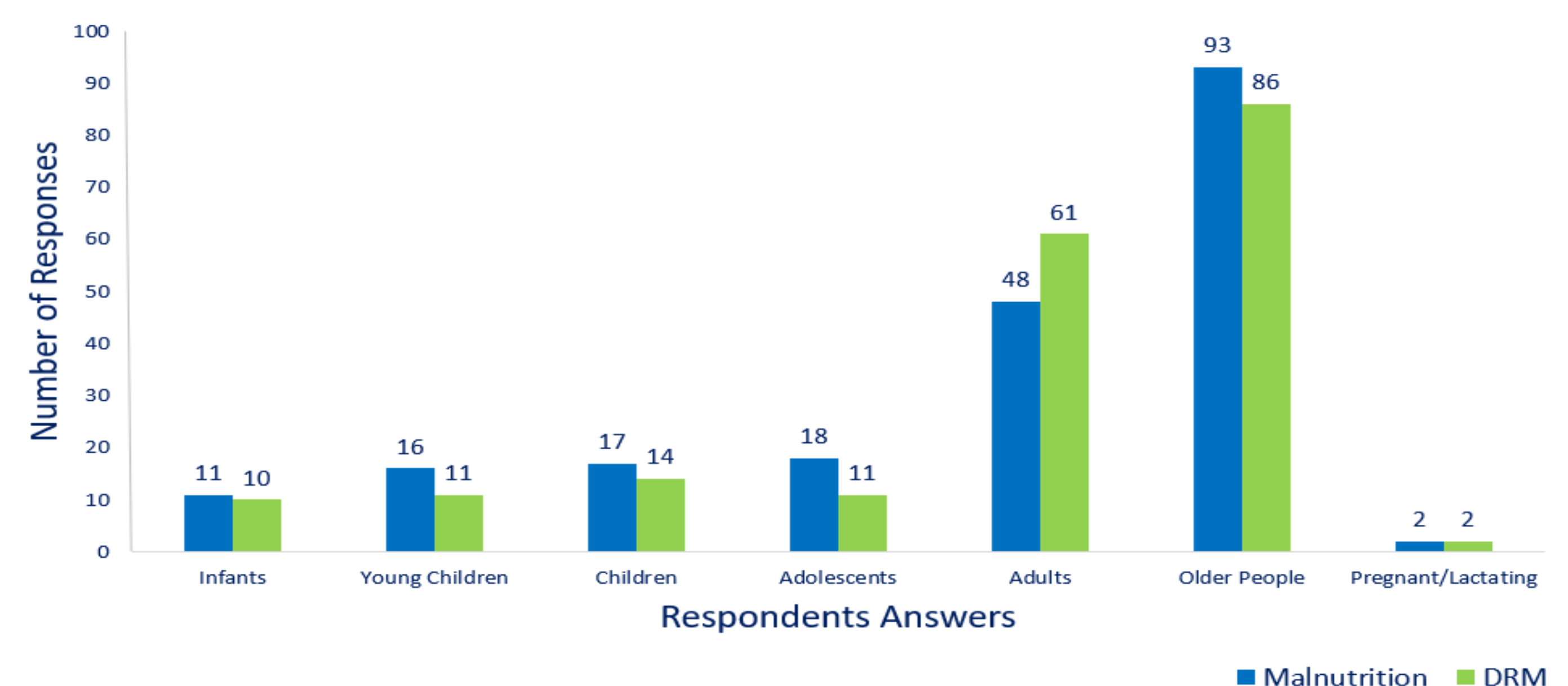


Figure 3: Population groups that present most frequently with malnutrition or DRM according to respondents.

Regulations, Screening tools, Information and Reimbursement

- Out of those who responded (n=128), over a third (39.9%) were unaware of Regulation (EU) No 609/2013 and Commission Delegated Regulation (EU) 2016/128 which governs FSMPs.
- 73.4% of those respondents (n=128) were aware that all FSMPs on the Irish market must be notified to the Food Safety Authority of Ireland (FSAI).
- When using the Malnutrition Universal Screening Tool (MUST), respondents reported that they recommend FSMPs to people who are at medium (34.7%) and high (44.5%) risk of malnutrition and who are at medium (33.8%) and high (44.2%) risk of DRM.
- Out of n=129 respondents, 89.9% felt they were well informed about FSMPs on the Irish market.
- Respondents (n=129) reported professional bodies (65.1%), conferences, events or webinars (63.6%) and industry (62%) as the most common sources of information.
- Out of n=117 respondents, 95.7% recommend FSMPs on the Primary Care Reimbursement Service (PCRS) Scheme.

Thematic analysis

- When asked 'Does the PCRS Scheme limit options of FSMPs available to you for recommendation?', three themes were identified; Patient Care Gap, Product Issues and PCRS Approval. For the question 'Are FSMPs affordable for patients if they are not on the PCRS Scheme?', one major theme was identified as High Cost (Figure 4).

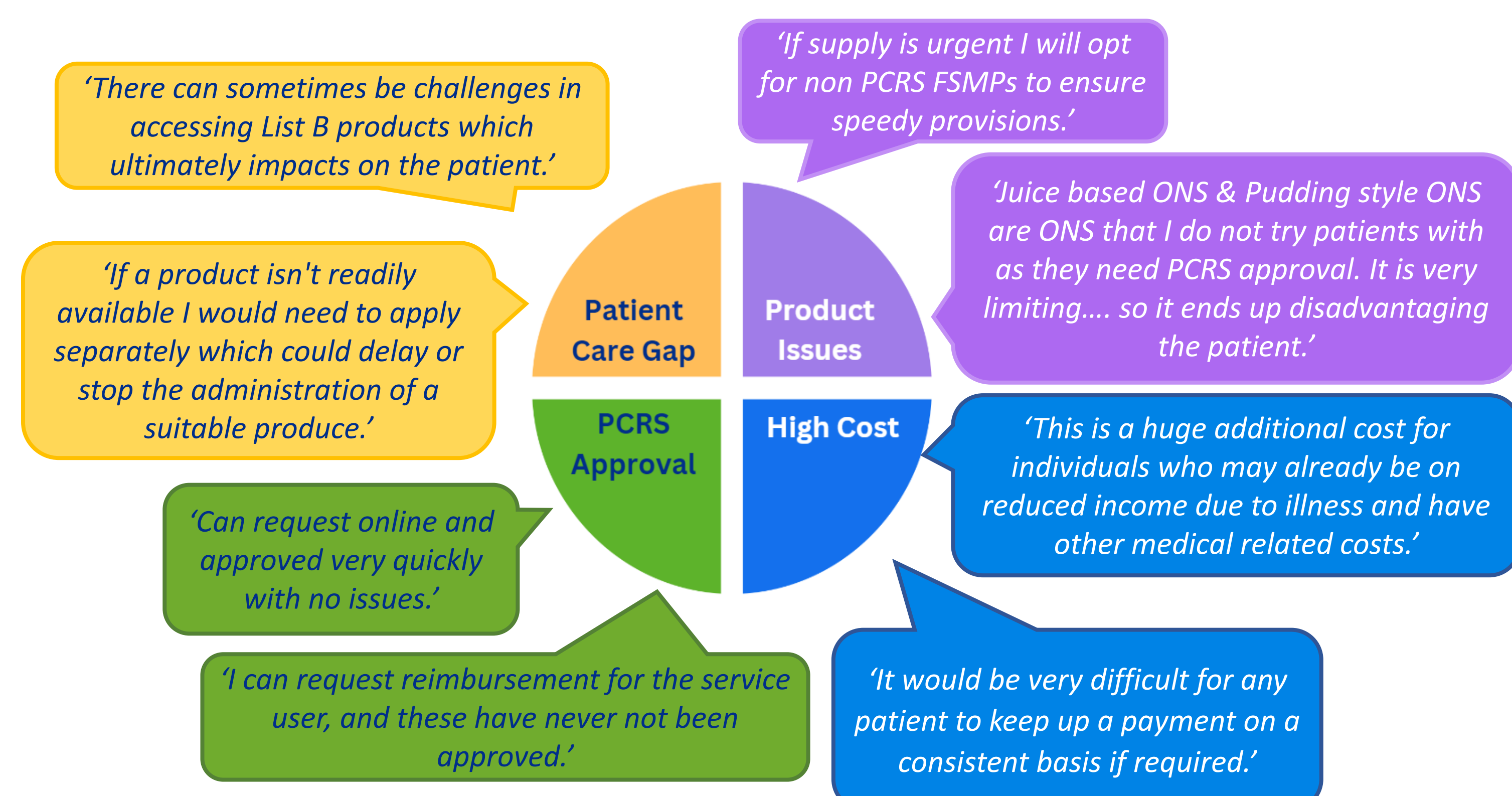


Figure 4: Thematic analysis on the PCRS Scheme

5. Conclusions & Recommendations

Conclusion

- To our knowledge, this is the first study completed in Ireland that investigated the experiences and attitudes of Dietitians towards the effectiveness of FSMPs for the management of malnutrition and DRM.
- Registered dietitians in Ireland find FSMPs effective for treating people with malnutrition and DRM, particularly in the >65 year age group.

Limitations of the study include:

- Only using the MUST screening tool to categorise risk of malnutrition/DRM.
- Only referring to the PCRS Scheme to investigate affordability of FSMPs.
- The findings in this study may need to be validated with a larger sample of registered Dietitians in Ireland.

Recommendations:

- As over a third of respondents were unaware of Regulations that govern FSMPs, improving awareness surrounding this area may be beneficial for Irish dietitians.
- Future research could investigate the affordability and accessibility of products in relation to the PCRS Scheme in more detail.

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References

- National Institute for Health and Care Excellence. (2017) [Available at: <https://www.nice.org.uk/guidance/cg32>].
- HSE. Prescribing Pathway for the Initiation and Renewal of Standard Oral Nutritional Supplements (ONS) for Adults Living in the Community. (2019) [Available at: [prescribing_pathway_and_list.pdf \(hse.ie\)](https://www.hse.ie/eng/services/list/2/primarycare/community-funded-schemes/nutrition-supports/malnutrition-in-ireland/)].
- HSE. Malnutrition in Ireland. [Available at: <https://www.hse.ie/eng/services/list/2/primarycare/community-funded-schemes/nutrition-supports/malnutrition-in-ireland/>].
- Regulation (EU) No 609/2013. [Available at: <https://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX:32013R0609>].
- HSE. How to use Oral Nutritional Supplements. [Available at: [how-to-use-oral-nutritional-supplements.pdf \(hse.ie\)](https://www.hse.ie/eng/services/list/2/primarycare/community-funded-schemes/nutrition-supports/malnutrition-in-ireland/)].
- Braun V, Clarke V. Using thematic analysis in psychology. Qualitative research in psychology. 2006;3(2):77-101.