

Port Elizabeth hospitals move into new professional era with 22 dietitian posts

In September 1993 only 2 of the 3 dietitian posts in 3 state hospitals in Port Elizabeth (PE) were occupied. PE Clinical Support Services of the Eastern Cape Province were non-existent, and very limited support structures were available. A motivation for the improvement of the structure and the need for more dietitians was prepared by Annatjie Smith and sent to the health managers in Bisho in 1996, but without much success. With continued lobbying by Annatjie Smith and the help and support of Professor Demetre Labadarios, the need for more dietitians was again motivated in 1998, resulting in the creation of 5 dietitian posts for the PE hospitals complex (Livingstone, Dora Nginza and provincial hospitals). At that time, posts were also motivated for the Uitenhage hospital and other state institutions in the PE metropole.



A Port Elizabeth provincial hospital.

In July 2004 a manager for Clinical Support Services (CSS) for the complex was appointed. On the request of the newly appointed manager, members of the clinical support team participated in strategic planning meetings (under the leadership of Annatjie Smith) and created an organogram for the needed services. The latter created a better understanding of the needs for the nutritional management of people in general and patients in particular. The process was finalised by the MEC of Health, with the creation of 22 posts for dietitians within the PE,

East London and Umtata hospital complexes. The posts include 1 Manager Dietetics (level 10), and three level 9, six level 8, nine level 7 and three level 6 (Community Service) posts. There are also level 8 posts for dietitians at the HIV centres.

This is a welcome achievement for a province with previously very limited dietitian posts.

Source: www.ecdoh.gov.za

Nestlé Nutrition Institute identifies seven-tier strategy for reducing disease-related malnutrition

The Nestlé Nutrition Institute has released a seven-tier strategy for reducing disease related malnutrition in hospitalised and community patients. The strategy was developed at a Nestlé Nutrition Institute-sponsored multidisciplinary expert workshop, held in Peebles, Scotland on 25 - 28 March 2007, where 45 of the world's leading nutrition stakeholders, representing 15 countries, met to discuss the global malnutrition epidemic in hospitals.

The Institute's strategy states that to reduce disease-related malnutrition, the following should be addressed:

- Add nutrition education to the core medical school curriculum
- Educate hospital physicians and other allied health providers about the impact of undernutrition on patient morbidity and mortality
- Position nutrition as a recognised medical speciality in its own right
- Recognise that undernutrition is often a contributing factor to the disease process (not merely a consequence)
- Address nutrition as part of routine disease management
- Develop universal definitions for 'malnutrition' and 'under-nutrition'
- Create clinical and regulatory partnerships to enable governments and clinicians to work

together to create modern, practical nutrition policies.

Malnutrition has been shown to negatively affect clinical outcomes by increasing hospital length of stay, patient recovery time, and use of medical resources. A number of European and US studies have shown that malnutrition affects as many as 55% of hospitalised patients over the age of 65 and over 10% of the elderly general population, a scenario that can be worse in South Africa and other African countries. Malnutrition is a burden to health care systems as well as individuals and their carers.

Professor Marinos Elia, Professor of Clinical Nutrition and Metabolism at the University of Southampton, UK and co-chair of the Nestlé Nutrition Institute expert meeting, said: 'The clinical and economic evidence for treating malnutrition is now more compelling than ever. E.g., in the UK alone, the cost of treating malnutrition and its associated morbidity is more than £7 billion per year. This is greater than the cost of treating obese patients, an issue which is currently attracting a great deal of public and governmental attention. Estimates suggest that even in well-developed countries, malnutrition is an unnecessary health care burden which could easily be reduced.'

The core elements of the Institute's strategy are echoed by a report from the European Nutrition for Health Alliance, an expert group which includes 9 non-governmental nutrition-related organisations. This Europe-wide consensus report, entitled 'From Malnutrition to Wellnutrition: Policy to Practice', urges policy-makers to recognise the benefits of treating malnutrition in hospitalised patients, and has recently been submitted to the 27 EU Ministers for Health, the European Commission, the European Parliament, the World Health Organization, and the Council of Europe.

Source: www.nestle-nutrition.com