Malnourished older adults with informal caregivers admitted to rural rehabilitation units remain malnourished during and after rehabilitation: A prospective cohort study of current practice

Skye Marshall  
Bond University, skye_marshall@bond.edu.au

Adrienne Young  
Royal Brisbane and Women’s Hospital

Judith Bauer  
The University of Queensland

Elizabeth Isenring  
Bond University, elizabeth_isenring@bond.edu.au

Follow this and additional works at: http://epublications.bond.edu.au/hsm_pubs

Part of the Geriatrics Commons, and the Nutrition Commons

This work is licensed under a Creative Commons Attribution-No Derivative Works 4.0 License.

Recommended Citation
Marshall, Skye; Young, Adrienne; Bauer, Judith; and Isenring, Elizabeth, "Malnourished older adults with informal caregivers admitted to rural rehabilitation units remain malnourished during and after rehabilitation: A prospective cohort study of current practice" (2015). Faculty of Health Sciences & Medicine Publications. Paper 1260.

This Conference Presentation is brought to you by the Faculty of Health Sciences & Medicine at ePublications@bond. It has been accepted for inclusion in Faculty of Health Sciences & Medicine Publications by an authorized administrator of ePublications@bond. For more information, please contact Bond University’s Repository Coordinator.
Malnourished older adults with informal caregivers admitted to rural rehabilitation units remain malnourished during and after rehabilitation: a prospective cohort study of current practice

Skye Marshall, Adrienne Young, Judith Bauer, Elizabeth Isenring
a) Centre for Dietetics Research, The School of Human Movement and Nutrition Sciences, University of Queensland, Brisbane, Australia
b) Faculty of Health Sciences and Medicine, Bond University, Robina, Australia
c) skye_marshall@bond.edu.au
d) Royal Brisbane and Women’s Hospital, Herston, Australia

Introduction
Understanding the nutritional journey older adults make from rehabilitation to home may help to engage and support the patient and their informal caregiver during this process. This study aimed to determine the change in nutritional status, physical function and health-related quality of life (HRQoL) amongst malnourished older adults (≥65 years) with informal caregivers admitted to rural rehabilitation and 12 weeks post-discharge to the community.

Methods
Participants were 30 adults (μ79.5±7.1 years) with informal caregivers, admitted to rehabilitation units in rural New South Wales, and were provided with standard nutrition services and no routine engagement of informal caregivers. Observational data were collected prospectively from August 2013 to February 2014.

Nutrition status (assessment of malnutrition) via the Scored Patient-Generated Subjective Global Assessment (PG-SGA) was the primary outcome, and was measured at admission, discharge and 12 weeks post-discharge. Physical function (via the Modified Barthel index) and health-related quality of life (via the AQoL-6D) were measured at discharge and 12 weeks post-discharge only. Linear mixed methods was used to account for attrition.

Results
- At admission, half the participants were moderately malnourished and half were severely malnourished (figure 1).
- Only four patients were well-nourished 12 weeks post-discharge.
- The majority of the cohort became and remained ‘moderately’ malnourished during admission and post-discharge.
- The Scored PG-SGA score was found to be significantly lower at discharge and post-discharge than at admission (table 1) indicating an improvement in nutrition status during admission and post-discharge. However, the mean score above the cut-off of 7 indicating the cohort remained malnourished.
- Following discharge, there was a trend showing decline in physical function and no improvement was found in health-related quality of life.

Conclusions
Malnourished older adults admitted to rural rehabilitation units with basic nutrition care and limited engagement of informal caregivers are discharged with moderate malnutrition, and remain moderately malnourished in the community for at least 12 weeks. Physical function and health-related quality of life remain below population norms. Increased dietitian intervention and engagement of the informal caregiver early in rehabilitation provides an opportunity to improve patient outcomes once they are home.

Table 1: The nutrition status of older adults at admission, discharge and 12 weeks post-discharge.

<table>
<thead>
<tr>
<th></th>
<th>T1: Admission (n=30)</th>
<th>T2: Discharge (n=29)</th>
<th>T3: 12 weeks post-discharge (n=17)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjusted Scored PG-SGA score</td>
<td>mean±SE</td>
<td>mean change from T1</td>
<td>mean change from T2</td>
</tr>
<tr>
<td></td>
<td>11.2±6.7</td>
<td>-</td>
<td>7.8±0.7</td>
</tr>
<tr>
<td></td>
<td><strong>P&lt;0.001</strong></td>
<td></td>
<td><strong>P&lt;0.001</strong></td>
</tr>
</tbody>
</table>

* Significantly different from T1 (*P<0.05)
** Significantly different from T1 (P<0.001)
A higher PG-SGA score indicates increased need for nutritional intervention


This study received no specific funding. S Marshall is supported by an Australian Postgraduate Award for the duration of her candidature.