

A.S.P.E.N. Top Five Strategic Initiatives

The American Society for Parenteral and Enteral Nutrition (A.S.P.E.N.) is dedicated to improving patient care by advancing the science and practice of nutrition support therapy. Founded in 1976, A.S.P.E.N. is an interdisciplinary organization whose members are involved in the provision of clinical nutrition therapies, including parenteral (PN) and enteral (EN) nutrition—nutrition provided intravenously vs. via a feeding tube. For more information about A.S.P.E.N. please visit www.nutritioncare.org.

A.S.P.E.N. is currently working on five key clinical nutrition practice initiatives outlined here. For questions about these issues, please contact **Peggi Guenter** at peggig@aspen.nutr.org.

1 Universal Understanding of Malnutrition: Making malnutrition a high priority

Malnutrition is a prevalent issue that has significantly negative implications on patient outcomes. Therefore, A.S.P.E.N. is working to define, diagnose and treat malnutrition. This initiative was prompted by the recognition that generally agreed upon definitions of malnutrition have been lacking and recent evidence that suggests that varying degrees of acute or chronic inflammation are key contributing factors in the diagnosis and treatment of disease-related malnutrition¹.

- ▶ April 2010—A.S.P.E.N. endorsed new and universally applicable definitions of disease-related adult malnutrition. The new definitions are a result of a major collaboration between A.S.P.E.N., the European Society for Clinical Nutrition and Metabolism (ESPEN), and other international partners.
- ▶ A.S.P.E.N.'s work on this topic includes a paper that proposes an etiology-based construct such that the affected adult is assigned to one or more of three forms of malnutrition: starvation-related, chronic disease-related or acute disease/injury-related.
- ▶ A.S.P.E.N. is currently working on pediatric malnutrition definitions, better coding for malnutrition diagnoses and a white paper on malnutrition and EN therapy.

¹Jensen GL, Mirtallo J, Compher C, et al. Adult starvation and disease-related malnutrition: a proposal for etiology-based diagnosis in the clinical practice setting from the International Consensus Guideline Committee. *JPEN J Parenter Enteral Nutr.* 2010;34(2):156-159.

2 Enteral Nutrition Practice Recommendations, Safety and Awareness: Guiding the practice of enteral nutrition

When clinical issues and questions arise, A.S.P.E.N. gathers the experts to study the issues and make clinical recommendations using the best evidence-based methods.

- ▶ 2009—A.S.P.E.N.'s Enteral Nutrition Practice Recommendations were endorsed by the American Dietetic Association (ADA), the American Society of Health-System Pharmacists (ASHP) and the Institute for Safe Medication Practices (ISMP).
- ▶ March 2010—A.S.P.E.N.'s Enteral Nutrition Practice Recommendations were abstracted and accepted for posting to the Agency for Healthcare Research and Quality (AHRQ) National Guideline Clearinghouse™ (NGC; www.guideline.gov).
- ▶ A.S.P.E.N. and Nestlé HealthCare Nutrition launched two safety campaigns—**Be A.L.E.R.T.** in 2009 and **Be A.W.A.R.E.** in 2010—aimed at educating nurses to help prevent enteral misconnections, improve EN safety and provide proper medication administration. These campaigns deliver A.S.P.E.N.'s Enteral Nutrition Practice Recommendations to the bedside. For more information on A.S.P.E.N.'s safety initiatives including **Be A.L.E.R.T.** and **Be A.W.A.R.E.** campaigns, visit www.nutritioncare.org/safety.



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3 Action Plan to Address Physician Nutrition Expert Shortage: *Prioritizing ways to change clinical nutrition education*

In the face of rising clinical nutrition issues and lack of physicians educated in nutrition, A.S.P.E.N. is working to address the shortage of physician nutrition experts in the United States. A Summit was held in December 2009 and brought together 50 of the most renowned national and international clinical nutrition thought leaders to develop a five-year action plan to increase the number of physicians in clinical nutrition.

- ▶ As a result of the summit, participants are currently compiling position papers on each of the following areas that will be published in the *Journal of Parenteral and Enteral Nutrition (JPEN)*: Education, Research, Practice Management, Board Certification, Career Development
- ▶ A.S.P.E.N.'s Public Policy Committee is also working on a Reimbursement Toolkit that will assist physicians and other clinicians obtain better levels of reimbursement for nutrition support activities.

4 National Patient Registry/Nutrition Outcomes Database: *Providing patient data collection in nutrition support therapies*

A.S.P.E.N. will develop and maintain a nutrition outcomes database which will support and guide the use of nutrition support therapies. This web-based tool will collect data on patients receiving enteral nutrition and parenteral nutrition.

- ▶ There is currently no database in the United States that tracks the outcomes on patients being treated with EN and PN and the PN data that exists in the literature is severely outdated.
- ▶ A pilot program on home PN will begin in January 2011. This program will be followed by other EN and PN tracking programs.
- ▶ For the home PN pilot program, institution and home infusion company providers (known as sites) will be solicited by A.S.P.E.N. in late 2010 to join the patient registry program. After they submit data, they will be allowed to analyze and publish their own series and benchmark against the total pooled data.

5 Error Reporting in Nutrition Support Therapy: *Gathering data from errors in EN and PN to reduce future occurrence of such errors*

While not traditionally thought of as medications, EN and PN are therapies that are prescribed, dispensed, administered and monitored similar to medications. Administration also involves infusion devices that may be used in error. Errors range from “hazardous conditions” (situations that may lead to an error), to “close call” type errors that do not reach the patient (e.g. PN bag made incorrectly but never hung), to errors that cause patient harm (EN formulation delivered into an IV line).

- ▶ A.S.P.E.N. and the Institute for Safe Medication Practices (ISMP) launched a collaborative project to educate clinicians about nutrition support therapy error reporting. For more information visit www.nutritioncare.org/safety.
- ▶ ISMP uses error reports submitted to its program to learn more about the causes of errors and to share information and practical prevention recommendations with other healthcare practitioners and agencies, including A.S.P.E.N. members. In addition, A.S.P.E.N. and ISMP will jointly analyze errors submitted and publish error report findings.

A.S.P.E.N.—Advancing the science and practice of nutrition support therapy.



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