

ASPEN – 50 Years in the Making



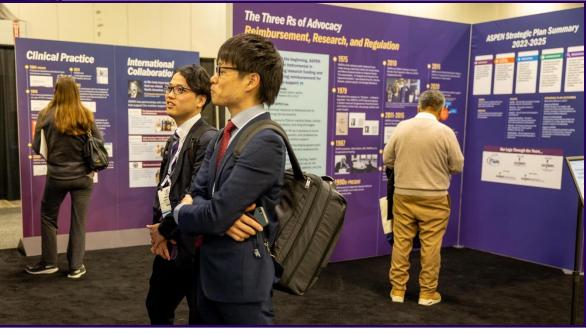
Vincent W. Vanek, MD, FACS, FASPEN

- Associate Program Director General Surgery Residency
- St. Elizabeth Hospital, Youngstown, OH
- Professor Surgery, Northeast Ohio Medical University
- ASPEN President 7/2007 to 6/2008



ASPEN 50th Anniversary Celebration Booth







ASPEN 50th Anniversary Celebration Booth

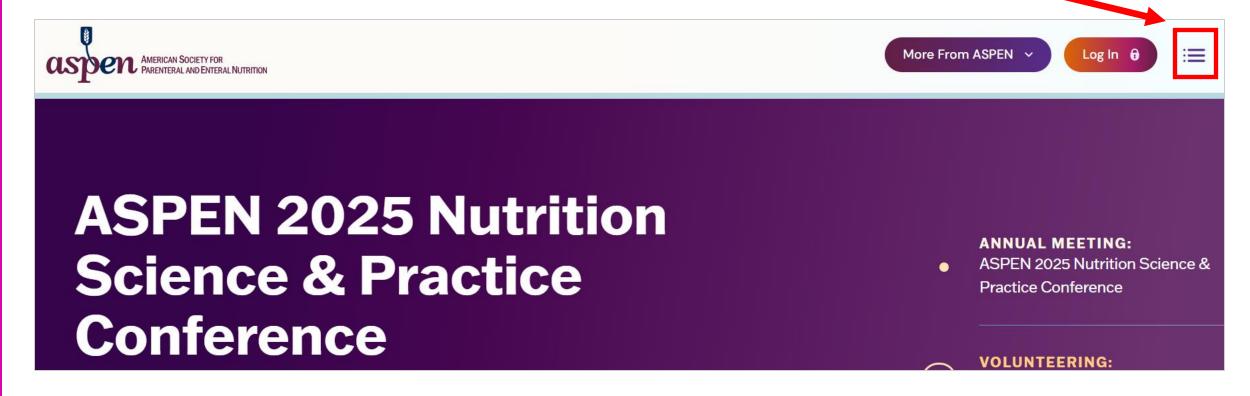




Visit the ASPEN Website History Section

www.nutritioncare.org

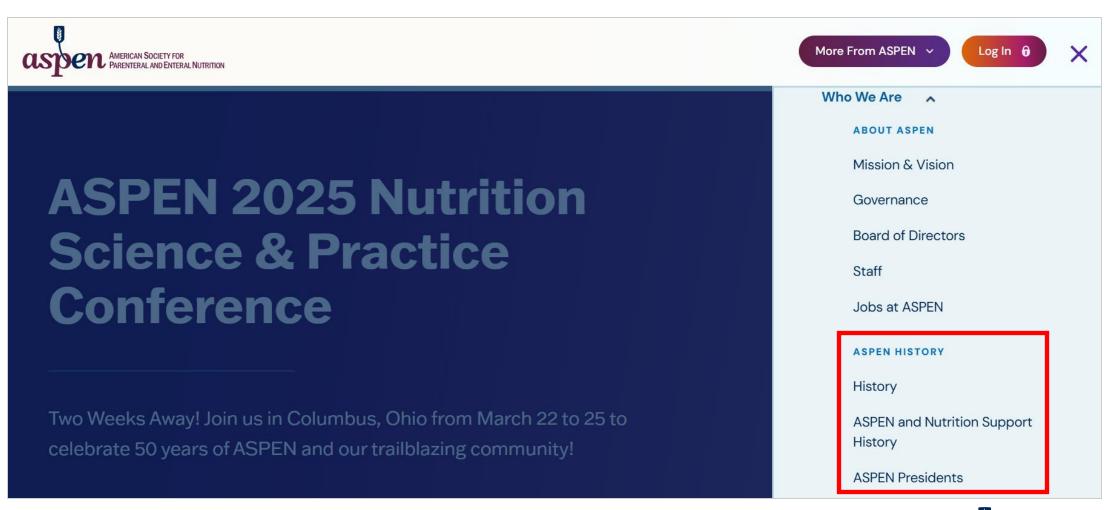
Click on the drop-down icon to get to the History section





Visit the ASPEN Website History Section

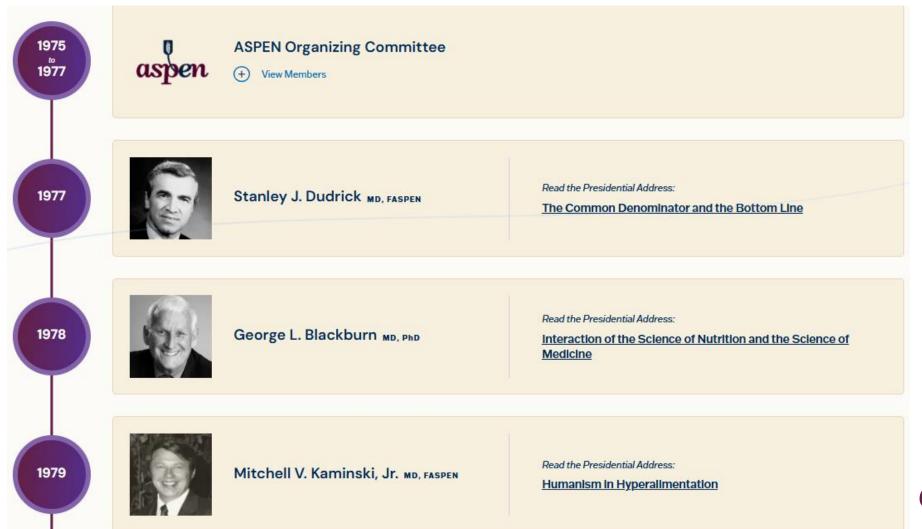
Click on the items under **ASPEN HISTORY** – more to come!





Visit the ASPEN Web Site History Section

Click on **ASPEN Presidents** hyperlink to see the list of Presidents in chronological order with hyperlinks to their Presidential addresses





Five "W"s of ASPEN

- **1.Why?**
- 2.When?
- 3.Where?
- 4. Who?
- 5.What?



Why ASPEN Was Formed?

American

Society for

Parenteral and

Enteral

Nutrition



300 BC	Hippocrates first physician to use rectal feedings for EN therapy via a long tube with a funnel or syringe attached to the outside end	
1617	Small silver nasopharyngeal tube used to feed patients with tetanus	
1646	Flexible leather transnasal tube used to feed into the stomach	
1876	First successful gastrostomy in humans	
1878	First successful jejunostomy in humans	
1882	President Garfield shot during an assignation attempt was kept alive with rectal feedings for 79 days before succumbing to his injuries	
1894	Dr. Stamm standardized the gastrostomy technique, knows as the Stamm gastrostomy	
1895	Dr. Eiselbreg modified the jejunostomy technique, which is still in use today	
1910	Development of weighted NG tube that could pass into the duodenum	
1915	Development of a weighted NG tube that could pass into the jejunum	



[•] Cresci G et al. The history of nonsurgical enteral tube feeding access. Nutr Clin Pract. 2006;21(5):522-28.

[•] Vassilyadi F et al. Hallmarks in the history of enteral and parenteral nutrition: from antiquity to the 20th century. Nutr Clin Pract. 2013;28(2):209-17.

1658	IV made from goose quill used to infuse wine, ale, and opiates into dogs		
1831	IV infusion of saline solution into humans for treatment of cholera		
1843	IV infusion of sucrose into humans with detection of glucose in urine		
1904	subcutaneous infusion of peptone, fat, glucose, and salt		
1911	infused glucose postoperatively in humans		
1936	IV infusion of enzymatically hydrolyzed proteins into dogs and humans		
1939	IV infusion hydrolyzed proteins and glucose into humans		
1949	successful infusion of PN into adult dogs		

Early 1960s – Despite the above advances, the prevailing dogma was that "Feeding entirely by vein is impossible; even if it were possible, it would be impractical; and even if it were practical, it would be unaffordable!"

1963 – Dr. Jonathan Rhoads, Surgery Chair & General Surgery Residency Program Director, inspired one of his 3rd year residents, Dr. Stanley Dudrick, to dedicate his mandatory research year to solving the problems of Total Parenteral Nutrition (TPN)

[•] Vassilyadi F et al. Hallmarks in the history of enteral and parenteral nutrition: from antiquity to the 20th century. Nutr Clin Pract. 2013;28(2):209-17.

Dudrick SJ. Rhoads Lecture: a 45-year obsession and passionate pursuit of optimal nutrition support: puppies, pediatrics, surgery, geriatrics, home TPN, A.S.P.E.N., et cetera. JPEN J Parenter Enteral Nutr. 2005:272-87.

Starting at 8 weeks of age, six Beagle puppies were placed on TPN and they gained weight and matured at the exact same rate as their six orally-fed litter mates

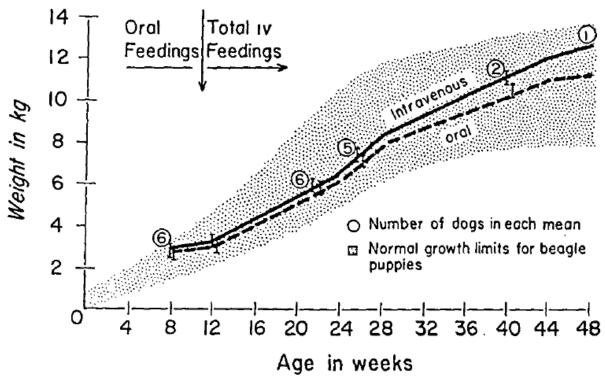
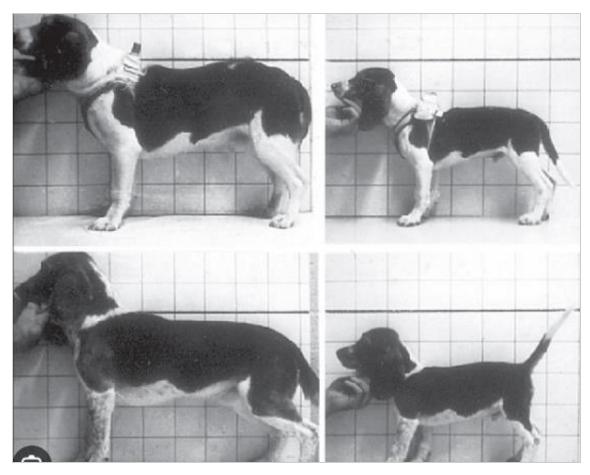
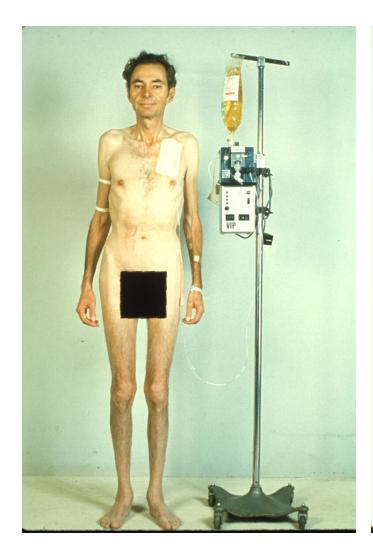


Fig. 2. Composite growth curves of 6 intravenously fed puppies and their paired orally-fed litter mates. Intravenous nutrients were administered exclusively for study periods of 10, 15, 30, and 37 weeks.









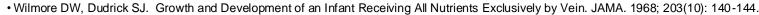
Successfully administered PN with positive nitrogen balance achieved in 6 consecutive malnourished adult patients with chronic, complicated GI diseases

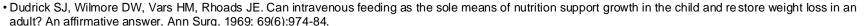




7/1967 Dr. Dudrick graduates from his General Surgery residency and remains on staff at the Hospital of the University of Pennsylvania

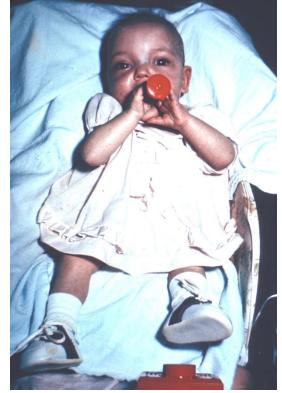
8/1967 Dr. Dudrick receives a consult from Children's Hospital of Philadelphia on a post-op 3-week-old baby with almost complete intestinal atresia who was dying of malnutrition





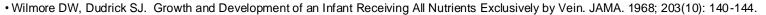






8/9/1967 – The newborn was started on TPN and over the next several weeks, the baby gained weight and became more alert, active, and responsive

After 400 days on TPN, the baby was growing and maturing normally and was tolerating small amounts of oral feedings ("trophic feedings")



[•] Dudrick SJ, Wilmore DW, Vars HM, Rhoads JE. Can intravenous feeding as the sole means of nutrition support growth in the child and restore weight loss in an adult? An affirmative answer. Ann Surg. 1969; 69(6):974-84.



2005 ASPEN Annual Rhoads Lecture

Dr. Dudrick presented "A 45-year obsession and passionate pursuit of optimal nutrition support: puppies, pediatrics, surgery, geriatrics, home TPN" (JPEN 2005; 29(4)272-87)



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Early History of Parenteral Nutrition

2010 OSPEN Fall Nutrition Symposium – Youngstown, OH



- Vince Vanek, MD "Current Parenteral Vitamin and Trace Element Solutions – Too Little or Too Much?"
- Laura Matarese, PhD, RD "Parenteral Glutamine – Fact or Fiction?"
- Doug Seidner, MD "Parenteral Fat Emulsions (FE) – Soybean, MCT, Olive Oil, or Fish Oil – Does It Make a Difference?"
- Stanley Dudrick, MD "The Unsanitized History of the Development of TPN: A Novel Approach to Parenteral Nutrition



Why Was ASPEN Formed?

Early 1970's, despite many advances, there were still many challenges

Enteral Nutrition Challenges

- 1. Limited availability of standardized commercial formulas
- 2. Inconsistent nutritional composition of homemade blenderized diets
- 3. Potential for infection due to improper handling
- 4. Need for better enteral access tubes and techniques
- 5. Difficulties in monitoring nutrient deliver

Parenteral Nutrition Challenges

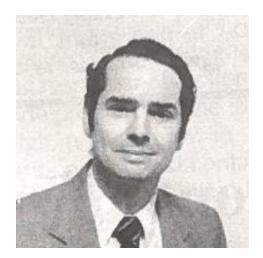
- 1. Inability to formulate complete nutrition solutions
- 2. Lack of appropriate IV fat emulsions resulting in complications and fatty acid deficiencies
- 3. Lack of IV multivitamins and IV multi-trace elements leading to micronutrient deficiencies
- 4. Issues with maintaining aseptic technique during preparation and administration
- 5. Lack of support to manage and maintain patients on long term PN support at home
- Need for an organization dedicated to helping physicians, dietitians, pharmacist, nurses, and patients face these challenges!
- ASPEN would rise to the challenge and meet this need!



ASPEN - When, Where, & Who?



Dr. Mitchell Kaminski, Jr.



Dr. John Grant

6/1972 – At a conference on "Parenteral Nutrition and Special Diets" held in Washington, DC, a group of individuals led by Dr. Mitchell Kaminski Jr. drafted a set of goals for a new medical society focused on specialized nutrition support

Late 1972 – Dr. Kaminski and Dr. John Grant founded a local society in conjunction with the American Hyperalimentation Society in Washington, DC

1972 to 1974 – Numerous loosely organized local and regional groups were formed under various names related to parenteral nutrition and/or specialized nutrition support



ASPEN - When, Where, & Who?

6/5/1975

- ASPEN was founded during the "Symposium on Fat Emulsions in Parenteral Nutrition" meeting sponsored by the Department of Foods and Nutrition of the American Medical Association at the Hyatt Regency O'Hare Hotel in Chicago, Illinois
- About 100 individuals in attendance and were the founding members of ASPEN
- An Organizing Committee was appointed with Dr. Mitch Kaminski as the Chairman
- The Treasurer, Dr. Murray Seltzer, was authorized to start soliciting contributions to the organization

Table 1. A.S.P.E.N. Organizing Committee

Name	Position	Location
Mitchell V. Kaminski, Jr., MD	Chairman	Chicago, Illinois
Katherine D. Bury, MD	Co-chairman	Toronto, Canada
Murray H. Seltzer, MD	Treasurer	Livingston, New Jersey
Margarita Nagy, MS, RD	Secretary	Chicago, Illinois
James M. Long III, MD	Constitutional Committee	Houston, Texas
George L. Blackburn, MD, PhD	Education Committee	Boston, Massachusetts
Michael D. Caldwell, MD	Education Committee	San Francisco, California

4/1976 – Membership grew to 601 with 270 physicians, 87 dietitians, 82 pharmacists, 11 nurses, & 151 from a variety of other disciplines and categories

ASPEN - When, Where, & Who?

2/3/1977

- First ASPEN Clinical Congress was held at the Chicago, IL O'Hare Marriott Hotel
- Organizing Committee turned over control of the organization to the first Executive Council and Board of Directors (BOD)
- Dr. Stanley Dudrick was elected to be the first ASPEN President

2/1978

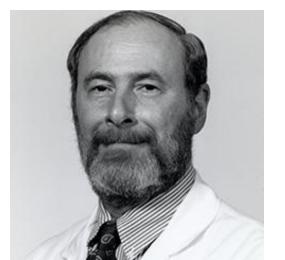
- Second ASPEN Clinical Congress was held in Houston, TX
- Dr. Stanley Dudrick gave the first ASPEN Presidential Address, entitled "The Common Denominator and the Bottom Line", during which he stated, "The basic purpose of the Society was to gather together a diverse group of people with a common interest in solving the problems and achieving the ultimate goal of optimal nutrition for all people at all times, and having an intense interest in, and earnest desire for, communication and interaction with each other."
- Each subsequent ASPEN president has presented a presidential address at the annual ASPEN meeting

ASPEN was off and running and the rest, as they say, is History!

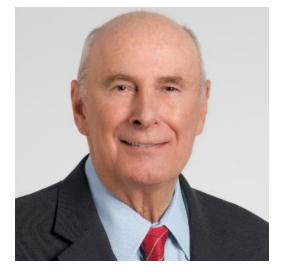


ASPEN -Who?

- Dr. Ezra Steiger General Surgery resident at University of Pennsylvania 4 years behind
 Dr. Stanley Dudrick
- One of the founding members of ASPEN making him one of the longest standing ASPEN members
- Joined Cleveland Clinic in 1975 and...
 - Started Nutrition Support Hospital Committee & Nutrition Support Team within a few weeks
 - Started Home Parenteral Nutrition Program within first year
 - Started Intestinal Rehab Program several years latter
- 1984 8th ASPEN President and he continues to contribute to ASPEN to this day!





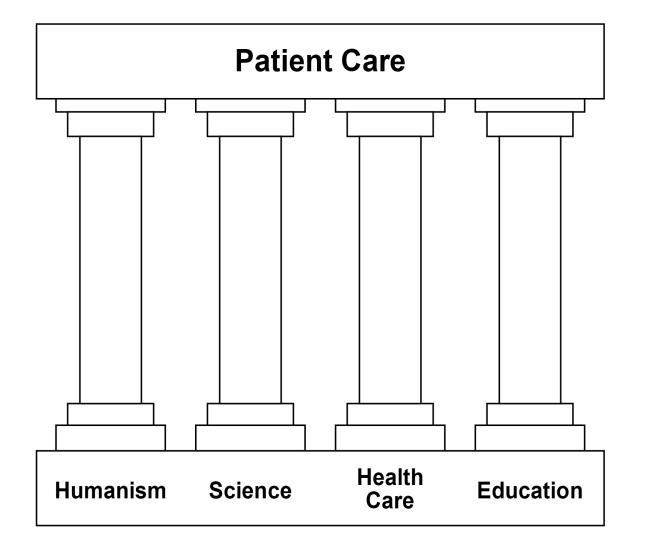




What is ASPEN?

- National & International medical society dedicated to the science and practice of nutrition support
- Multidisciplinary medical society (physicians, dietitians, pharmacists, nurses, & others)
- Medical society devoted to clinicians & others throughout all levels of training and experience (students, beginners, novices, advanced, experts)
- Global leader in the area of nutrition support
- Community ("family") of individuals dedicated to meeting the challenge first set forth by Dr. Stanley Dudrick in 1977 of "...achieving the ultimate goal of optimal nutrition for all people at all times..."

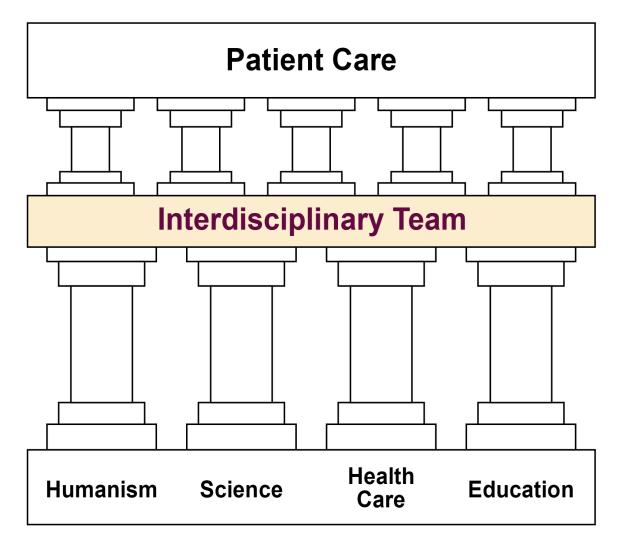


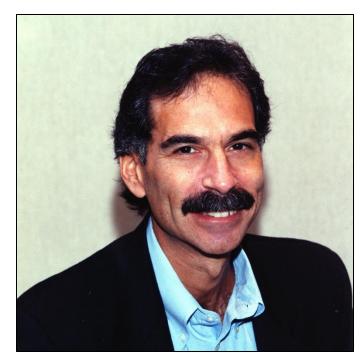




Dr. George Blackburn ASPEN's 2nd President

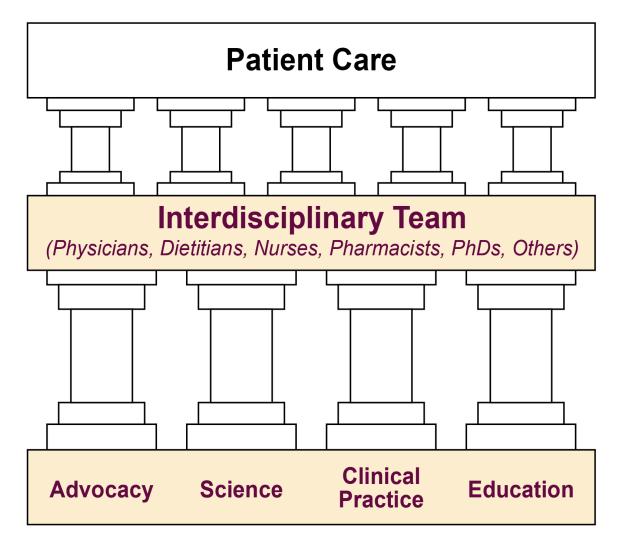






Dr. Robert Kushner *ASPEN's 24th President*

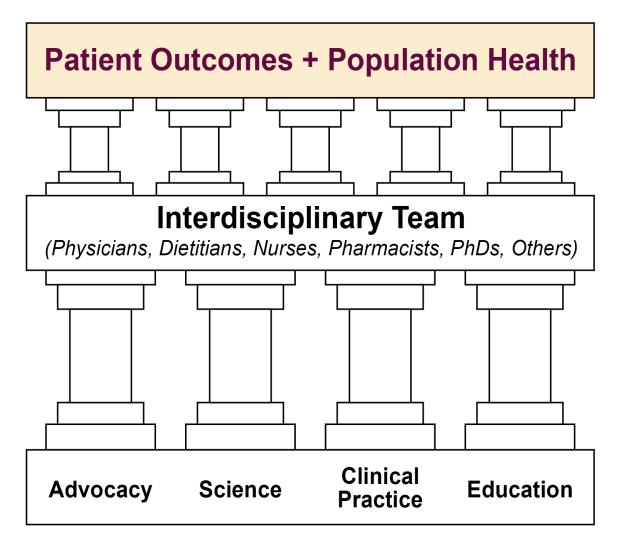






Dr. Vince VanekASPEN's 31st President







Dr. Nilesh Mehta *ASPEN's 42nd President*



2022 – ASPEN Board of Directors approved the...

ASPEN Strategic Plan Summary 2022-2025

ADVOCACY

Maximize ASPEN's impact on nutrition care and patient outcomes through external advocacy efforts.



CLINICAL **PRACTICE**

Provide high quality clinical practice content that is easily translated into practice to guide safe, effective, and inclusive care.



- EDUCATION

Promote and disseminate education in clinical nutrition and metabolism to current and future healthcare professionals.



MEMBERSHIP

Intentionally attract and retain diverse professionals and grow ASPEN membership.

Promote careers in clinical nutrition and metabolism to attract clinicians and scientists.

Q RESEARCH

Increase clinical nutrition and metabolism research (e.g., mechanistic, translational. outcomes, health equities, and economics), the number of researchers, and funding.



Quote From a Famous President...



"And so, my fellow Americans, ask not what your country can do for you – ask what you can do for your country."

John F. Kennedy

35th President, United States of America 1961 inaugural address



Renewed Challenge from a previous ASPEN President...

"Ask not what ASPEN can do for you – ask what you can do for ASPEN!"

Vince Vanek, MD, FACS, FASPEN
31st ASPEN President, 2008 ASPEN Presidential Address

If we as ASPEN members meet this challenge, then ASPEN will be around for another 50 years and long there after!

