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KNOWLEDGE AND PRACTICE AMONG DIETITIANS IN FOUR WESTERN EUROPEAN COUNTRIES REGARDING MALNUTRITION, STARVATION, CACHEXIA AND SARCOPENIA

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Presentation Method: Oral or Poster presentation

Please indicate your professional occupation: Dietitian

The presenting author fulfills the above conditions and wants to apply for a travel award: No

Rationale: Adequate distinction between malnutrition, starvation, cachexia and sarcopenia is important in clinical care. Despite the overlap in physical characteristics, differences in etiology have therapeutical and prognostic implications. We aimed to determine whether dietitians in selected European countries have 'proper knowledge' of malnutrition, starvation, cachexia and sarcopenia, and use terminology accordingly.

Methods: An anonymous online survey was performed among dietitians in the Netherlands, Belgium, Sweden and Norway. 'Proper knowledge' was defined as describing \geq two of the three common domains of malnutrition: 1) intake; 2) body weight and/or body composition, and 3) function, plus a correct answer to three cases to diagnose starvation, cachexia and sarcopenia. Chi-square test was used to analyse differences in experience, working place and number of malnourished patients treated between dietitians with 'proper' vs. 'less proper knowledge'.

Results: Of the 7186 invited in the study, 712 participated and 369 completed all mandatory questions (5%). In clinical practice, the term 'malnutrition' is being used by 88% of the respondents, starvation, cachexia and sarcopenia by respectively 3%, 30% and 12%. The cases on starvation, cachexia and sarcopenia were correctly answered by respectively 58%, 43% and 74%. 'Proper knowledge' was present in 13% of the respondents. The percentage with 'proper knowledge' was higher in respondents working in a hospital or in municipality (16%, $P < 0.041$) than in those working in other settings (7%).

Conclusion: Given the low percentage of dietitians qualified with 'proper knowledge', origins of muscle wasting are suboptimally recognized in clinical practice. Identifying cases is performed better than the theoretical understanding of the concept of malnutrition.

Disclosure of Interest: None Declared

Keywords: DIETETIC DIAGNOSIS, MALNUTRITION