

# SUSTAINED REDUCTION OF TPN USAGE DURING HOSPITAL ADMISSION BY DIETITIANS

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## INTRODUCTION

Total parenteral nutrition (TPN) costs are a big financial burden for hospitals. Malnutrition is a serious problem in patients, however the necessity of TPN use is debatable in some cases. A steady increase in TPN usage and associated costs was noticed in our hospital after 2007. In the present project, a nutrition team was assembled in 2009 which appointed a dietitian for malnutrition screening and monitoring of intramural patients with TPN.

## RESULTS

Initially, over the period 2010-2011, savings on TPN usage of more than 40% were obtained. Furthermore, over the period 2012-2013, a sustained level of 40% was realized. Decrease of TPN users is ongoing with 40% in 2013. Part of those results are recently published<sup>1</sup>.

## CONCLUSIONS

This study shows:

- Improving quality of care by follow up of TPN by dietitians
- Cost savings
- Essential changes in management
- Essential role of dietitians as experts in nutritional assessment
- Maintaining adherence to good clinical nutrition practice.

## METHOD

The usage and costs of TPN were calculated over the years prior to 2010. Several different causes for improper prescription of TPN were identified, which led to the establishment of TPN usage guidelines and criteria. Nursing staff and dietitians were trained in proper administration and follow up of TPN usage in patients. Following the start of the project, patients were assessed strictly according to these guidelines.

### Annual TPN costs during hospital admission between 2007-2013

Year	2007	2008	2009	2010	2011	2012	2013
Cost in € X 1000	229	231	240	255	141	137	147

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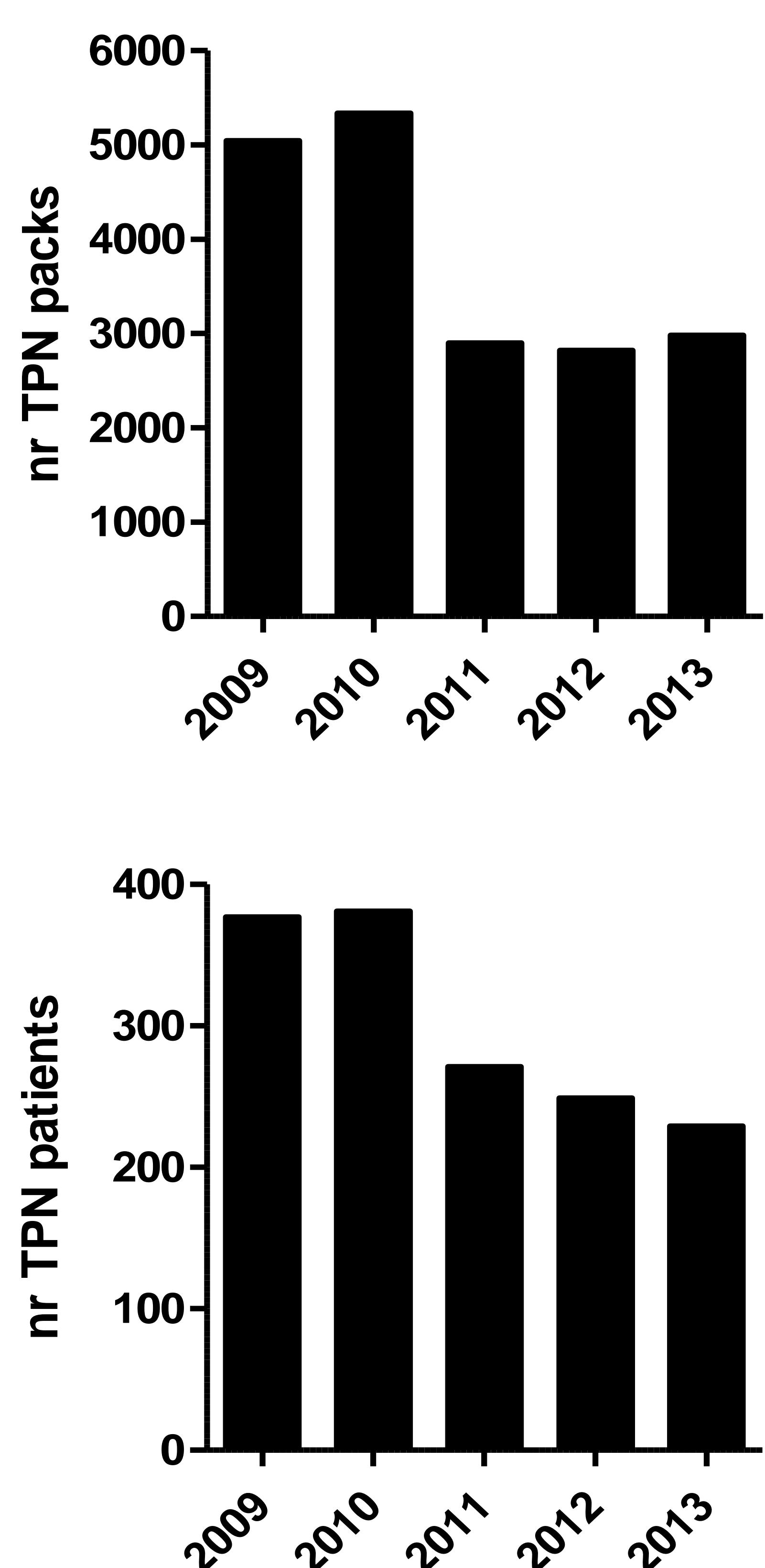


Figure 1. Nr of TPN packs used per year and nr of patients on TPN per year during hospital admission