



North Central London
Integrated Care Board

NCL PQS: Education Session on Reviewing Adult Patients on ONS

Rosemary Stennett

Medicines Management
Dietitian

Rosemary.stennett@nhs.net

Agenda

- What is malnutrition
- Food based approach to managing malnutrition
- Food based treatment
- Oral nutritional supplements (ONS)
- NCL ONS formulary products vs. premium priced ONS
- Spend on ONS NCL ICB
- Appropriate prescribing
- Standard operating procedure (SOP) for reviewing ONS prescribing

What is malnutrition?

Undernutrition: not getting enough nutrients, such as protein, vitamins, and minerals.

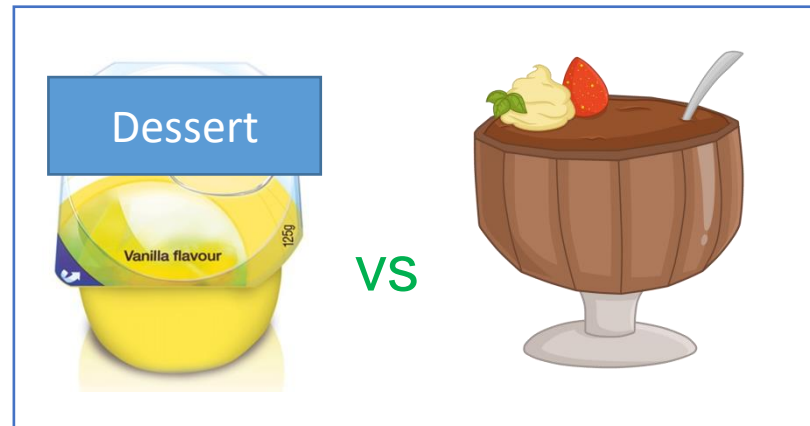
Common signs and symptoms of malnutrition are:

- Unintentional weight loss
- Low body mass index (BMI)
- Lack of interest in eating and drinking
- Feeling tired, weak, or dizzy
- Getting sick often and taking a long time to recover

Potential causes:

- Having a long-term health condition that affects your appetite, digestion, or absorption of nutrients
- Having problems swallowing or chewing food
- Being socially isolated, having limited mobility, or having a low income
- Needing extra energy or nutrients due to illness, injury, or special conditions

Food vs ONS



Food can provide all the nutrients that we need every day even if someone is at risk of becoming malnourished

- lots of different nutrients are needed, not just calories (energy)

Think nutrient dense, not energy dense foods

- These contain nutrients such as protein, vitamins and minerals, and fibre

The aim of a food-based approach is to provide those who are at risk of malnutrition with about an extra 500 calories per day using **food fortifiers** and **snacks** that are nutrient-dense

Food Based Treatment

Using nutrient dense foods as an alternative to standard ONS

Using milk & milk-based products	Kcals	protein
1 mug of hot chocolate with fortified milk	254	13
1 small tub of Greek yogurt	198	9.2
1 tablespoon skimmed milk powder added to custard powder	55	5.5
total	507	27.7

Food Based Treatment

Using nutrient dense foods as an alternative to standard ONS

Using savoury products	Kcals	protein
1 small handful of nuts	246	8.6
1 cheese scone	161	5.8
1 tablespoon soy protein powder added to soup	50	14
total	457	28.4

Oral Nutritional supplements

Oral Nutritional Supplements (ONS) are sterile liquids, semi-solids or powders, which provide macro and micronutrients.



In 2022-2023 NCL dispensed 2.1 million plastic bottles of ONS with an associated [environmental impact](#)

ONS vs homemade milkshake

A 200ml bottle of a standard ONS contains...

Water, maltodextrin, hydrolysed corn starch, milk proteins, sucrose, vegetable oils (canola, corn), minerals (sodium citrate, potassium citrate, magnesium chloride, potassium chloride, magnesium phosphate dibasic, calcium phosphate tribasic, potassium phosphate dibasic, ferrous sulphate, zinc sulphate, manganese sulphate, cupric sulphate, sodium molybdate, potassium iodide, chromium chloride, sodium selenate), soy protein isolate, stabilisers (E460, E466, E418), emulsifier: soy lecithin, flavouring, choline chloride, vitamins (C, E, niacinamide, calcium pantothenate, B6, B1, B2, vitamin A palmitate, beta carotene, folic acid, K1, biotin, D3, B12), colour: E120.

Calories per serving: 300kcal

Protein: 12g

A 220ml glass of a homemade milkshake (Horlicks® flavour) contains:



1/3 pint/180ml fortified full fat milk and 5 heaped teaspoons (25g) 'Horlicks® Original Malted Drink

Calories per serving: 319kcal

Protein: 19g

Primary Care: NCL ONS Formulary

- Robust governance procedures
- Responsibility to wider health economy
- Supported by local care pathways
- Formulary aims:
 - Reduce inequality in prescribing
 - Reduce risk due to limited products and governance to support their inclusion in the formulary
 - Reduction in transfer of care issues
- Included products should be
 - Clinically effective
 - Cost effective
 - ACBS approved
- Dietetic involvement in formulary decisions



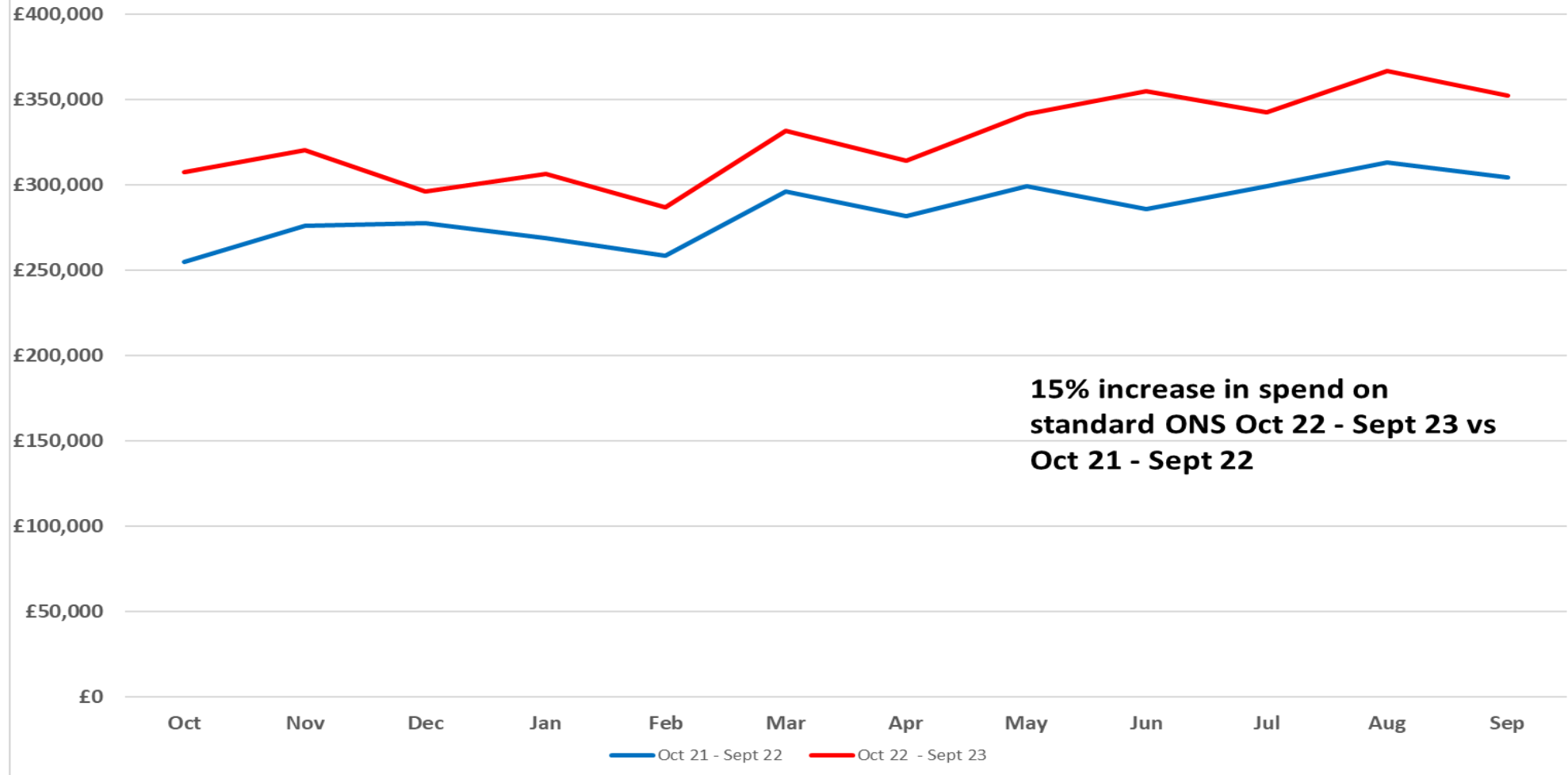
NCL ICB ONS Formulary Products

	PRODUCT	SERVING (£)	BD (£)	1 MONTH (£)	3 MONTHS (£)
1 st Line	AYMES SHAKE	0.52	1.04	29.12	87.36
1 st Line	Foodlink Complete	0.52	1.04	29.12	87.36
2 nd Line	Altraplen Energy	0.99	1.98	55.44	166.32
2 nd Line	Aymes Complete	1.11	2.22	62.16	186.48
2 nd Line	Altraplen Compact	1.39	2.78	77.84	233.52

Top 5 prescribed products (Oct 22 – Sept 23) NCL ICB

PRODUCT	SERVING	BD	1 MONTH	3 MONTHS
Ensure Compact	£1.56	£3.12	£87.56	£262.08
Ensure Plus Milkshake Style	£1.33	£2.66	£74.48	£223.44
Ensure TwoCal	£2.62	£5.24	146.72	440.16
Ensure Plus Juc	£2.40	£4.80	£134.40	£403.20
Fortisip Compact Protein	£2.29	£4.58	£128.24	£384.72

NCL ICB spend on oral nutritional supplements (ONS) Oct 21 - Sept 22 vs. Oct 22 - Sept 23



Appropriate Prescribing

What is
appropriate
nutrition
product
prescribing?

- Products are prescribed when **clinically indicated** and aim to be **cost effective**
- Patients receive **appropriate input and review**, including dietetic support when available
- Prescriptions are **reviewed and changed/discontinued** as appropriate

Appropriate prescribing?

supplements	Clinical indication	recommendation
Ensure Plus Milkshake Style	? Clinical indication	last recorded BMI (Feb 23) BMI: 40kg/m ² . please remove from script as not clinically indicated.

Standard Operating Procedure (SOP)

Aim

The aim is to provide support and a process framework to primary care: -

- When undertaking reviews on appropriate prescribing of adult ONS
- To work with local dietetic community providers to ensure a consistent approach to the ongoing care of patients with prescribed ONS

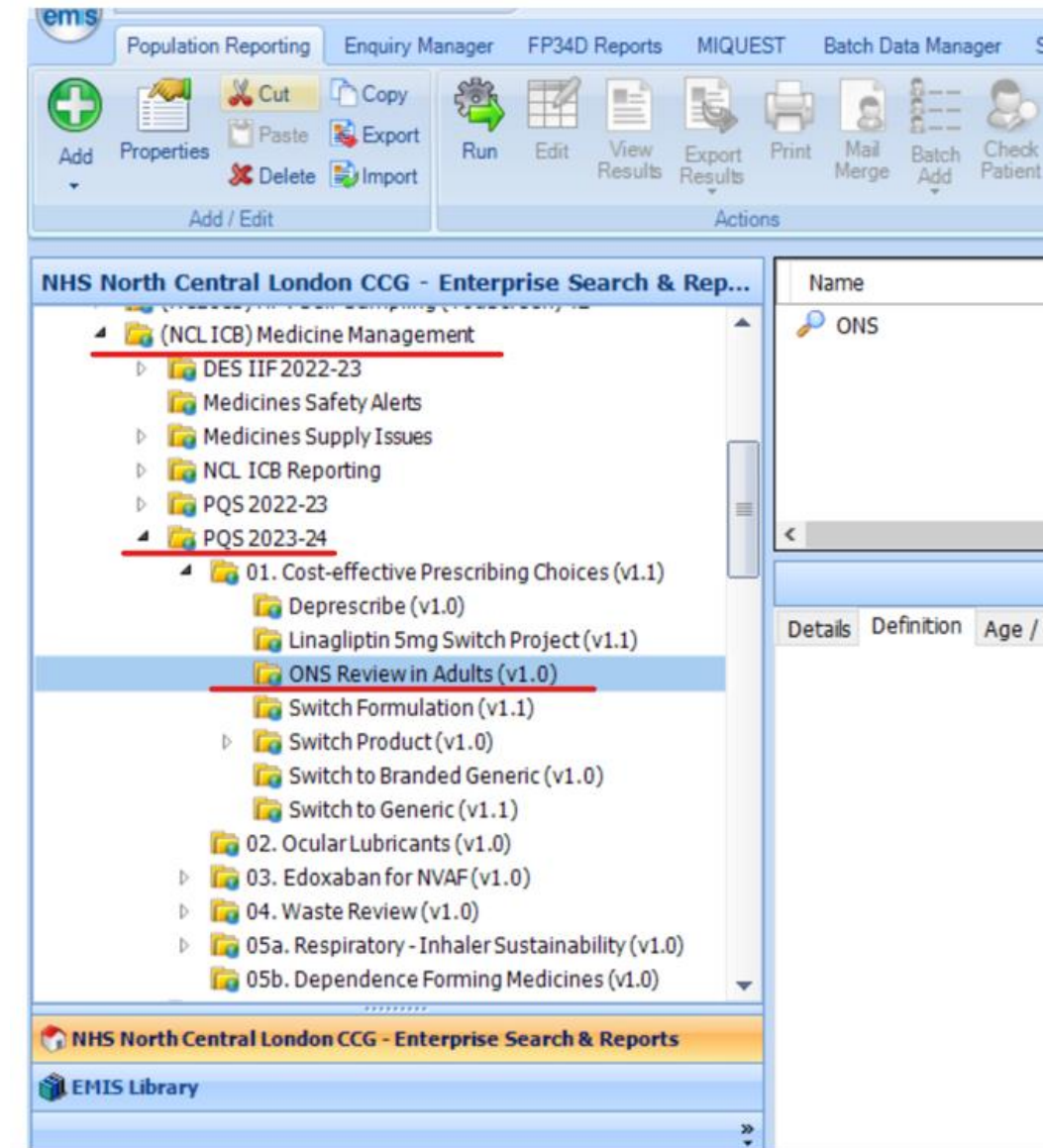
The SOP is intended to be used by primary care pharmacy teams (and other suitably trained primary care workforce) in conjunction with the NCL [guidelines](#) on appropriate prescribing of ONS and the [NCL adult ONS formulary](#).

Role of primary care (e.g. practice pharmacists, pharmacy technicians and other appropriately trained primary care workforce)

- To review patients according to the SOP and make appropriate changes
- Where the reviewer is not a prescriber:
 - To recommend changes to prescribers
 - To make changes according to prescribers' agreement
- All boroughs – to refer patients with a BMI $<18.5\text{kg/m}^2$, or patients who have experienced recent significant weight loss, who have not been reviewed by a dietitian, to the community dietetic teams for an assessment.

Process:

Run a search for all suitable patients – EMIS search title: “ONS Review in Adults”.



Exclude patients according to specific exclusion criteria:

- **Patients where the oral nutritional supplement is being administered via PEG or other gastrostomy tube.**
- Patients on a non-preferred nutritional supplement who are under dietetic care, who have been reviewed within the last 3 months, and there is a clinical justification.
- Patients who have a documented intolerance to a preferred supplement
- Patients who have had the preferred nutritional supplement prescribed before and for whom it has not been successful.
- Patients who have previously had the non-preferred nutritional supplement specifically agreed for a clinical indication and this has been documented by the prescriber.
- Patients with a documented eating disorder

Next steps:

- Check the remaining patients' electronic medical records for recent weight and height. If there is no weight recorded within the past month, contact the patient by phone, text or letter.
- Review each patient's electronic medical record
- Archive any supplements which appear on a patient's repeat prescription but have NOT been issued for 3 months or more.

Top tips

- ✓ Look at doses and quantities: Once daily dosing is not a clinically effective dose.
- ✓ Weight/BMI within normal range and no recent significant weight loss (within last 3-6 months). Review patient with the aim of weaning off ONS.
- ✓ If BMI: $\leq 18.5 \text{kg/m}^2$ and/or patient has lost 5-10% of body weight in last 3-6 months, check if patient will take more than OD dose i.e., twice daily recommended. If not, stop prescription as not clinically effective treatment.
- ✓ Switch readymade supplement e.g., Ensure[®] Plus Milkshake Style to Aymes[®] Shake:
- ✓ Issue on acute prescription.
- ✓ If patient is under the care of a dietitian contact the named dietitian to discuss any proposed switches before making any switches.

- Refer patient to local community dietetic provider when:
 - Patients are on a non-preferred nutritional supplement, under dietetic care and have **NOT** been reviewed within the last 3 months.
 - Patients are on a non-preferred nutritional supplement under dietetic care and where the prescription is **NOT** in line with the NCL ONS Formulary.
- Contact the patient, with phone call and letter to inform them [of change or stopping of prescription](#). Include '[Food Fact Sheet: spotting and treating malnutrition](#)' information as part of this letter. The letter will also advise patients that they should monitor their weight at home, and if they experience weight loss within the next month, they should contact the practice who will escalate this to the NCL MMT dietitian for advice.

Patient letter templates for ONS

- Letter 1 – Current weight and height with reply slip
- Letter 2 – ONS no longer needed stopping prescription
- Letter 3 – ONS changed – x supplement to Aymes[®] Shake
- Letter 4 – Pudding / dessert style ONS stopped
- Letter 5 – Calogen[®] / modular supplement stopped
- Letter 6 – Once per day (or less) ONS stopped
- Letter 7 – ONS changed – Ensure[®] Plus Juce to Aymes[®] ActaSolve[®] Smoothie

