

Establishing an Upper GI Dietetic Service in

Cwm Taf Morgannwg UHB

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Background

Optimising a patient's nutrition prior to oncological treatment is imperative to reduce length of hospital stay and benefit post operative outcomes (1).

In September 2022, Macmillan funded a 1.0 WTE Band 7 Upper Gastrointestinal (UGI) Specialist Dietitian and 0.6 WTE Band 6 Specialist Oncology Dietitian for Cwm Taf Morgannwg University Health Board (CTMUHB). Prior to this, UGI dietetic funding provided 0.4 WTE Band 7 virtual consultations.

Aim: To review the current service and benchmark the new funding against National guidelines.

Methods

The following objectives were set out to meet National Standards for UGI services:

- Specialist Macmillan dietitians will attend consultant led clinics.
- Nutritional assessment completed on all confirmed UGI cancer patients within 1 week of Multidisciplinary Team (MDT) outcome (2)
- Preoperative Oral Nutritional Supplements are prescribed to all malnourished cancer patients (3)
- Pancreatic enzyme replacement therapy (PERT) commenced and education provided to pancreatic cancer patients/carers at point of suspicion (4)
- Involvement in further service development and education.

Between September 2022 - September 2023, 216 UGI cancer patients were referred into the UGI specialist dietetic service.



Figure 1. Elements of Nutritional Assessment

Conclusion

Since Macmillan UGI funding was obtained in CTMUHB, the time from diagnosis to dietetic input is now <1 week.

The service now complies with National Optimal Pathways as a Specialist Macmillan Dietitian is present in MDT clinics, providing nutrition support early in the patients cancer journey.

Tailored dietetic advice is delivered based on BIA results and patients have reported a positive dietetic experience proving a need for the service. Two projects have recently commenced; one analysing BIA results in UGI patients pre- and post- surgery and the other assessing quality of life pre- and post- stent insertion. These results will improve the service further.

References

1. Wall, J., Paul, M. and Phillips, B.E., 2023. Nutritional interventions in prehabilitation for cancer surgery. *Current Opinion in Clinical Nutrition & Metabolic Care*, 26(6), pp.497-507.
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3. Weimann, A., Braga, M., Carli, F., Higashiguchi, T., Hübner, M., Klek, S., Laviano, A., Ljungqvist, O., Lobo, D.N., Martindale, R. and Waitzberg, D.L., 2017. ESPEN guideline: clinical nutrition in surgery. *Clinical nutrition*, 36(3), pp.623-650.
4. National Optimal pathway for patients with suspected or confirmed pancreatic cancer, [online] executive.nhs.wales/functions/networks-and-planning/cancer/wcn-documents/clinician-hub/csg-pathways-and-associated-documents/ugi-nop-pancreas-pdf/ [Accessed 20/09/2024]

Patient Feedback

"The dieticians during this time have been a godsend, answering any questions or concerns that I had, giving the best advice, of what to eat, and what to expect before and after surgery, they explained that my surgery would be life changing, and have been available with support whenever I have felt the need to contact them."

Results

All patients are now seen within 1 week of diagnosis (Figure 2). 1 to 2 patients will be referred direct from endoscopy per week when highlighted by the MDT as high risk of malnutrition.

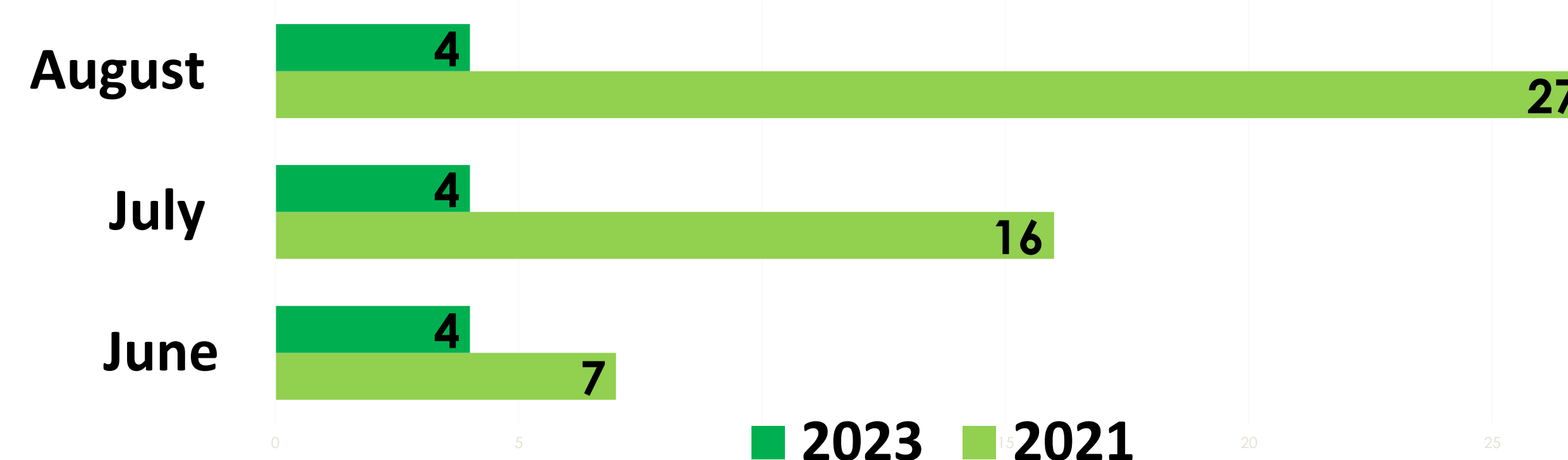


Figure 2. Number of days from referral to dietetic input pre and post Macmillan dietetic funding

Quantitative data were collected to determine baseline nutritional risk scores and sarcopenia risk (Figure 3).

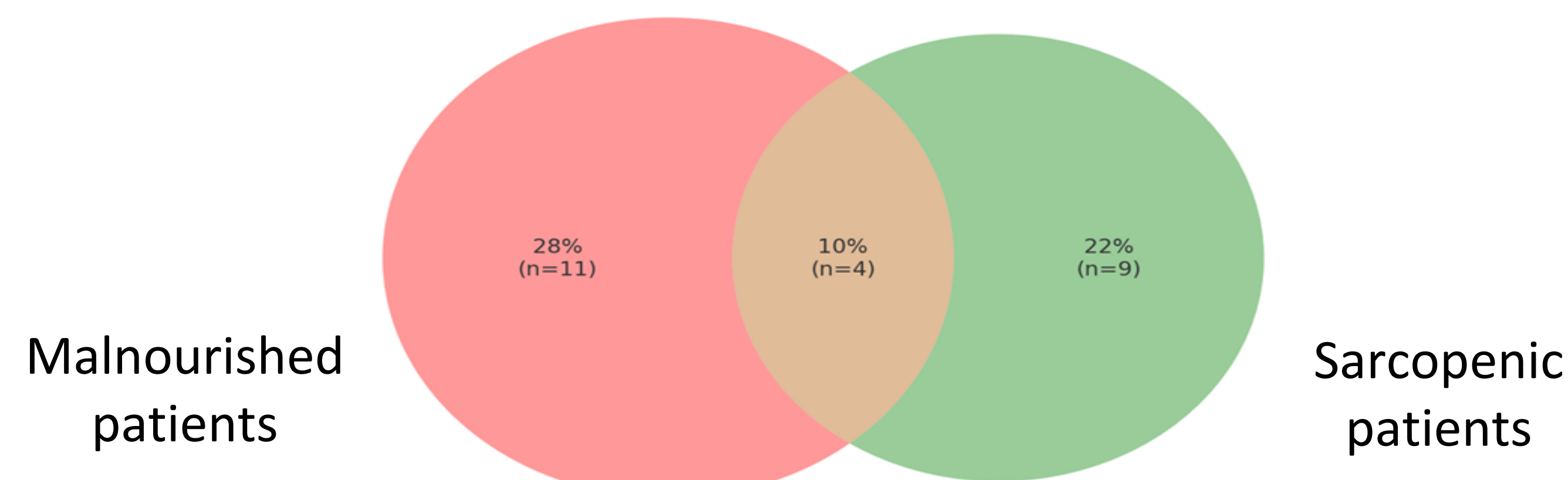


Figure 3. Prevalence of malnutrition and sarcopenia in UGI patients

- PG-SGA SF scores ranged from 0 - 14 (>5 deemed risk of malnutrition)
- PG-SGA SF is deemed a more sensitive screening tool for diagnosing malnutrition in UGI outpatients.
- 28% (n=11) of patients scored >5 compared to 17% (n=6) when using MUST (Table 1).

Table 1. Results of Sarc-F and MUST screening tools (n=40)

Sarc-F	Score	%	n	MUST	Score	%	n
>4 = sarcopenic	0	85	34	Low risk	0	58	23
	1	10	4	Medium risk	1	23	9
	3	2.5	1	High risk	2	17	7
	6	2.5	1	Very high risk	3	2	1

- 39 pancreatic patients commenced and were educated on PERT.
- Service improvement projects and regular education workshops have been developed.
- The UGI dietetic team have since provided 7 education and training sessions to the MDT, dietetic colleagues and student dietitians compared to 1 session prior to funding.
- We work closely with the new Prehabilitation Service within CTMUHB which commenced in March 2024, improving patient flow and dietetic care.