

FOCUS ON RESEARCH

PROGRAMME DEVELOPMENT, FEASIBILITY AND ACCEPTABILITY OF A SNACK BASED INTERVENTION FOR HIP FRACTURE PATIENTS

Researchers

Rosemary J G Price, Professor Marion E T McMurdo, Professor Annie S Anderson

Aim

To develop a practical and appropriate dietary intervention for older patients following hip fracture.

Project Outline/Methodology

A feasibility study in patients (aged 60 years or over, with body mass index (BMI) < 25kg/m²) admitted with low trauma hip fracture. Measures of body composition were recorded and nutritional information (meal patterns, food preferences, dietary intake) was collected using questionnaires. Patients were provided with 3 individually tailored, between meal snacks and adherence monitored. Support adults, if nominated by the patient, were also involved in this process. Costs associated with the programme delivery were recorded. At the end of the 4 week follow up period, patients were asked to rate acceptability of the programme by an independent researcher.

Key Results

Of the 156 patients admitted to the orthopaedic unit over a 20 week period, a total of 23 patients (2 males, 21 females) entered the study. Mean age 84 years, mean BMI 19.9kg/m². Seven of the participants withdrew from the study. Participants remained for an average of 11 days on the orthopaedic unit with only 39% being discharged directly back home. The between meal snacks provided 26% of daily energy requirements.

Most participants found the concept of goal setting in relation to meals difficult. Monitoring adherence proved problematic with insufficient information from dietary checklists and stocktake discrepancies due to the frequent transfer of patients. Completion of the acceptability assessments proved challenging and was dependent on age, memory and health. Not all patients agreed that snacks were appropriate for them personally or that the study was beneficial. Several participants commented that they did not eat between meals and so did not view between meal snacks as appropriate. The 5 support adults interviewed reported improvements in the participant's eating habits. Budget was not perceived to be a major influence on dietary intake.

The cost of implementation was £21.29 per patient per weekly visit, compared to £22.40, the cost of providing 2 commercially available sip feeds daily for one week.

Conclusions

This study has shown the feasibility of developing a snack based intervention for older hip fracture patients. Practical difficulties were encountered with implementation, largely due to timing. A more appropriate time at which to deliver such an intervention may be after the acute phase is over and patients are back home. Overall the intervention was acceptable to patients in terms of aims, process, content and delivery. The costs compared favourably against the alternative of providing sip feeds.

What does this study add to the field?

Attempting to provide a nutritional intervention during the acute inpatient period is not feasible. It may be more appropriate to delay dietary intervention until well after the acute phase is over and patients are back in familiar surroundings and more in control of their dietary intake

Implications for Practice or Policy

This type of snack based nutritional intervention could be developed further and could eventually be implemented by less highly trained staff.

Where to next?

Larger randomised controlled trials are required in older undernourished hip fracture patients to examine the feasibility and acceptability of a home based food intervention, to assess the efficacy and cost benefits.

Further details from:

Rosemary Price
Research Dietician
Ageing and Health
University of Dundee
Ninewells Hospital and Medical School
Dundee DD1 9SY

