Dietitian Interventions

Dietitians should provide older adults with malnutrition or at risk for malnutrition living in the community with nutrition interventions. Dietitian interventions may improve calorie and protein intake and promote weight maintenance or desired weight gain.

Available Evidence Expert Confidence





- Work with healthcare team, administrators, and/or policy makers to ensure RDNs are part of the coordination of care.
- Consider certification in geriatric nutrition
- Consider telehealth and virtual care options

Oral Nutrition Supplements (ONS)

Consider ONS as part of an individualized and comprehensive nutrition intervention for older adults with malnutrition or at risk for malnutrition living in the **community**. ONS intake of 1-2 servings per day is likely to increase calorie and protein intake.

Available Evidence





- Individualize ONS: including the amount, frequency, temperature, flavor, viscosity, container.
- Evaluate feasibility of cost and transportation of the ONS for the patient/client.
- Monitor intake and side effects such as stomach pain and nausea.

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Registered dietitian nutritionists (RDNs) should deliver nutrition assessment and interventions. however, if not feasible, RDNs should oversee or train other healthcare or community providers who provide nutrition care

Home Delivered & **<u>Congregate Meals</u>**

Older adults living in the community, especially those considered malnourished or at risk for malnutrition, should be referred to home delivered and congregate meal services to improve calorie and protein intake and reduce incidence and risk of malnutrition

Available Evidence Expert Confidence





- All older adults identified as at risk for malnutrition from nutrition screening can be referred to home-delivered and congregate meals.
- All individuals 60 and over and their spouses are eligible for benefits

Assessment

We suggest that dietitians use the Mini-Nutritional Assessment (MNA) for malnutrition assessment in older adults living in the community. MNA is a valid and reliable tool that can identify older adults that are malnourished and may predict mortality.

Available Evidence





- If MNA is not feasible, consider SGA, PG-SGA or another valid assessment tool.
- Ensure nutrition screening, and referral to **RDNs** is in place as part of the coordination of care.
- Work with staff to incorporate MNA in the **Electronic Health Record.**

Food Fortification

Consider food fortification as part of a comprehensive nutrition intervention for older adults with malnutrition or at risk for malnutrition living in the community. Food fortification is a commonly used and feasible

Consensus

- Add calorie and protein boosters to food that the individual already enjoys.
- Consider addition of high calorie foods such as butter, oil, gravy, sauces, or nut
- Educate the individual and/or family

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