



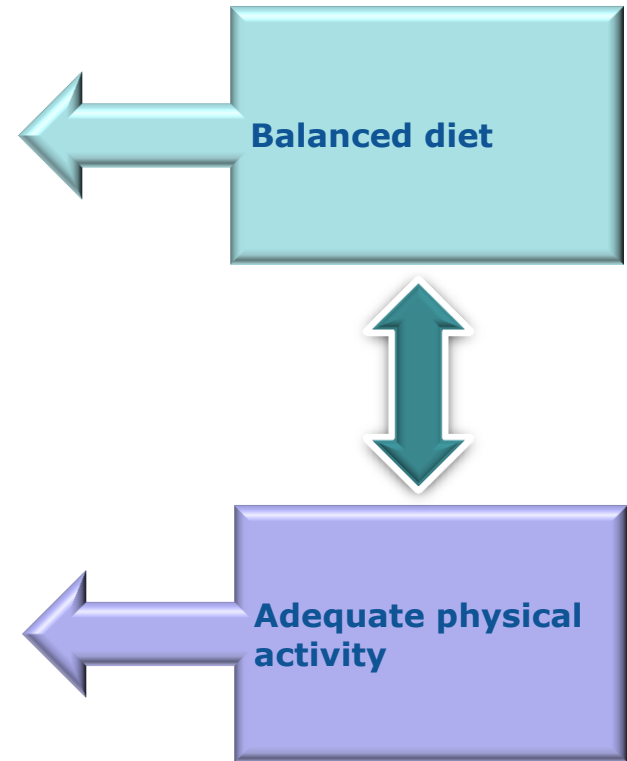
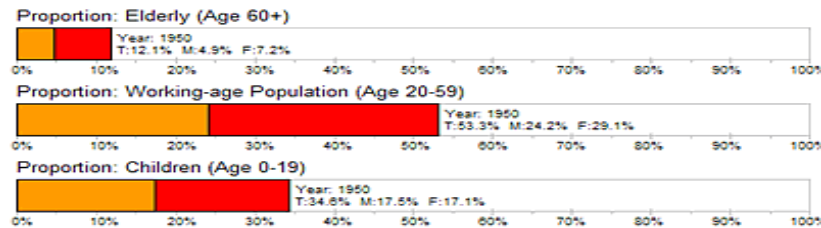
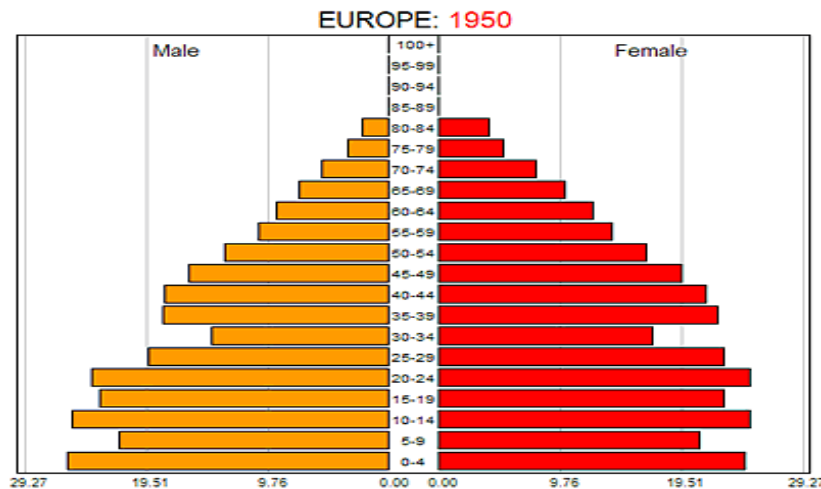
The case for malnutrition at EU level: the EIP AHA perspective

**EIP-AHA workshop on nutrition.
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An ageing population & the role of Nutrition & physical activity



Malnutrition

"The cellular imbalance between the supply of nutrients & energy and the body's demand for them to ensure growth, maintenance, & specific functions."
(WHO)

Contributing Factors/causes

AGEING :

↓ smell; ↓ taste; ↓ lack of teeth; ↓ secretion of saliva; ↓ gastric acid secretion; ↓ production of digestive enzymes; ↓ absorption capacity of the bowel; slower progression of food in the bowel; impaired regulation of food intake; anorexia

INTRINSIC:

Oral problems: ulcers, candida

Gastrointestinal: esophagitis, peptic ulcer, atrophic gastritis, constipation, colitis, malabsorption

Neurological : dementia, Parkinson, depression, cerebrovascular ds.)

Other: endocrinological; cardiac failure; renal failure; infections, cancer.

Physiological : alcoholism, bereavement

EXTRINSEC:

Social factors

Medicines intake

Polypharmacy

Is there a case for treating malnutrition in Europe ?

↑ Prevalence

- **Malnourished**
 - 5-20% in home care
 - 15-35% in hospitals
 - 10-75% in nursing homes
- **At risk**
 - 32% in community
 - 47% in hospital

Consequences

- ↑ **health care costs**: 170b in Europe
- ↓↓ **healthy & active life**
- ↑ **risks & adverse clinical outcomes** (frailty/sarcopenia/ infections/wound healing)
- ↑ **stay at hospital**
- ↑ **long term care**

Intervention

- **Awareness & education** (general population, professionals, care-givers, managers, policy)
- **Screening, assessment, treatment, monitoring**
- **Concerted, coordinated management & policy action**

Malnutrition, still a common challenge at EU level

SCREENING/ ASSESSMENT	MANAGEMENT	RESEARCH
<p>Screening & monitoring for nutritional status as an integral part of care.</p> <p>Early detection of those at risk of under-nutrition / unbalance nutrient intake.</p>	<p>A multi-disciplinary approach in clinical & community settings.</p> <p>Explicit quality standards for the delivery of good, adequate and safe nutritional care.</p> <p>Improve level of knowledge of professionals.</p>	<p>Clues for new nutritional products or nutrition supplements.</p> <p>Research on the mechanisms linking specific nutrients or dietary patterns to frailty.</p>
<p>Improve the level of screening & assessment of malnutrition in clinical settings and treat it timely & adequately.</p>	<p>Identify & implement incentives for stakeholders to support change in the desired direction.</p> <p>Scale-up of good practices that help overcome barriers to adequate diagnosis & treatment.</p>	<p>Clinical trials using nutritional interventions to prevent and treat frailty in older subjects.</p> <p>Clinical trials using multifactorial interventions integrating nutrition & other treatments, e.g. exercise against frailty.</p>

Key actions for an EU policy to tackle malnutrition

Areas of intervention

- Support rationale at clinical/community levels: screening> assessment> intervention> monitoring
- Public awareness & education
- Mandatory nutrition status with standardized tools
- Nutrition training of health professionals
- Quality standards of nutritional care
- Asses the implementation & impact of interventions
- Equitable access to safe, effective & timely nutrition support
- Support research on identified gaps

A3AG Good practices Scale-up

- Screening for malnutrition.
- Delivering information to general population, patients and care-givers.
- Analyze the association between malnutrition, muscle strength and frailty.
- Protocols for better nutrition & food intake habits.
- Creating linkages between the health care system & the community.
- Research lines for special foods, functional foods, & dietary supplements.
- Research in the fields of biomarkers, functional food & dietary supplements.
- Developing nutrition based interventions to diminish frailty & cognitive decline.

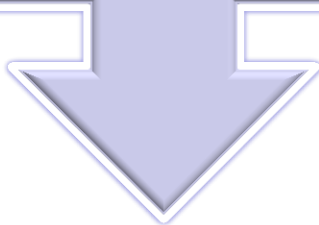
Concerted actions at EU level needed:

SUPPORT RESEARCH

- Horizon 2020
- Public Health Programme 2013-20200

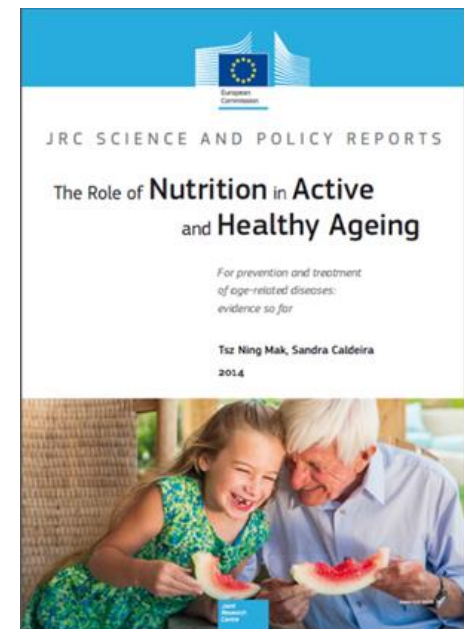
IMPLEMENT EIP on AHA

- Reference sites
- Action Groups : AG A3 on Frailty Prevention



JRC report: The role of nutrition in AHA

- An exploratory project to support the aims of the EIP on AHA
- Our aims were to:
 - review the contribution of diet and nutrition in increasing healthy life years, and promoting active and healthy ageing.
 - raise awareness that more attention should be given to diet and nutrition in policymaking to protect our older citizens.



<https://ec.europa.eu/jrc/sites/default/files/lbna26666enn.pdf>

Thank you for your attention!

EIP on AHA Website – the MARKETPLACE

<http://ec.europa.eu/active-healthy-ageing>

DG SANCO Website

<http://ec.europa.eu/health>

Horizon 2020

<http://ec.europa.eu/research/horizon2020>