

# Medicines Management - Practice Detail Aid

## Guidelines for Prescribing Sip Feeds in Adults

### Background

Box 1

The guideline is to provide advice and support on the recommended prescribing of oral nutritional supplements in primary and secondary care in SoTW for adults 12 years and older.

- The annual cost of Sip Feed products in South of Tyne & Wear is currently £1.7 million. With an annual spend of £493,000 in Gateshead, £525,000 in South Tyneside and £650,000 in Sunderland.
- Audits have shown that oral supplements are often initiated inappropriately or continued unnecessarily or without adequate review.
- The guideline is **not** suitable for use in patients with a palliative diagnosis.

### General Recommendations

Box 2

- ▶ The practice is advised to hold a meeting to discuss implementation of the guideline.
- ▶ Encourage high calorie / protein food first (an advice sheet is available for patients) before starting supplements.
- ▶ Oral supplements should only be initiated if non-prescribable supplements are inappropriate or have failed. If prescribed supplements are required:
  - Prescribe short-term (up to 1 month).
  - Always prescribe as an "Acute" prescription.
  - Mixed flavours should be requested until taste preferences have been established.
  - Patients using nutritional supplements should receive regular reviews to determine if supplementation should be continued.
- ▶ If patients have oral supplements requested:
  - by a **Care home** then the practice should ensure that the patient is assessed as per this guidance and should not prescribe simply due to a request.
  - following recent **hospital episode** and prescribed supplements. Practices should receive information on the planned treatment length for supplementation or a weight target for the patient. If neither of these are given then practice to consider not prescribing or to issue for 4 weeks and then stop.
  - retrospectively by a **manufacturer** then the request should be refused as this is not in line with the PCTs prescribing policy.
- ▶ Practice to set up a series of regular searches on the practice medical system to monitor implementation of the guidance.
- ▶ Practice should review prescribing patterns to review successful implementation of guidance. Data is available on request from the PCT medicines management team.

### Managing the need for Nutritional Supplements

Box 3

For any individual patient, the following stages should apply. Prescribing of nutritional supplements should only be initiated after stages 1-4 have been completed and the nutritional intake is still inadequate. Dietetic input may be appropriate from stage 5 onwards.

1. Identification (calculate BMI)
2. Overall assessment (consider extra factors)
3. Goal setting (should be realistic and measurable)
4. Non-prescribable and OTC supplementation (advice sheet available)
5. Initiating prescribable oral supplements (1 months supply)
6. Review (4 weeks)
7. Termination of nutritional supplements
8. Follow up review (3 months)

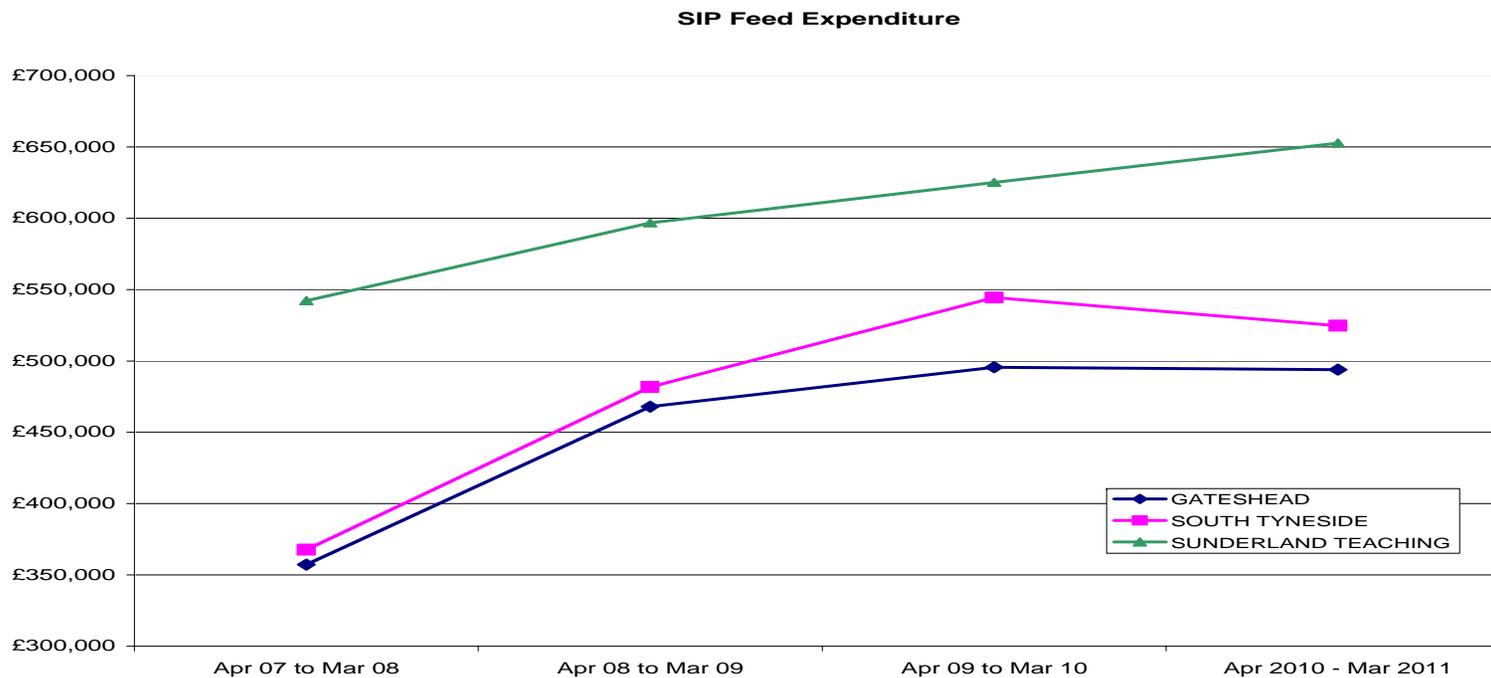
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## Use in alcoholics and Drug addicts

Box 4

The use of sip feeds in these patients needs to be reviewed as these patients could be receiving sip feeds to free up money for drugs and/or alcohol. It may be that a BMI limit for these patients may be advised to ensure that they are not misused (e.g., BMI >20 kg/m<sup>2</sup> then not to prescribe generally, unless other problems are present such as ascites).

Always refer patient to substance misuse team or drug and alcohol team for a review of their dietetic requirements before prescribing a sip feed.



SoTW PCTs ♦ Guideline Launched Summer 2011

Detail Aid to be used to support implementation of sip feed guidance