

Articolo Originale - Original Article

UNDERFEEDING IN ICU: analisi retrospettiva della pratica nutrizionale in una terapia intensiva polivalente

E. CASADEI¹, F. FRANCHI¹, PP. MONGELLI¹, S. SCOLLETTA², PP. GIOMARELLI²

¹Dipartimento di Anestesia e Rianimazione, Azienda Ospedaliera Universitaria Senese

²Dipartimento di Rianimazione, Università degli Studi, Siena

Retrospective analysis of nutritional management in the adult intensive care unit

ABSTRACT: Introduction. The risk of a caloric-proteic malnutrition is high in critically ill patients. To administer feeding overcoming the metabolic need may represent a considerable risk factor.

Objective. To assess the nutritional management in our ICU, and to evaluate the role of the enteral nutritional therapy on morbidity.

Materials and Methods. 151 patients were analyzed. The enteral nutrition contained 1000 Kcal/L. The estimated total caloric need of the patients was calculated with the Harris-Benedict formula.

Results. The average of theoretical Kcals provided daily was 26.4 ± 6 , with respect to 21.8 ± 3.4 Kcals administered. 70% resulted the cut-off for the theoretical/administered nutritional support ratio (t/a NSR) related to morbidity. Patients receiving a t/a NSR $\leq 70\%$ showed an increased morbidity, and longer mechanical ventilation support and ICU stay.

Conclusions. Our findings demonstrated that a lower nutritional support was associated with an increased morbidity. The critically ill patient may represent himself a limiting factor for the most favourable enteral nutritional therapy. (RINPE 2006; 24: 41-7)

KEY WORDS: Enteral nutrition, Underfeeding, Clinical outcome, Critically ill patient

PAROLE CHIAVE: Nutrizione enterale, Iponutrizione, Outcome clinico, Paziente critico