

# Nutrizione Artificiale Domiciliare: analisi delle differenze tra le regioni italiane. Ruolo del Ministero della Salute

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## Home Artificial Nutrition: Differences of legislation within Italian regions. The role of Ministry of Health

*ABSTRACT: In Italy, the prevalence of home enteral and parenteral nutrition is rapidly increasing although the legislative rules of home-based artificial nutrition are not standardised in all the regions. The aim of this work is to analyse such legislation in Europe and particularly in Italy. Our data show remarkable differences in home artificial nutrition legislation within Italian regions. This situation represents a real impediment to the diffusion of home based artificial nutrition and indicates that a common territorial regulation is strongly needed. Presently, in Italy we have the following situation: 1) 10% territory, 1.6% of the population benefits from a special law of home artificial nutrition legislation; 2) 65% territory, 78.6% of the population has regional (local) deliberations of home artificial nutrition legislation; 3) 25% territory, 18.8% of the population has no legislation at all. Naturally, this situation means long-term hospitalisation with consequent significant growth in national medical costs. In addition, optimal quality of life for both patients and their families is not guaranteed so all this must be carefully considered. This paper also describes the role of the Italian Society of Enteral and Parenteral Nutrition (SINPE) in its cooperation with the Ministry of Health to: a) include artificial nutrition in the LEA (Italian basic assistance); b) define an agreement between central and local governments to provide high level home artificial nutrition treatment wherever the patient resides. (RINPE 2005; 23: 205-12)*

**KEY WORDS:** Home Artificial Nutrition, Legislation

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**PAROLE CHIAVE:** Nutrizione Artificiale Domiciliare, Normative