

IN A NUTSHELL

The knowledge platform for general practitioners

Nutritional Risk Screening

Optimal nutrition is meant to prevent deterioration of mental and physical functions as well as health or treatment complications and to shorten convalescence. The purpose of the «Nutritional Risk Screenings» (NRS) is to detect any existing malnutrition or risk of malnutrition during hospitalization. If the initial screening is abnormal, the final screening is performed. NRS is recommended by the «European Society for Clinical Nutrition and Metabolism» (ESPEN) for all hospitalized patients [1].

BMI < 20.5 kg/m²

No Yes

Reduced dietary intake in the last week?

No Yes

Weight loss within the last 3 months?

No Yes

Severe illness (e. g. intensive therapy)

No Yes

Impaired nutritional status

Normal nutritional status **Mild**

Weight loss > 5 % in the past 3 months

or

Food intake below 50–75 % of normal requirement in preceding week **Moderate**

Weight loss > 5 % in the past 2 months

or

BMI between 18.5 and 20.5 kg/m² and impaired general condition

or

Food intake below 25-50 % of normal requirement in preceding week **Severe**

Weight loss > 5 % last month

or

BMI < 18.5 kg/m² and impaired general condition

or

Food intake below 0-25 % of normal requirement in preceding week

Severity of disease (? increase in requirements)

Normal nutritional requirements **Mild**

Hip fracture, chronic patients with acute complications (cirrhosis, COPD), chronic hemodialysis, diabetes, oncology **Moderate**

Major abdominal surgery, stroke, severe pneumonia, hematologic malignancy **Severe**

Head injury, bone marrow transplantation, intensive care patients

Age ? 70 years

No Yes

References

1. Kondrup J, Allison SP, Elia M et al. ESPEN guidelines for nutrition screening 2002. Clin Nutr 2003; 22: 415-421
2. Kondrup J, Rasmussen HH, Hamberg O et al. Nutritional risk screening (NRS 2002): a new method based on an analysis of controlled clinical trials. Clin Nutr 2003; 22: 321-336
3. Kondrup J, Johansen N, Plum LM et al. Incidence of nutritional risk and causes of inadequate nutritional care in hospitals. Clin Nutr 2002; 21: 461-468