

# ESPEN 2016 Abstract Submission

**Topic:** *Nutritional assessment*

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## AGREEMENT BETWEEN PATIENT-GENERATED SUBJECTIVE GLOBAL ASSESSMENT (PG-SGA) AND MINI NUTRITIONAL ASSESSMENT (MNA) IN LONG-STAY NURSING HOME RESIDENTS

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**Presentation Method:** Oral or Poster presentation

**Please indicate your professional occupation:** Dietitian

**The presenting author fulfills the above conditions and wants to apply for a travel award:** No

**Rationale:** The PG-SGA is a validated instrument to assess malnutrition/risk. We aimed to assess agreement between PG-SGA and MNA in long-stay nursing home residents.

**Methods:** In 123 elderly subjects (aged 82.7±8.96 years; 76.4% female) in 5 Portuguese nursing homes, PG-SGA was completed first, then MNA. PG-SGA categories are: well nourished, suspected/moderate malnutrition, or severely malnourished. MNA categories are: normal nutritional status, at risk of malnutrition, or malnourished. Agreement between PG-SGA and MNA was tested by weighted kappa ( $\kappa$ ). Need for intervention was defined by PG-SGA as  $\geq 7$  points<sup>1</sup>, and by MNA 'at risk for malnutrition and weight loss' or 'malnourished'.

**Results:** By PG-SGA 43%, 45%, and 12% were rated well nourished, suspected/moderate malnutrition, and severely malnourished, respectively. By MNA, 29%, 54% and 18% were well nourished, at risk of malnutrition, and malnourished, respectively. Agreement between PG-SGA and MNA was moderate ( $\kappa=0.530$ ,  $p<0.001$ ) (Table 1). 46% and 39% were characterized as needing intervention by PG-SGA and MNA, respectively ( $\kappa=0.488$ ,  $p<0.001$ ).

Table 1 - Agreement between PG-SGA and MNA

		MNA			Total
		Well nourished	Risk of malnutrition	Malnourished	
PG-SGA	Well nourished	26	27	0	53
	Suspected/moderate malnutrition	9	33	13	55
	Severely malnourished	0	6	9	15
Total		35	66	22	123

**Conclusion:** For the study population there is moderate agreement between the PG-SGA and MNA. However, PG-SGA identified more elderly needing intervention. Lack of agreement mainly relates to differences in weighting of malnutrition risk factors including recent weight change.

**References:** 1. Marshall S, Young A, Bauer J, Isenring E. Malnutrition in Geriatric Rehabilitation: Prevalence, Patient Outcomes, and Criterion Validity of the Scored Patient-Generated Subjective Global Assessment and the Mini Nutritional Assessment. *J Acad Nutr Diet.* 2015 Jul 24

**Disclosure of Interest:** J. Pinho: None Declared, F. Ottery Other: copyright holder of the Patient-Generated Subjective Global Assessment (PG-SGA), co-owner and co-developer of the PG-SGA based Pt-Global app, P. Pinto: None Declared, I. Santoalha: None Declared, D. Moreira: None Declared, C. Gondar: None Declared, A. Vigário: None Declared, H. Jager-Wittenaar Other: co-developer of the PG-SGA based Pt-Global app

**Keywords:** MNA, PG-SGA