

One quarter of young adults risk malnutrition

The British Association for Parenteral and Enteral Nutrition (2012) has published its fourth annual Nutritional Screening Week report which reveals that malnutrition is not, as commonly believed, just a problem among the older generation but is actually also affecting 26% of those aged between 20–29 years admitted to hospital.

The report, which presents the results of a UK screening survey, has highlighted that while prevalence of malnutrition is lower than in previous surveys it was still found to affect 1 in 4 adults on admission to hospitals, more than 1 in 3 adults admitted to care

homes in the previous 6 months, and up to 1 in 5 adults on admission to mental health units. Most of those affected were in the high-risk category.

In 2011 4868 women and 4232 men were surveyed from 171 hospitals. The age range was 18–106 years with 56% of the patients aged 65 years and over. As in previous surveys, the 2011 results show that women appear to be at greater risk of malnutrition with 28% affected *vs* 22% of men. While risk increased with age there was substantial malnutrition risk present at all ages: 22% in patients under 60 years, 23% in those aged 60–79 years and 33% in those aged 80 years and older.

While the survey looks specifically at those on admission to hospitals, care homes and mental health units, the results seem to provide a clear snapshot of the alarming rates of malnutrition affecting one quarter of adults of all ages admitted to hospital from their own homes. This highlights the very real need for consistent and integrated strategies to detect, prevent and treat malnutrition to exist within and between all care settings, not just in hospitals.

British Association for Parenteral and Enteral Nutrition (2012) Nutrition Screening Survey in the UK and Republic of Ireland in 2011. www.bapen.org.uk/pdfs/nsw/nsw-2011-report.pdf (accessed 23 April 2012)

Integrated approach needed for allergic diseases

The World Allergy Organization has called for increased, availability of and accessibility to allergy diagnosis and therapies, increased resources dedicated to advanced research, and global partnerships to reduce the burden of allergic diseases.

Barriers to use of personalized medicine for 75% of oncologists

A report provided to MPs outlines a survey highlighting that 75% of cancer specialists are struggling to overcome barriers access to and cost of biomarker tests and NHS bureaucracy preventing the use of personalized medicines in the NHS.

Gap junctions used by platelets for communication

Research from a team at the University of Reading, published online in *Circulation*, has shown that platelets use specialized pore-like structures, called gap junctions, for direct communication between the cells and with the inner walls of blood vessels. This knowledge may pave the way for development of more effective anti-thrombotic therapies to prevent heart attacks and strokes.

Long-term neuropsychological impairment is common in acute lung injury survivors

Cognitive and psychiatric impairments are common among long-term survivors of acute lung injury, and these impairments can be assessed using a telephone-based test battery, according to a new study (Mikkelsen et al, 2012).

The test battery, which comprised standardized neuropsychological tests, was administered to 122 study subjects from the Acute Respiratory Distress Syndrome Clinical Trials Network Fluid and Catheter Treatment Trial at 2 and 12 months after discharge from the hospital.

At 12 months, memory, verbal fluency, and executive function (a set of cognitive abilities necessary for effective daily functioning) were impaired in 13, 16 and 49% of survivors respectively, while cognitive impairment (defined as impairment in memory,

verbal fluency and/or executive function) was found in 41 of 75 survivors (55%). Depression, post-traumatic stress disorder and anxiety were found in 36, 39 and 62% of long-term survivors.

Enrollment in a conservative fluid-management strategy was significantly associated with the development of cognitive impairment, and lower partial pressure of arterial oxygen during the trial was associated with a significantly increased risk of both cognitive and psychiatric impairment.

The study limitations included its small sample size and the use of self-report for several measures.

‘Although it is plausible that use of a conservative fluid-management strategy was associated with an increased risk for long-term cognitive impairment,’ commented Dr

Mark E Mikkelsen, assistant professor of medicine at the University of Pennsylvania, ‘based on the small sample size and an unclear mechanism, this finding warrants confirmation.’

‘Neuropsychological impairment is increasingly being recognized as an important outcome among survivors of critical illness, but neuropsychological function in long-term acute lung injury survivors has not been assessed in a multi-centre trial, and evidence on the aetiology of these impairments in acute lung injury survivors is limited,’ Dr Mikkelsen concluded.

Mikkelsen ME, Christie JD, Lanken PN et al (2012) The ARDS Cognitive Outcomes Study (ACOS): Long-Term Neuropsychological Function in Acute Lung Injury Survivors. *Am J Respir Crit Care Med* 6 April (Epub ahead of print)