



**Date: November 5, 2019**

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### **Case Synopsis:**

85 year-old female community patient was found smoking whilst on home oxygen and deemed unsafe to live alone. Admitted to acute care in Sept 2018 then moved to long term care in May 2019 due to dementia and COPD. Main issues are vascular dementia with significant short term memory impairment leading to frequent verbal agitation towards staff, chronic pain, COPD, hypotension and weight loss. Weight was 41.9 kg upon admission and 39.8 kg presently. Ten years ago, she weighed 54 kg. Her albumin level is 34.

Questions:

1. What is the value for pre-albumin testing in monitoring nutrition? Shall I do a level?
2. Must I be worried about her weight loss - current malnutrition, her life expectancy probably short, but longer than 6 months?

### **Summary of Recommendations:**

- Reassessment of COPD and symptoms of dyspnea and coughing that may limit physical activity and social engagement at mealtimes
- Getting out of bed and sitting up for meals
- Using person-centred approach, explore past mealtime preferences
- There is evidence to support communal eating which may increase oral intake
- Assessment of oral cavity, dental pain and regular oral care
- SLP referral for assessment of oropharyngeal dysphagia
- Denture refitting given weight loss or modifying diet texture if dentures are not in use
- Continue Vitamin D supplementation of 1000 IU per day as dietary sources are not adequate
- Recent weight loss can be attributed to sarcopenia. Some strategies include engaging resident's friend in increasing physical activity; going to dining room for meals, referring physiotherapy
- Addressing possible starvation mechanism by using “making every bite count” approach with high calorie foods—chocolate pudding, ice cream, sweets, substituting regular milk with homemade milkshakes with 3% milk and whey protein three times per day. A commercial product, ReadyCare drinks, was also suggested for additional calories
- Pre-albumin testing is not recommended as it will not add value to medical management
- Continuing to manage and treat pain, mood and constipation which may affect appetite