**Prescribing Pathway for the Initiation and Renewal of Standard Oral Nutritional Supplements (ONS) for Adults Living in the Community**

Updated November 2018

This guidance is designed to aid clinical decision making, it is not intended to outweigh clinical judgement exercised in the interests of the patient. For the avoidance of doubt, the clinician retains the absolute discretion to prescribe whatever ONS the clinician believes best meets the needs and interests of the patient.

**STEP 1: Prior to INITIATION or RENEWAL of an ONS prescription consider the following:**

**Confirm an indication for prescribing ONS i.e. (a) or (b) below**

(a) At risk of malnutrition or malnourished

- Body Mass Index (BMI) ≤ 18.5kg/m²
- Unintentional weight loss >10% in past 3-6 months
- BMI < 20kg/m² and unintentional weight loss > 5% in past 3-6 months
- Those who have eaten little or nothing for 5 consecutive days and/or are likely to eat nothing for a further 5 days or more
- Those with a poor absorptive capacity and/or high nutrient loss and/or increased nutritional needs

OR

- Identified using a validated malnutrition screening tool*

OR

- Has a diagnosis of malnutrition made by a dietitian or a member of the medical team.

(b) Palliative care

**Early stages of palliative care**

This pathway can be followed in the early stages of palliative care where ONS may be beneficial.

**Late stages of palliative care**

The goal of nutrition therapy should be comfort not weight gain or reversal of malnutrition.

Patients in the final days or weeks of life are unlikely to benefit from ONS.

**TIP:** Guidance for prescribing ONS in late stages of palliative care is available at [www.hse.ie/nutritionsupports](http://www.hse.ie/nutritionsupports).

**Considerations for renewal**

Prescriptions should not be adjusted without consultation with the relevant healthcare professional for the following patients:

- those under the current care of a community dietitian or acute hospital dietitian/medical team
- those using ONS via enteral feeding tubes e.g. naso-gastric, naso-jejunal, gastrostomy or jejunostomy tubes
- those under the care of speech and language therapist as swallow status may have changed and/or ONS must be in line with patient’s current safe swallow recommendations.

**STEP 2: Refer patient to a dietetic service**

- Patients with complex nutritional needs (e.g. renal impairment, poorly controlled diabetes) should always be referred to a dietitian.
- While awaiting a dietetic appointment or in the absence of a dietetic service, progress to steps 3-6.

**STEP 3: Assess for and address underlying causes of malnutrition**

- A patient with a swallowing difficulty (dysphagia) requires referral to a speech and language therapist before ONS can be safely prescribed.
- For gastrointestinal symptoms, social or psychological issues, consider referral to an appropriate health and social care professional.
- Consider whether the patient has adequate assistance, support and supervision if required at mealtimes.

**STEP 4: Set goals of nutritional treatment**

- Typical treatment goals include improvement or maintenance in: weight and/or muscle mass, nutritional intake, functional status and quality of life.

**STEP 5: Provide basic high protein, high energy dietary advice in conjunction with step 6**

Promote and encourage the inclusion of:

- 3 meals and 3 snacks per day
- High protein foods at each meal e.g. meat, chicken, fish, eggs, milk, cheese and nuts
- Use full fat dairy products e.g. milk, butter, cheese and yogurts

**STEP 6: Choose a standard ONS to prescribe (see below). Refer to First-line Prescribing List overleaf for more detail**

<table>
<thead>
<tr>
<th>YES: Powdered ONS (requires mixing with 200mls milk)</th>
<th>NO: Compact and mini sip feeds</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Complan® Shake</strong></td>
<td><strong>Altraplen® Compact</strong></td>
</tr>
<tr>
<td><strong>Foodlink Complete®</strong></td>
<td><strong>Ensure® Compact</strong></td>
</tr>
<tr>
<td>Reconstituted with 200mls whole milk</td>
<td><strong>Fortisip® Compact</strong></td>
</tr>
<tr>
<td>Typical dose 1-2 sachets per day</td>
<td><strong>Fresubin® 2kcal Compact</strong></td>
</tr>
<tr>
<td>(provides approx. 380-840kcal and 15-39g protein)</td>
<td><strong>Fresubin® 2kcal Mini Drink</strong></td>
</tr>
</tbody>
</table>

Record the dosage and estimated length of treatment.

Clinical benefits of standard ONS are typically seen with 300-900kcal/day in the community within 2-3 months (dependent on compliance).

**STEP 7: Review and discontinue ONS prescriptions**

Review: Patients should be reviewed on a regular basis (within 3 months) to ensure compliance with ONS and to monitor progress in goals of treatment and dietary intake. Prescriptions should not be renewed without checking compliance. Amend the type/flavour to maximise compliance if necessary.

Discontinue when treatment goals are met and/or when the patient is established on adequate oral intake from food.

- Consider reducing the quantity of ONS prescribed gradually to ensure progress is maintained.
- Continue to monitor for recurrence of risk of malnutrition.

TIP: Dietary advice resources ‘Making the most of every bite’ are available to view or order free of charge at [www.hse.ie/nutritionsupports](http://www.hse.ie/nutritionsupports).

TIP: Contact details for HSE Community Dietetic services are available at [www.hse.ie/nutritionsupports](http://www.hse.ie/nutritionsupports).

*E.G. MUST: Malnutrition Universal Screening Tool; MNA: Mini Nutritional Assessment; MST: Malnutrition Screening Tool. References available on request from mmp@hse.ie. Version 2: November 2018*
Standard Oral Nutritional Supplements (ONS)
First-line Prescribing List for Adults Living in the Community
Updated November 2018

This guidance should be used in conjunction with the ‘Prescribing Pathway for the Initiation and Renewal of Standard ONS for Adults Living in the Community’ (overleaf).

- This guidance is designed to aid clinical decision making where a patient has an indication for prescribing ONS. It is not intended to outweigh clinical judgement exercised in the interests of the patient. For the avoidance of doubt, the clinician retains the absolute discretion to prescribe whatever ONS the clinician believes best meets the needs and interests of the patient.
- This guidance refers to standard ONS for Adults. It does not include information on disease-specific ONS (e.g. renal- and diabetes-specific ONS) which should ideally only be prescribed to patients under the supervision of a dietician.
- This guidance is not suitable for patients who require ONS as a sole source of nutrition.
- First-line ONS options were chosen with consideration for clinical evidence, patient factors and cost.

Tips when prescribing ONS

- Best practice indicates that patients who require nutrition support should always be given dietary advice in conjunction with an ONS prescription.
- ONS should be regarded as ‘supplementary’ to normal food, not meal ‘replacements’ or as a sole source of nutrition unless under the supervision or by recommendation of a dietician.
- Advise patients that, where possible, ONS should be taken between or after meals or before bedtime to ensure maximum intake of normal foods.
- Patient taste preference should always be taken into account to help improve compliance. Flavours can be switched regularly to avoid taste fatigue.
- If a patient struggles with compliance due to volume, consider dividing the total dose of ONS into smaller volumes taken over the course of the day.

Options: If the patient cannot tolerate milk-based drinks

Juice-style sip feeds (1.5 kcal/ml)

<table>
<thead>
<tr>
<th>Products</th>
<th>Size</th>
<th>Nutritional content</th>
<th>Reimbursed price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensure® Plus Juice</td>
<td>220mls</td>
<td>330 kcal, 10.6g protein</td>
<td>€1.80</td>
</tr>
<tr>
<td>Fortijuice®</td>
<td>200mls</td>
<td>300 kcal, 8g protein</td>
<td></td>
</tr>
<tr>
<td>Fresubin® Juicy</td>
<td>200mls</td>
<td>300 kcal, 8g protein</td>
<td></td>
</tr>
</tbody>
</table>

Products are NOT milk free (contain milk protein)

Variety of flavours available

Considerations for prescribing pre-thickened and semi-solid style ONS

- Where a patient does not have a diagnosed swallowing difficulty, first-line products (above) are recommended, on the basis of clinical evidence and cost.
- Pre-thickened and semi-solid style ONS (listed below) should ideally only be prescribed under the guidance and recommendation of both a speech and language therapist and a dietician.

Pre-thickened ONS: Fresubin® thickened Stage 1 & Stage 2, Nutulis® Complete Stage 1.