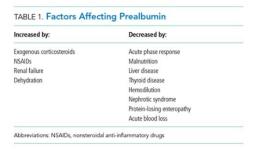


Why This Is Unnecessary and Potentially Harmful

 Prealbumin is not specific – many factors can affect the prealbumin level that are unrelated to nutritional status.⁵



 Prealbumin is not sensitive – normal prealbumin levels have been seen in studies of patients with mean BMIs as low as 12.9 kg/m2.6

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Why This Is Unnecessary and Potentially Harmful

- Prealbumin is not consistently responsive to nutritional interventions
 - A study of patients with Alzheimer's disease and normal CRP levels who had improving phsyical markers of nutritional status showed no changes in prealbumin.⁷
 - A study of critically ill patients showed no difference in prealbumin in the cohort receiving greater than 60% of their estimated caloric needs as compared to a cohort not meeting that goal.⁸
- Changes in prealbumin are not consistently correlated with changes in health outcomes.⁹



What You Should Do Instead

- Work with nutritionists/dieticians at your institution to use nonbiologic methods for screening and diagnosing malnutrition.
- The Global Leadership Initiative on Malnutrition agreed on the following clinically relevant diagnostic variables for screening and assessment of malnutrition:
 - Reduced food intake (anorexia)
 - Nonvolitional weight loss
 - · (Reduced) lean mass
 - Status of disease burden and inflammation
 - Low BMI or underweight status

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Deprescribing: What About Vitamins, Minerals, and Other Nutritional Supplements?

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