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Cost-Benefit Analysis of Oral Nutritional Supplements Intervention in the Older Adults with Malnutrition

Speaker biography

Dr. Emanuele Cereda graduated as an MD in 2002 and obtained a specialization degree in Clinical Nutrition in 2006, followed by a PhD in "Clinical and Experimental Nutrition" in 2009. Since 2010, he has been working as a physician and research scientist at the Clinical Nutrition and Dietetics Unit of the Fondazione IRCCS Policlinico "San Matteo" in Pavia, Italy. As a lead investigator in numerous clinical trials, his research activities have resulted in a significant number of publications. These publications primarily focus on disease-related malnutrition and its associated complications in various healthcare settings, including oncology, sarcopenia, body composition, wound healing, and neurodegenerative diseases, particularly Parkinson's disease. Dr. Cereda also serves as an Associate Editor of Clinical Nutrition and is a member of the Scientific Committee of the European Society for Clinical Nutrition and Metabolism (ESPEN).

Abstract

In the face of rising costs and decreasing affordability, both public and private resource allocators are actively seeking value in healthcare. The undeniable health benefits of nutritional products and interventions necessitate a careful consideration of their cost within the healthcare system. The body of evidence from health economics and outcomes research studies is expanding and demands attention.

Nutrition care proves to be an effective and cost-efficient approach to improving the health of at-risk or malnourished patients. It serves as a valuable component of healthcare across various settings - from hospitals and nursing homes to rehabilitation centers and community living. Furthermore, it has a significant impact on populations, particularly focusing on older individuals and those with chronic health conditions. The cost-effectiveness of these interventions is evident, with tangible benefits for payers.

However, despite the existing knowledge, there is still a need for further research in this area. Future studies should incorporate relevant analysis to provide better insights to practitioners, institutions, and policy-makers regarding the cost-benefit dynamics of nutritional care. Collectively, these efforts will lead to an improved allocation of resources and facilitate greater access to medical nutrition.

By recognizing the value of nutritional care and continuously investigating its cost-effectiveness, we can strive towards a healthcare system that optimizes resources and ensures equitable access to essential nutritional interventions.

In this lecture, Dr. Cereda will specifically delve into the "Cost-Benefit Analysis of Oral Nutritional Supplements Intervention in the Older Adults with Malnutrition". The focus will be on evaluating the economic implications and potential advantages of incorporating oral nutritional supplements as part of interventions for malnourished older adults. By examining the cost-effectiveness and benefits of such interventions, we aim to provide valuable insights for healthcare practitioners, institutions, and policy-makers.

References

1. Martin B, et al. Cost-effectiveness analysis of oral nutritional supplements with nutritional counselling in head and neck cancer patients undergoing radiotherapy. *Cost Eff Resour Alloc.* 2021 Jun 15;19(1):35. doi: 10.1186/s12962-021-00291-7.
2. Elia M, et al. A systematic review of the cost and cost effectiveness of using standard oral nutritional supplements in community and care home settings. *Clinical Nutrition (Edinburgh, Scotland).* 2016 Feb;35(1):125-137. doi: 10.1016/j.clnu.2015.07.012. PMID: 26309240.
3. Abizanda P, et al. Costs of Malnutrition in Institutionalized and Community-Dwelling Older Adults: A Systematic Review. *J Am Med Dir Assoc.* 2016 Jan;17(1):17-23. doi: 10.1016/j.jamda.2015.07.005. PMID: 26712488.

Watch the 18:22 minutes conference talk with Professor Emanuele Cereda: CONFERENCE TALK: COST- BENEFIT ANALYSIS OF ORAL NUTRITIONAL SUPPLEMENTS INTERVENTION IN THE OLDER ADULTS WITH MALNUTRITION



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