

## Personalized diets for elderly after hospitalization decreases mortality rates

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Intense, individually tailored dietary treatment for acutely hospitalized elderly has a significant impact on mortality, according to a new study by researchers at Ben-Gurion University of the Negev.

The intervention study just published in the prestigious <u>Journal of the American Geriatric Society</u> showed higher death rates six months after discharge (11.6 percent) of the <u>control group</u> compared to the intervention group's death rate of 3.8 percent, which received intensive nutritional treatment designed and implemented by a registered dietician.

The study recruited 259 hospitalized adults aged 65 and older who were nutritionally at risk. After six months, the rise in the mini-nutritional assessment score (an indicator of nutritional status) was significantly higher in the intervention group than in the control group.

According to BGU researcher Dr. Danit R. Shahar, "This is the first study that used an individually tailored dietary treatment for acutely hospitalized elderly people. The results indicate that intense dietary treatment reduces mortality and can help reduce the need for rehospitalization."

In the study, a dietician met each patient upon admission to the hospital. The dietitian then followed the patient in his home, visiting three times after discharge.

The study dieticians (case managers) were the decision-makers regarding



appropriate treatment and set up treatment goals. The basic approach was to develop a dietary menu based on inexpensive food sources and recipes. Patients had monthly contact by telephone to improve cooperation and prevent dropout from the study. The dieticians performed follow up assessment three to six months after discharges for all patients.

While the overall dropout rate was 25.8 percent, a standard range for elderly studies, after six months the rise in the mini-nutritional assessment score (an indicator of nutritional status) was significantly higher in the intervention group than in the control group.

Provided by American Associates, Ben-Gurion University of the Negev

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