ternational Centre for Allied Health Evidence

iCAHE JC Critical Appraisal Summary

Journal Club Details

Journal club location: Repatriation General Hospital

Journal club Facilitator: Caroline B

Journal club Discipline: Dietetics

Review Question/PICO/PACO

P: elderly patients post-fractured NOF (<10 days post)

I: measuring of energy expenditure and/or protein requirements

O: whether energy/protein requirements are elevated in the acute phase post fractured NOF.

Article/Paper

Bell, JJ, Bauer, JD, Capra, S, Chrys Pulle, R 2014, 'Multidisciplinary, multi-modal nutritional care in acute hip fracture inpatients e Results of a pragmatic intervention', *Clinical Nutrition* vol. 33, pp. 1101-1107.

Please note: due to copyright regulations CAHE is unable to supply a copy of the critically appraised paper/article. If you are an employee of the South Australian government you can obtain a copy of articles from the DOHSA librarian.

Article Methodology: Case Control

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Ques No.	Yes	Can't Tell	No	Comments
110.		1011		Was the purpose stated clearly?
1	✓			The aim of this study was to investigate the impact of individualised versus multidisciplinary nutritional care on nutrition intake and outcomes in patients admitted to a metropolitan hospital acute hip fracture unit.
2	✓			Was relevant background literature reviewed? Relevant background literature has been presented in the introduction of the article.
	✓			Describe the study design. Was the design appropriate for the study question?
				A controlled before and after comparative interventional study design was used to address the study aims.
3				Randomly selected patients receiving individualised nutritional care (baseline) were compared with post-interventional patients receiving a new model of nutritional care promoting nutrition as a medicine, multidisciplinary nutritional care, foodservice enhancements, and improved nutrition knowledge and awareness.
	*			Was the sample described in detail? Table 2 (p1103) details patient demographic, morbidity and mortality data for the individualised nutritional care (INC) and MMNC groups. There were no significant differences in demographical data; both groups consisted of predominantly female, elderly, community dwelling, multimorbid patients with timely surgical intervention.
4				Describe ethics procedures. Was informed consent obtained?
*				Ethics approvals were obtained from both The Prince Charles Hospital Human Ethics Research Committee (HREC12/QPCH/83) and the University of Queensland (HMS12/0904).
				Verbal and written consents for multi-disciplinary interventions and treatments were obtained in line with routine clinical practice requirements; however ethics approval was obtained to waive research related written formal patient consent.

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			Specify the frequency of outcome measurement (i.e., pre, post, follow-up)
			The baseline data (Quantitative and qualitative baseline data) was described in a previous article.
5			Baseline: This process included five purposefully sampled multidisciplinary focus groups stratified by clinical experience to identify barriers and facilitators to protein and energy intake in hip fracture patients admitted to the unit. These results guided two workshops with multidisciplinary team members to develop a new MMNC model. Daily board rounds, twice weekly case conferences, and routine multidisciplinary educational sessions provided further opportunities to develop, review, and embed this new model within routine clinical practice over a 4-week period. Post-intervention: Post interventional data was then collected from July to September 2012.
	√		Were the outcome measures reliable? Were the outcome measures valid? The outcome measures used have been outlined in section 2.2. In this section the authors have provided detail on validity and reliability and also cited the appropriate sources.
6	✓		Intervention was described in detail? The intervention has been described in section 2.1 (p1103).
	✓		Results were reported in terms of statistical significance? The results have been reported using text and tables. The p-values have been provided for outcomes studied in table 3 (p1104).
7	✓		Were the analysis method(s) appropriate? YES. See section 2.3 for details.
			What was the clinical importance of the results? Were differences between groups clinically meaningful?
			Journal Club to Answer.
			Did any participants drop out from the study?
8	√		This has been shown in Figure 1 (p1105). The number and reasons for non-completions have been shown.
9		l	What did the study conclude? Conclusions were appropriate given study methods and results?

10	Journal club to discuss	What do the study findings mean to practice (i.e. clinical practice, systems or processes)?
11		What are your next steps? (e.g. evaluate clinical practice against evidence-based recommendations; organise the next four journal club meetings around this topic to build the evidence base; organize training for staff, etc.)
12		What is required to implement these next steps?

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