

Cases of malnutrition surge in UK

Liz Smith, Harvey Thompson
17 December 2015

A recent report titled “The cost of malnutrition in England and potential cost savings from nutritional interventions” highlights the consequences of poverty affecting large parts of the population of the world’s fifth-wealthiest country.

The report is authored by the Malnutrition Action Group of the British Association for Parenteral and Enteral Nutrition (BAPEN) and the National Institute for Health Research Southampton Biomedical Research Centre (NIHR Southampton BRC).

Malnutrition is a serious medical condition that occurs when a person’s diet does not contain the necessary nutrients. Last year, almost 3 million people in the UK at any one time were estimated either to be suffering or at risk from malnutrition. The BAPEN/NIHR report, the result of three years of collaboration, focuses on England, but its findings could be applied to the rest of the country.

“Malnutrition is a common clinical and public health problem in England, which is found in all care settings, all disease categories, and individuals of all ages,” it states.

Using the Malnutrition Universal Screening Tool (MUST) for adults in England, malnutrition is estimated to affect approximately:

- 30 percent of adults on admission to hospital.
- 35 percent of residents in care homes.
- 15 percent or more of adults attending hospital outpatients.
- 18 percent of adults on admission to mental health units.
- 12–14 percent of adults in sheltered housing.
- 10 percent of adults visiting their general practitioner (GP).
- 5 percent of the adult population of England.

Its research, and that of others, have shown that malnutrition increases:

- Hospital admissions, length of hospital stay, as well

as hospital readmission following discharge from hospital.

- Risk of becoming dependent on others and becoming a permanent resident in a care home, especially those with nursing care.

- Visits to a GP.

The report is written from the standpoint of advising the state of “potential cost savings.” It evaluates the “clinical and economic burden of malnutrition” and employs arguments in this vein. Nonetheless, the findings reveal a growing social scourge in contemporary England.

The “cost of malnutrition” in England is estimated to be £19.6 billion per year, or “more than 15 percent of the total public expenditure on health and social care.” Around half of this total expenditure is spent on those over 65 years of age, and the other half on children and young adults.

In conclusion, the report calls for, “The burden of malnutrition” to be “tackled in an integrated and coordinated manner by multidisciplinary groups of health and social workers, including health planners, commissioners, clinicians, nurses, dieticians and pharmacists.”

The “multidisciplinary” collaboration recommended by the report blatantly ignores the social reality of austerity in Britain, where the National Health Service (NHS) is being dismantled as the effects of the economic crisis are pushed onto the backs of the poorest and most vulnerable.

According to recent figures obtained through a freedom of information (FOI) request by Birmingham City University student Eiryo Saeki to NHS foundation trusts (43 responded), there were 193 “episodes” of malnutrition in just 12 months at Salford Royal NHS Foundation Trust alone, in Greater Manchester. Birmingham Children’s Hospital reported 31 instances of malnutrition last year, almost double the number for

2013.

NHS managers in Salford have warned that thousands of people in the city may be struggling to get enough food to eat. Kirstine Farrer, head of innovation and research at Salford Clinical Commissioning Group, said BAPEN, in 2013, “suggested that of Salford’s population of 35,000 aged 65 years or older, 14 percent or almost 5,000 people may be at risk of malnutrition.”

While Salford Royal had the highest number of malnutrition cases in 2014, incidences are spread throughout the country. Yeovil District Hospital in Somerset had 161 cases, followed by the Heart of England, Birmingham, with 113. Sheffield Teaching Hospitals had 92, University Hospitals Birmingham, 89, Norfolk and Norwich University Hospitals, 87, Colchester Hospital University, 75, East Kent Hospitals University, 70, University Hospitals, 70, and Bristol and York Teaching Hospital, 60.

NHS statistics cited recently in the *Independent* show that 7,366 people were admitted to hospital with a primary or secondary diagnosis of malnutrition between August 2014 and July 2015, compared with 4,883 cases in the same period from 2010 to 2011. This is an increase of more than 50 percent in just four years.

The rise in malnutrition has coincided with the explosion in the use of food banks by millions of people. Nationally, between April and September 2015, the Trussell Trust, one of the UK’s main food bank providers, gave 506,369 emergency food supplies to people, compared to 492,641 in the same period last year.

The Trust reports that in the hours from March 31 to April 1, 2015, food banks in Greater Manchester fed 16,083 people, including 6,206 children. Chairman Chris Mould said, “We meet families across the UK who are struggling to put enough food on the table, and at the extreme end of that you get people who are malnourished. We often see parents who are going without food so that they can feed their children, and these parents often struggle to afford enough nutritious food for their children too.”

These figures were revealed as Tameside Hospital, also in Greater Manchester, became the first NHS hospital in the UK to set up a permanent food bank on site. Three food collection points have been set up, with donations delivered to a central warehouse. These were established as medical staff were reporting a significant

increase in the number of malnourished patients turning up for treatment and care.

The hospital’s chief executive, Karen James, said staff had noticed patients are “often coming through malnourished,” and when talking to patients “we find out that they are suffering and there is a need.” She said people were making choices about whether to pay a bill or feed the family.

Natalie Welsh, a nutrition specialist nurse at Tameside, said, “It’s really important that these people are highlighted in our community because quite often by the time they come through our doors and need to be admitted, the damage is already done. It can take us a long time to get them to recover from illness and disability because of the malnutrition they have suffered.”

The vast increase in social inequality in the UK is leading to increased levels of malnutrition, alongside the growth of diseases such as scurvy, scarlet fever, cholera and whooping cough. According to a report by the London Assembly, tuberculosis rates in some London wards such as Brent, Ealing, Harrow, Hounslow and Newham, are higher than in Rwanda or Iraq.



To contact the WSWS and the
Socialist Equality Party visit:

wsws.org/contact