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This guideline will inform physicians, nurses, dieticians, pharmacists, caregivers and other home enteral nutrition (HEN) providers about the indications and contraindications for HEN, and its implementation and monitoring. Home parenteral nutrition is not included but will be addressed in a separate ESPEN guideline.

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~~ESPEN guideline on home enteral
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nutrition 849 techniques.18 – 20In those
rare situations in which there is a stenosis
of the oesophagus which is resistant to
bougienage and prevents passage of an
endoscope, a gastric or jejunal feeding
tube can be inserted with the aid of
sonographic^{21,22}or fl uoro-
scopic^{22 – 24}guidance.

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333 maintains or improves nutritional parameters irrespective of the underlying diagnosis. The metabolic consequences of ageing which can lead to sarcopenia and a severely reduced nutritional status at the time of tube placement can impair or even prevent successful nutritional therapy (III).

~~ESPEN Guidelines on Enteral Nutrition: Geriatrics~~

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291 Fatty liver is known to be a risk factor for primary graft malfunction. No data are available addressing the role of nutritional management of the organ donor. 3.3.

How should EN be delivered?

~~ESPEN Guidelines on Enteral Nutrition: Liver disease~~

ESPEN. ESPEN guidelines on chronic intestinal failure in adults. Clin Nutr

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2016;35:247e307. [5] ASPEN Board of Directors and The Clinical Guidelines Task Force. Guidelines for the use of parenteral and enteral nutrition in adult and pediatric patients. J Parenter Enter Nutr 2002;26:1SAe138SA.

~~ESPEN guideline on home parenteral nutrition~~

vious ESPEN guidelines on enteral nutrition (EN) and parenteral nutrition (PN) in adult critically ill patients published 2006 and 2009, respectively [1,2]. Since then, the ESPEN methodology has been upgraded to the “ S3 guidelines level ” described elsewhere [3] resulting in rigorous evidence-based and consensus-based recommendations.

~~ESPEN guideline on clinical nutrition in the intensive ...~~

According to the European Society for

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~~Clinical Nutrition and Meta-bolism~~

(ESPEN) [27,28]: Nutrition therapy is the provision of nutrition or nutrients either orally (regular diet, therapeutic diet, e.g. fortified food, oral nutritional supplements) or via enteral nutrition (EN) or parenteral nutrition (PN) to prevent or treat malnutrition. “ Medical nutrition

~~ESPEN guideline: Clinical nutrition in surgery~~

2002 Guidelines [Please refer to newer Clinical Guidelines above]: ASPEN Board of Directors and the Clinical Guidelines Task Force. Guidelines for the use of parenteral and enteral nutrition in adult and pediatric patients. JPEN 2002, Vol 26, Issue 1S, pp. 1SA - 138SA; Errata JPEN 2002, Vol 26, Issue 2, p 144.

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213 The results of the Cochrane Library review by Heyland⁵ however, differed in its conclusions. Heyland concluded that early EN should be recommended in the critically ill (B) whereas it should only be considered in other ICU patients (C).

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Supplementary parenteral nutrition remains a reserve tool and should be given only to those patients who do not reach their target nutrient intake on EN alone. There is no general indication for immunomodulating formulae in patients with severe illness or sepsis and an APACHE II Score >15.

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The enhanced metabolic rate and protein catabolism necessitate an increased

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energy intake from both fat (30%) and carbohydrates (50%). 1.0 – 1.5g ESPEN Guidelines on Enteral Nutrition 277 proteins are usually sufficient.

~~ESPEN Guidelines on Enteral Nutrition:~~ Pancreas

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~~Guidelines—ESPEN~~

These guidelines are intended to give evidence-based recommendations for the use of enteral nutrition (EN) in patients with chronic heart failure (CHF) and chronic obstructive pulmonary disease (COPD). They were developed by an interdisciplinary expert group in accordance with officially accepted

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standards and are based on all relevant publications since 1985.

~~ESPEN Guidelines on Enteral Nutrition: Cardiology and ...~~

T. Sch ü tz, B. Herbst, M.

Koller Methodology for the development
of the ESPEN Guidelines on Enteral
Nutrition Clin Nutr, 25 (2) (2006), pp.

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pancreatitis Marianna Arvanitakis a, *,
Johann Ockenga b, Mihailo Bezmarevic c,

Luca Gianotti d, Zeljko Krznari c e,

Dileep N. Lobo f, g, Christian Loser € h,

Christian Madl i, Remy Meier j, Mary

Phillips k, Henrik H ø jgaard Rasmussen l,

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Jeanin E. Van Hooft m, Stephan C
Bischoff n a Department of
Gastroenterology ...

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249 by ω -3 fatty acids is considered in
statement 2.5 of this chapter. There are no
data—other than in perioperative
nutrition—available on the effects of
formulae enriched with glutamine or other
immune modulat- ing substances on the
nutritional status of cancer patients.

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