NHS

The Royal Wolverhampton
NHS Trust

Parenteral Nutrition

Nutrition and Dietetics

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- **Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available**
- **If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111**
- **Keep the environment clean and tidy**
- **Let’s work together to keep infections out of our hospitals and care homes.**

Safe & Effective | Kind & Caring | Exceeding Expectation

Introduction

You have been given this leaflet because you require parenteral nutrition whilst in hospital. This leaflet will help to explain what parenteral nutrition is, why it's required, how it's given, and how it is managed in this trust.

What is parenteral nutrition?

Normally all food and drink is digested and absorbed by the gut. When the gut is not functioning properly the nutrition support team may recommend that parenteral nutrition (PN) is used. PN may be used instead of or in addition to food & drink or tube feeding. PN is an artificial nutritional formulation provided directly into the blood stream via a large vein, completely bypassing the gut. It is a way of providing a person with all of the essential nutrients required when they are unable to be fed using their gut.

Why do I need PN?

You may need PN if your gut is not functioning normally or requires a period of rest. Discuss with your nutrition support team the specific reason why you need PN.

What does PN contain?

PN is a solution containing a balance of all the necessary nutrients found in a healthy balanced diet namely: protein, glucose, fat, vitamins, minerals and water contained in a sterile bag. PN is usually off-white in colour and must be covered by a bag to protect the nutrients from damage from daylight. In some cases, fat is removed from the PN leaving the liquid clear and yellow in appearance. Please let the nutrition support team know if you have any true allergies, as this can affect which ingredients are added into the solution.

How will PN be given?

Your PN will be made daily (Mon – Fri in office hours) to meet your specific nutritional requirements and it will be delivered to the ward by approximately 17:00. PN required over the weekend or on bank holidays is made within the working week and delivered to the ward in advance. No PN is made out of normal office hours.

Most PN solutions are given into the blood stream via a line (drip) in the arm called a peripherally inserted central catheter (PICC). A PICC is inserted using a special sterile technique by specially trained nurses in the IV team. The IV team use a local anaesthetic to insert the line to minimise any discomfort to you. Please discuss any queries regarding your PICC with a member of the IV team. Once the PICC's position is confirmed and the PN has been delivered to the ward, the PN can be started. It is best to leave the PN to stand for one hour at room temperature before it is given.

How many hours in the day will I need to have PN?

Initially you'll have your PN over 24 hours a day. Depending on your nutritional state and your medical condition, the amount of nutrition in your PN solution will be increased towards your nutritional target. Once you and your blood levels are stable, the hours on PN will be reduced slowly to a minimum of 10 – 12 hours overnight, giving you some freedom to move around the ward / hospital without a drip stand for some time in the day.

Are there any risks of having PN?

Yes, there are a few risks to having PN:

Your PICC line used to give the PN may become infected. This trust does on-going audits to monitor infection rates caused by PN which show a very small risk. The IV team has put strategies in place to reduce the incidence of line infection in this Trust.

To minimize the risk of a line infection, staff members must use a sterile technique when handling the line or changing the PN bag and use a dressing over the PICC site to prevent infection. It is important that you also avoid handling your line or dressing. The PICC line will be monitored daily for signs of infection and the dressing will be changed on a weekly basis.

There is a small chance that having PN can increase your risk of developing a clot in the vein that the line is in.

Occasionally lines can become blocked. If your line were to become blocked, you may need a replacement.

PN can have an effect on your blood salt levels and for this reason you may need to have regular blood tests to monitor your levels.

If low, you may need to have additional top-ups of the necessary salts to normalise your levels.

Because PN contains glucose (sugar) there is a risk that your blood sugar levels may become too high or fall too low. This can occur even if you're not a diabetic. For this reason you'll need at least daily checks of your blood sugar levels while you're on PN.

Lastly there are risks involved in having the line placed which the IV team will discuss with you.

Will I feel hungry or thirsty on PN?

You may not feel hungry or thirsty when you're on PN but some people do- just mention this to a member of your nutrition support team. While you're on PN you may be eating and drinking small amounts too. If your gut starts to function well, your PN may be reduced and you may be encouraged to eat and drink more. If your doctor wants you to refrain from eating and drinking completely, it is still important to ensure that you keep your mouth fresh by brushing your teeth and tongue and rinsing your mouth regularly.

What is the nutrition support team?

If you're on PN, you'll be under the care of the trust's nutrition support team (NST). The members of the NST include a specialist dietitian, a pharmacist and a consultant gastroenterologist. Initially you'll be reviewed daily in the working week by the NST but as you get better and more stable, you will be reviewed less regularly (two to three times per week).

Will I need PN when I go home?

Most patients wean off PN and onto a normal diet when their gut starts to function normally again. A very small group of patients may require PN for an extended period, and so may be referred to a specialist centre for further assessment, management and training for PN at home / in the community.

Further support

For those who remain on PN for longer periods of time or permanently, there is a national patient support group known as PINNT (Patients on intravenous and nasogastric nutrition therapy) that can offer support.

PINNT
PO Box 3126
Christchurch
DorsetBH23 2XS

Tel: 020 3004 6193

Email: comms@pinnt.com

Facebook- PINNTcharity

X(twitter) @pinntcharity

With any further questions regarding PN, please ask a member of the ward or medical team or speak with a member of the NST Monday to Friday 08:30am-5pm.

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。

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