

SUBSTANCE MISUSERS

Special considerations for Oral Nutritional Supplement (ONS) Prescribing

Oral Nutritional Support (ONS) prescribing in substance misusers (drug and alcohol misuse) is an area of increasing concern, due to questions of effectiveness and cost.

Substance misuse is NOT a specified ACBS indication for prescription ONS.

Local policies in the UK differ widely for ONS use in substance misusers – the following recommendations may be helpful as a guide which you may wish to adapt according to the needs of the individual patient:

It is recommended that ONS should NOT be prescribed for substance misusers unless ALL the following criteria are met:

- BMI < 18 kg/m²
- AND evidence of significant weight loss (>10% within previous 3-6 months)
- AND co-existing medical condition which could affect weight or food intake
- AND after nutritional advice has been given by a healthcare professional and tried by the patient for at least one month
- AND the patient is in a rehabilitation programme e.g. methadone or alcohol programme or on the waiting list to enter a programme

If ONS is initiated:

- The patient should be weighed regularly, e.g. every month
- Nutritional goals must be set and monitored e.g. goal to improve food intake **and** prevent further weight loss or attain an acceptable weight (target BMI of 18.5 kg/m² to 25 kg/m², depending upon what is a realistic goal for the individual)
- If patient fails to attend on two consecutive occasions, ONS should be discontinued
- Maximum prescription recommended is a 300-400 kcal supplement twice daily
- A cost-effective or first line supplement should be offered initially, e.g. Aymes[®] Shake or Ensure Shake[®]. These are cost-effective powdered supplements, which the patient mixes with full fat milk (unsuitable in lactose intolerance)
- Prescriptions should be on acute, not repeat, to facilitate monitoring and reviewing
- Prescribe on a short term basis only (i.e. 1-3 months)
- If there is no change in weight after three months, ONS should be reduced and discontinued
- If weight gain occurs, continue until usual weight or acceptable weight (see above) is reached, and commence a withdrawal plan by reducing one supplement per day initially for one month, then discontinue ONS

If the individual doesn't meet the criteria above but is insistent on using a high energy supplement, recommend over the counter supplements such as Aymes[®] or Complan[®].

Nutritional Issues

The following information has been documented to provide some awareness regarding the nutritional issues that may be relevant in substance misusers and problems that can arise from prescribing ONS.

Substance misusers may have a range of nutrition related problems such as:

- Poor appetite and weight loss
- Nutritionally inadequate diet
- Constipation (drug misusers in particular)
- Dental decay (drug misusers in particular)

Reasons for nutrition related problems include:

- The drugs themselves - can often cause poor appetite, reduced pH of saliva leading to dental problems, constipation, craving sweet foods (drug misusers in particular)
- Chaotic lifestyles
- Lack of interest in food and eating, and displacement of food by substance use
- Poor dental hygiene
- Irregular eating habits
- Poor memory
- Poor nutrition knowledge and skills
- Low income, potentially intensified by increased spending on drugs or alcohol
- Homelessness / poor living accommodation
- Poor access to food
- Infection with HIV or hepatitis B and C
- Eating disorders with co-existent substance misuse

Problems often created by prescribing ONS for Substance Misusers:

- Once the prescription is started, it can be difficult to stop
- ONS may be taken instead of meals and therefore provide no benefit
- ONS may be given to other members of the family/friends
- ONS may be sold and used as a source of income
- Substance misusers can have poor attendance to appointments, therefore making it difficult to monitor weight, nutritional goals and re-assess need for ONS

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