

PRACTICE PROTOCOLS OF DIETITIANS WORKING IN BARIATRIC SURGERY-QUESTIONNAIRE RESULTS

Merril Bohn

Background

Dietitians accessing the Dietitians Association (DAA) email based Obesity Interest Group often ask for advice regarding what other dietitians do in their bariatric practices pertaining to dietary and supplementation issues. There appeared to be some variation in responses across Australia and this questionnaire sought to establish if these differences did in deed exist and if so, were these differences significant

Aim

To establish similarities and differences in pre and post-operative dietary management for bariatric patients across Australia and NZ.

Method

A questionnaire was sent to all dietitians in the OSSANZ and DAA bariatric / obesity interest groups. Questions asked included:

- Types and length of texture modified diet used
- Optifast protocol
- Oral supplementation protocols
- Vitamin and mineral supplementation protocols
- Protein recommendations
- Number of dietetic visits stipulated
- Use of the EPC program

Results

27 questionnaires were returned and collated. Results showed:

- practices pertaining to types and length of texture modified diets varied only marginally in the majority of practices
- 89% used Optifast routinely in the immediate pre-op phase
- 74% used high protein supplementation in the immediate post – op period
- 66% had no set protein level post operatively, 33% aimed for 60 – 100g per day
- 89% recommended vitamin / mineral supplementation in the initial post-op period but this dropped to 59% in the longer term
- 85% of dietitians stipulated a minimum of two post –op visits
- 41% utilized the EPC program but mainly in Victoria

Conclusion

This questionnaire has provided a good basis for face to face discussion and the beginning of establishing Australian based best practice guidelines in the future.