

Avoiding the use of long-term parenteral support in patients without intestinal failure: A position paper

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ESPEN, ESNM, and the Rome Foundation issued a consensus position statement discouraging long-term home parenteral nutrition in patients without intestinal failure due to significant risks and the availability of oral or enteral alternatives.

KEY POINTS

- Consensus opinion states that home parenteral nutrition should not be prescribed for patients without intestinal failure when oral and/or enteral routes can be utilised.
- There has been a recent upsurge in the use of home parenteral nutrition in patients with gastrointestinal neuromuscular disorders, opioid bowel dysfunction, disorders of gut-brain interaction, and possibly eating disorders who do not have intestinal failure.
- Long-term home parenteral nutrition carries significant risks with substantial impacts on morbidity and mortality.
- On rare occasions when parenteral nutrition is required to treat life-threatening malnutrition, it should only be prescribed for a time-limited period to achieve nutritional safety while the multidisciplinary team focuses on biopsychosocial holistic and rehabilitative approaches.
- This position statement is intended for clinicians managing patients with benign gastrointestinal conditions who are considering or using parenteral nutrition support.

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