

# Putting nutrition at the heart of patient care

**Specialist nutrition helps people to be healthy, survive and thrive at every stage of their lives. It supports positive health outcomes and reduces costs to the NHS.**

The British Specialist Nutrition Association (BSNA) is the voice of the specialist nutrition industry in the UK. We represent manufacturers of high quality foods designed to meet the needs of people with specialist nutritional requirements. Our members produce infant formula, follow-on formula, complementary weaning foods, gluten-free foods, parenteral nutrition and medical foods. This is the first of a series of regular columns on perspectives about specialist nutrition.

Many specialist nutrition products are designed to meet the nutritional or dietary needs of patients living with a disease, disorder or medical condition, who are temporarily or permanently unable to achieve a suitable nutritional intake from normal foods. Examples of the specific disease states or medical conditions addressed include: inborn errors of metabolism; protein allergy in infants; coeliac disease; patients who are unable to swallow, for example after a stroke; and patients where the digestive tract is not functioning or not functioning normally. Our members' ranges are designed to give healthcare professionals the scope to select nutritional products that are accurately targeted to support specific treatment regimes and to enhance patient recovery.

## The new Delegated Regulation on Foods for Special Medical Purposes

We welcome the publication of the Commission Delegated Regulation (EU) 2016/128,<sup>1</sup> supplementing Regulation (EU) No 609/2013, on Food for Specific Groups (FSG)<sup>2</sup> which updates the specific compositional and information requirements for foods for special medical purposes (FSMP). This entered into force on 22nd February 2016 and shall apply from 22nd February 2019, except in respect to FSMP developed to satisfy the nutritional requirements of infants, to which it shall apply from 22nd February 2020. This transition period allows for processes such as product reformulation and clinical trials.

This regulation will update, but largely retain, the existing rules for FSMP,<sup>3</sup> including the definition of the category and, on the whole, the nutritional composition of the product. However, there have been modifications to the regulation including changes to the product composition of some FSMP. The minimum and maximum amounts

of each macro- and micro-nutrient are clearly determined in Annex I of the FSMP Delegated Regulation.<sup>1</sup> Due to some changes in the compositional requirements, for example, the new minimum level of selenium is 3µg/100kcal and for docosahexaenoic acid (DHA) it is 20mg/100kcal. Other changes to the regulation relate to labelling and advertising. In terms of the latter, advertising and communication practices for FSMPs designed for infants have been tightened to bring them more in line with regulations for infant and follow-on formula.

## ONS prescription restrictions

We note with concern that some CCGs have restricted the use of sip feeds in an attempt to cut costs and, more recently, one CCG has even blacklisted the use of sip feeds (otherwise known as oral nutritional supplements or ONS) in its care and nursing homes. In our view, this decision is ill advised: not only does it appear to run counter to national clinical guidance (NICE CG32),<sup>4</sup> but the evidence clearly shows that appropriate prescribing and use of ONS could save the NHS £101.8 million per year<sup>5</sup> due to reduced use of healthcare resources, principally hospital admissions and readmissions. ONS should be used under medical supervision, and regularly reviewed and monitored; but it is equally important that they are recognised as an integral part of the management of long-term conditions which require nutritional support.

References 1. EU Commission Delegated Regulation (EU) 2016/128 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for food for special medical purposes 2. Regulation (EU) No. 609/2013 on food intended for infants and young children, food for special medical purposes, and total diet replacement for weight control 3. Directive 1999/21/EC on dietary foods for special medical purposes. 4. NICE guidelines [CG32]. Nutrition support for adults: oral nutrition support, enteral tube feeding and parenteral nutrition: [www.nice.org.uk/guidance/cg32](http://www.nice.org.uk/guidance/cg32). 5. Elia M, Russell C, Stratton RJ, et al, 2015