NHS
Suffolk and
North East Essex

Primary Care Guidance

Prescribing oral nutritional supplements (ONS) for patients who misuse substances

GPs should not routinely prescribe oral nutritional supplements to patients who misuse substances. Substance misuse is NOT an ACBS indication for prescribing nutritional supplements.

The prescribing of oral nutritional supplements to active substance misusers is not recommended. There are a number of substances subject to abuse which promote weight loss including amphetamines, cocaine, opioids, cannabis, and alcohol.

Referral to a Drug Misuse Service would be recommended to address the root cause of weight loss, as part of holistic treatment:

- Essex - Open Road Colchester: 5a Queen Street, Colchester, Essex, CO1 2PG. Telephone: 01206 766096, Open Road Clacton: 132a Wellesley Road, Clacton on Sea, Essex, CO15 3QD 01255 434186 or ARC: Telephone Number: 01376 316126, email Address essex.arc@phoenixfutures.org.uk
- Suffolk - Turning Point turning-point.co.uk Telephone number: 0300 123 0872

Enforcing the importance of a balanced diet is a key part of the patient's recovery pathway and will help empower the individual to regain control of their life.

A malnutrition screening tool helps to identify adults who are malnourished, at risk of malnutrition (undernutrition), or have obesity.

There are exceptional circumstances where prescribing nutritional supplements short term (1 - 3 months) may be beneficial to increase weight and address symptoms of malnutrition. This should be ONLY after first line food fortification advice has been given, tried, and documented as not successful. In this case Aymes Shake (Aymes), Complan Shake (Nutricia) or Foodlink Complete (Nualtra), or a similar milk fortifying product may be offered. Sip (ready-to-drink) feeds should be avoided.

It is important to be aware of the problems associated with sip feed prescribing for substance misusers:

- Once started on sip feeds it can be difficult to stop the prescription
- Sip feeds can be used instead of meals and therefore provide no benefit
- It can be hard to monitor nutritional status and reassess need to continue/stop sip feeds

Nutritional supplements including those mentioned above, should NOT be routinely prescribed to substance misusers unless ALL of the following criteria are met:

- BMI < 18.5kg/m^2
- ***And*** there is evidence of significant weight loss (> 10%) in 3-6 months
- ***And*** there is a co-existing medical condition which could affect weight or food intake and meets ACBS criteria
- ***And*** nutritional advice has been given, tried for four weeks and not successful

ACBS criteria are as follows:

Produced by the Nutrition and Dietetic Department, ESNEFT in collaboration with Essex Partnership University NHS Foundation Trust (EPUT) and the SNEEICB Medicines Optimisation team.
Approved at the Integrated Medicines Optimisation Committee 14th May 2024 Review date: 14th May 2026.

Patients must meet at least one of the ACBS criteria listed below to be eligible for an NHS prescription for any of the nutritional supplements

- Short bowel syndrome
- Intractable malabsorption
- Pre-operative preparation of patients who are undernourished
- Proven inflammatory bowel disease
- Following total gastrectomy
- Dysphagia
- Bowel fistulae
- Disease related malnutrition

When nutritional supplements are initiated:

- The patient must meet ACBS prescribing criteria.
- Prescriptions should be kept on acute and not added to the repeat template.
- They should be prescribed only for a short-term basis only (1-3 months).
- If there is no change in weight after three months, nutritional supplements should be reduced and stopped.
- If weight gain occurs, nutritional supplements should be continued until the treatment goals are met (e.g. usual or healthy weight is reached), after which they should be reduced and stopped
- If long term use is required, please refer to the dietitians, including information re: substance misuse status, what has already been advised and discussed, and up-to-date anthropometrics.
- Nutritional supplements should be discontinued if the patient fails to see dietitian/attend for weight monitoring or meet the above conditions.