Abstract

Purpose, setting and subjects: We conducted a prospective, descriptive study of postoperative patients under total parenteral nutrition controlled by a Multidisciplinary Nutritional Support Team in a tertiary care hospital. Between January 2002 and November 2003. Data of nutritional status, nutritional support, hypophosphatemia, electrolyte and metabolic complications were reviewed. Results: 215 postoperative patients (63.3% male, 68 ± 13.9 years old, 47.4% neoplasia), were included. Nutritional support according nutritional needs was made during fasting 14.2 ± 18.4 days. Mild-moderate initial malnutrition was present in 58% of patients. 18.1% developed postoperative hypophosphatemia 96 hours after starting total parenteral nutrition containing phosphate. 37.7% patients showed moderate and 6.5% severe hypophosphatemia. Nutritional intervention corrected hypophosphatemia (p < 0.001). Factors related to hypophosphatemia were hypokalemia, hypomagnesemia, hypercalcemia, female sex, neoplasia, 96-hour post-operative period and duration of nutrition. Conclusions: Prevalence of hypophosphatemia in postoperative patients with total parenteral nutrition is high and needs timely monitoring. The intervention of Multidisciplinary Nutritional Support Team is effective detecting and correcting postoperative hypophosphatemia.

Keywords