Objectives: Lack of routine patient’s nutritional assessment and prescription of long fasting periods throughout the perioperative period are still widely prevalent despite the advances in surgical care. Therefore, the aim of this study was to assess nutritional routines in two surgical wards. Methods: Adult patients undergoing laparotomy at two distinct units (gastrointestinal and gynecologic) in two public hospitals (one of them a university) were enrolled. Patients were divided in minor and major (groups A and B) procedures and were nutritionally assessed at admission. Daily diet intake and a 24 hour recall were performed. Patients rated the quality of the meals, as well as registered the reasons for not ingesting it fully. Results: Patients in group B presented with poorer nutritional status. Group A patients resumed oral diets on the first post operative day and most of them received regular diets (85.5%). In group B, only 4.7% were allowed a regular diet on the first PO day, 7.0% received soft diets, 30.2% full liquid diets, 27.9% clear liquids and the remaining 30.2% were on NPO. Patients in this group had a slower progression of diets from liquid to regular solid meals, with 7% of them still on NPO on the fifth PO day. Contrary to group B, patients in group A did not present with cumulative caloric and protein deficits throughout the postoperative period. Overall tolerance of the early diet was good. Conclusion: Malnutrition is still high among major surgical patients. Early oral nutrition can be feasible and well tolerated with few side effects, when prescribed.

Keywords