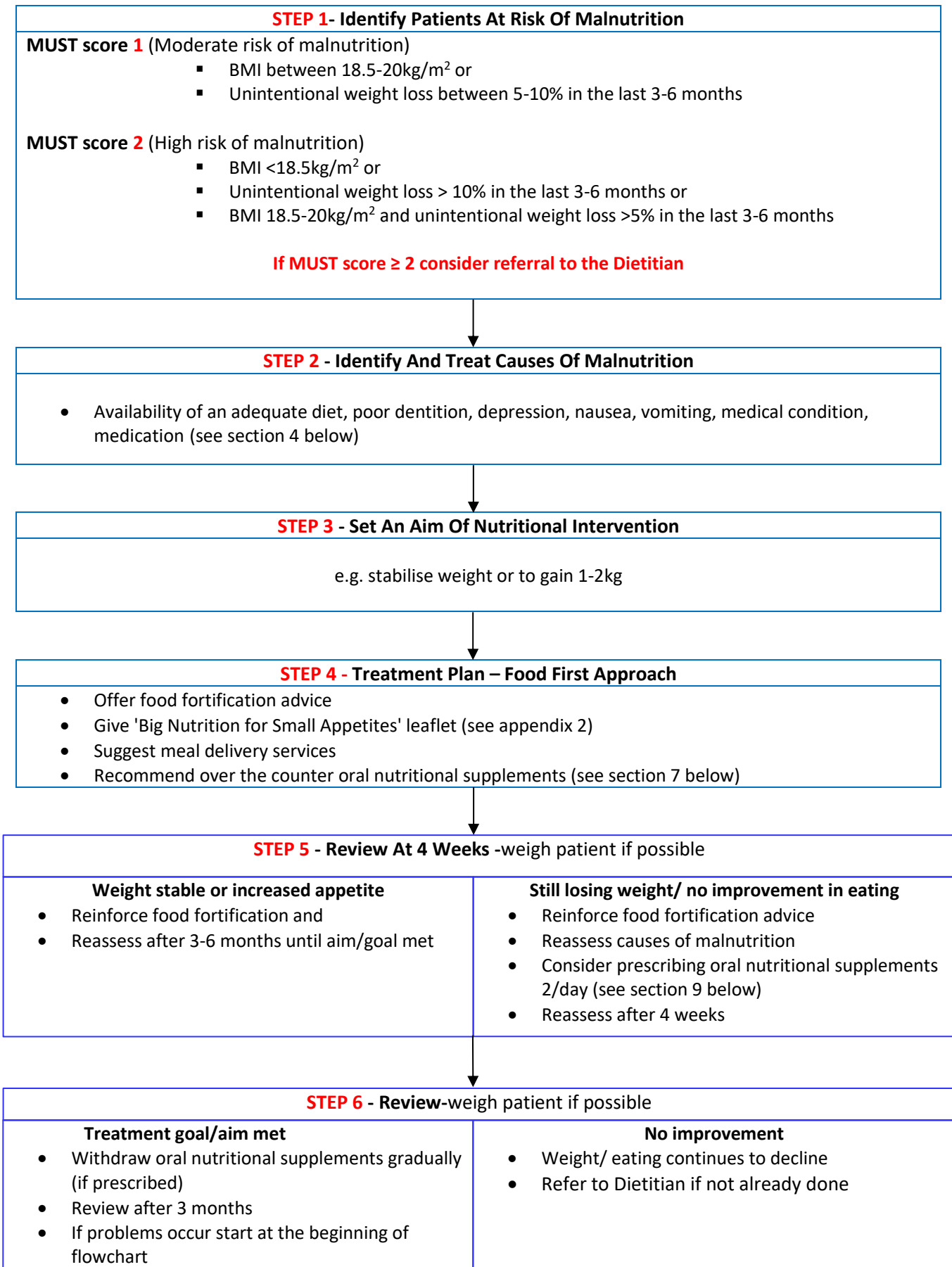


DERBYSHIRE JOINT AREA PRESCRIBING COMMITTEE (JAPC)

Management of undernutrition in adults

- Patients should be screened for nutritional risk using the Malnutrition Universal Screening Tool (MUST) (See <https://www.bapen.org.uk/pdfs/must/must-full.pdf> or appendix 1)
- Record baseline weight or mid-arm circumference (MUAC), height and Body Mass Index (BMI) and agree outcomes of treatment.
- **First line treatment is the fortification of normal diet** (See Appendix 2/3 – Big Nutrition for Small Appetites).
- Use of over the counter supplements is the next intervention (See table, section 7).
- Prescribed oral nutritional supplements (ONS) should be considered if other interventions have been unsuccessful alongside fortified foods and over the counter supplements. (See Appendix 3 for information about standard ONS products).
- Powdered ONS products are the most cost effective if patients/carers have adequate manual dexterity to make them up (see section 10 including exclusion criteria).
- Weight and BMI should be monitored at regular intervals as outlined in the adult nutritional management flow chart (page 2). If unable to take weight, MUAC can be used as an alternative.
- ONS should not be prescribed under the NHS for other indications e.g. for substance misusers who do not meet an additional approved ACBS criterion.
- Specialist products (Appendix 4) should be prescribed **ONLY** on the advice of a Dietitian.

Nutritional Support Flowchart for GPs and Community Nurses



1. Aim

The aim of the guidelines is to ensure effective patient centred oral nutrition support in Derbyshire by promoting a fortified diet and appropriate, effective ONS prescribing.

2. Importance Of Nutrition Risk Screening

The importance of nutrition and the consequences of malnutrition especially in vulnerable groups are well recognised.

NICE (2006) recommends all adults in the community are screened for nutritional risk:

- Within primary care on initial registration and where there is clinical concern.
- On admission into care homes and when there is a clinical concern.
- On a monthly basis when identified at risk.

Screening should be done using the Malnutrition Universal Screening Tool (MUST). The Malnutrition Universal Screening Tool (MUST) developed locally for use in Derby and Derbyshire has been included in Appendix 1.

Alternatively a web based tool may be used: <http://www.bapen.org.uk/screening-for-malnutrition/must-calculator>

3. Subjective Assessment

It may not be always possible to take a weight, height or MUAC to assess an individual's risk of malnutrition. It remains vitally important that those at risk of malnutrition are identified to ensure timely and appropriate intervention.

Signs that an individual may need help or advice to gain weight or eat differently:

- Are they or their family concerned that they are underweight or need nutritional advice?
- Have they lost weight unintentional in the last 3-6 months?
- Are clothes / jewellery loose fitting?
- Is there a history of decreased food intake, reduced appetite or swallowing problems?

Yes to any of the questions above may indicate an individual is at risk of malnutrition.

The web based BAPEN tool includes advice on subjective assessment:

<http://www.bapen.org.uk/screening-for-malnutrition/must-calculator>

4. Assessing The Underlying Causes Of Malnutrition

Physical, psychological and social factors can contribute to causes of malnutrition. It is important to assess and ensure support is available to address underlying problems.

Table 1: Underlying causes of malnutrition

Problem	Potential Solution
Medical conditions cause poor appetite, nausea e.g. cancer, COPD, diarrhoea, constipation	GP and/or Community Matron and/ or District Nursing management, appropriate medication
Poor emotional or mental health e.g. depression, isolation, bereavement	GP management, counselling, social clubs, day centre, Community Psychiatric Nursing Management
Poor dentition	Refer to dentist and advise patient on appropriate/ easy to chew diet
Difficulties with swallowing or unable to swallow	Refer to Speech and Language Therapy services
Unable to do own shopping, and/or cooking and/or feed self	Suggest home delivery of food, Meals on Wheels, help from relatives/friends, and refer to Social Services and/or Community Therapy Team
Experiencing financial difficulties	Refer to Social Services benefits/ allowances review, Citizen's Advice Bureau, Food banks, third sector charity organisations
Alcohol or other substance misuse	Refer to Community Drug and Alcohol Services

5. Improving Nutritional Intake

Clear treatment goals and a care plan should be agreed with patients. Treatment goals should be documented on the patient record and should include the aim of the nutritional support, timescale, and be realistic and measurable. This could include:

- Target weight or target weight gain or target BMI over an agreed period of time.
- Wound healing if relevant.
- Weight maintenance within 1-2kgs where weight gain is unrealistic or undesirable.
- Improved activities of daily living.
- Falls prevention.
- Reduced infections.
- Prevention/healing of pressure ulcers.
- Reduced anxiety associated with eating in the absence of appetite for patients and/or their carers.

A halt in weight loss, increased appetite, improved general wellbeing or better wound healing would generally be regarded as improvements.

6. Food Fortification

First line treatment should be the use of fortified diet, using everyday foods. Effective use of food fortification can aid in meeting nutritional requirements for weight gain or maintenance. Patients should be advised to have small frequent meals and snacks that are high in calories and protein. Advice can also be given on ways to fortify food. The information leaflet entitled 'Big Nutrition For Small Appetites' in Appendix 2 has been developed as supporting information for patients.

7. Use Of Over The Counter ONS

Over the counter ONS could be recommended if, on review, fortified diet advice has been fully implemented but the goals have not been achieved. These should not be prescribed but can be bought from pharmacies and some supermarkets. As with any form of ONS they should not be used to replace meals and patients will generally require two supplements per day sipped between meals.

Table 2 below lists the ONS available to buy over the counter from community pharmacies and some supermarkets.

Table 2: Over the counter ONS

ONS available for purchase over the counter			
NAME	FLAVOURS	Calories	Protein
Aymes Retail	Banana, Chocolate, Vanilla	265 kcal	15g
Complan (not to be confused with Complan Shake)	Banana, Chocolate, Original, Strawberry, Vanilla and Chicken	244 kcal	8.5g
Meritene Energis (formally Build Up)	Chocolate, Strawberry, Vanilla, Chicken and Vegetable.	107 -207 kcal	7-9.3g
Meritene Ready to Drink	Chocolate and Strawberry	250 kcal	18.8g
Nurishment (400g can)	Strawberry, Vanilla, Chocolate, Banana	396 kcal	20g

8. Referral To Dietitian For Nutrition Support Advice

Dietetic referral may be appropriate in any of the following circumstances:

- To advise on nutritional supplementation strategies and the appropriateness of initiating ONS.
- To assist in appropriate planning and goal setting for nutritional support for individual patients.
- Deterioration in nutritional status despite supplementation after excluding other contributory pathology.
- Apparent requirement for ONS longer than three months.
- Cultural, social or religious influences affecting dietary intake.

- Co-existing medical conditions such as diabetes, renal failure, coeliac disease or high cardiovascular risk.
- Swallowing difficulties or other indications for modified food texture exist. Please ensure a referral to speech and language therapy has been made in the first instance if there has been no prior involvement or recent review.
- Unexplained weight loss after excluding other contributory pathology where possible and / or poor wound healing.
- No improvement in nutritional intake despite advice about food fortification and oral nutrition support.
- Patient reliance on ONS as their sole source of nutrition.
- Patient at risk of re-feeding syndrome. See criteria below.

Table 3: NICE Criteria for determining people at high risk of developing refeeding problems¹:

<p>Patient has one or more of the following:</p> <ul style="list-style-type: none"> • BMI less than 16 kg/m² • Unintentional weight loss greater than 15% within the last 3–6 months • Little or no nutritional intake for more than 10 days • Low levels of potassium, phosphate or magnesium prior to feeding
<p>Or patient has two or more of the following:</p> <ul style="list-style-type: none"> • BMI less than 18.5 kg/m² • Unintentional weight loss greater than 10% within the last 3–6 months • Little or no nutritional intake for more than 5 days • A history of alcohol abuse or drugs including insulin, chemotherapy, antacids or diuretics

9. Use Of ONS Available On Prescription (See Appendix 3 for product information)

After further review, it may be that the patient would benefit from an ONS available on prescription if they have fully implemented fortified diet advice but have not met their treatment goals. Advisory Committee on Borderline Substances (ACBS) criteria for NHS prescriptions of ONS are:

- | | |
|--|---------------------------------|
| ➤ Short bowel syndrome | ➤ Total gastrectomy |
| ➤ Intractable malabsorption | ➤ Dysphagia |
| ➤ Pre-operative preparation of patients who are malnourished | ➤ Bowel fistulae |
| ➤ Proven inflammatory bowel disease | ➤ Disease related malnutrition. |

N.B. ONS should not be prescribed under the NHS for other indications e.g. for substance misusers who do not meet an additional approved ACBS criterion

When providing ONS on prescription the following should be noted:

- ONS should not be used to replace meals (unless an individual requires a liquid diet as advised by a dietitian. If individual is not under the care of a dietitian, they will require referral).
- ONS should usually be sipped between fortified meals.
- Trying to eat at mealtimes should always be encouraged.
- ONS should only be used for a short period of time while food intake is inadequate or until weight gain is achieved.
- Fortified food approach should be recommended alongside prescribed ONS.
- To derive benefit from ONS patients should be having at least 2 each day (powdered ONS only twice daily).
- Patients for whom ONS are their sole source of nutrition should be under the care of a Dietitian.

Powdered oral nutritional supplements should be used in preference to ready-made as the most cost-effective choice.

10. If ONS Is Initiated:

- The patient should be weighed (if unable to weigh patient, measure MUAC), measured, and nutritional goals set and monitored e.g. goal to improve food intake **and** prevent further weight loss or attain an acceptable weight* (* = a target BMI of over 20kg/m² depending upon what is a realistic goal for the individual considering weight history and their usual weight).
- Maximum prescription should be for 600-800kcal/day (i.e. a 300-400kcal supplement twice daily)
- Acute prescriptions should be used to prompt regular monitoring and review. Products should not be added to repeat prescriptions unless otherwise recommended by a Dietitian. Prescribe on a short-term basis only (i.e. 1-3 months). If the patient fails to attend for review on two consecutive occasions, ONS should be discontinued.
- If there is no change in weight after three months, ONS should be reduced and discontinued. Patients should continue with a fortified diet. Consider a referral to a Dietitian if the patient meets the referral criteria (see section 5).
- If weight gain occurs, continue until usual weight or acceptable weight is reached, and commence a withdrawal plan by gradually reducing one supplement per day over the course of 1-3 months while monitoring weight then discontinue ONS.

A powdered supplement should be offered initially (see Appendix 3). These are cost effective products, which the patient mixes with whole milk (consider patient's ability to prepare it). These are not however suitable for all; see table 4 below for **exclusion criteria** for powdered supplements.

Table 4: Powdered supplements exclusion criteria

Diagnosis of Chronic Kidney Disease stage 3 with the presence of hyperphosphataemia and/or hyperkalaemia
Diagnosis of Chronic Kidney Disease stage 4 or 5
HbA1c above 68mmol/mol (8.4%)
Diagnosis of cow's milk protein allergy or lactose intolerance
Patients who require ONS as the sole source of nutrition
ONS are administered via an artificial feeding tube (enteral feeding patients)

Vitamins K and A, potassium and phosphate may exceed Dietary Reference Values. Use powdered supplements with caution in the patients listed in table 5 below.

Table 5: Use powdered supplements with caution in these patients.

WARFARIN: Powdered ONS have a relatively higher vitamin K content therefore care is needed if a patient is on warfarin (monitor INR at start and end of treatment and if changing from an alternative supplement).
PREGNANCY: Maximum of two daily due to higher vitamin A content.
DYSPHAGIA: Follow speech and language therapist advice in patients with dysphagia. Do NOT use standard powdered supplement if thickened fluids are recommended.
POOR DEXTERITY: Patients need to be able to shake the container or use a fork / whisk vigorously.

Specialist products listed in Appendix 4 have limited application. Many provide energy ONLY (as fat and/or carbohydrate). Patients need comprehensive nutritional assessment by a dietitian before they are used, to ensure the adequacy of provision of other nutrients.

11. Patient Preference Is Paramount To Ensure Maximum Compliance

ONS should not routinely be added to a repeat prescription to ensure regular review both in terms of nutritional status and compliance with products and flavours. Review flavour choice regularly to reduce flavour fatigue.

Table 6: Factors to consider maximising ONS compliance

Factors For Consideration	
Type	Milk, juice or yoghurt style? Sweet or savoury? Normal or plant based?
Volume	200mls or 125mls
Dexterity	Ability to make up powdered ONS
Cost	Consider unit cost

12. Discharge From Hospital

When patients have been commenced on prescribable ONS by a Dietitian a letter will be sent to the patient's GP informing them of the aims of nutrition support with a request to:

- provide further ONS
- monitor the patient's progress

If the patient is to be reviewed by the Dietitian, the letter will state this and the GP will be informed of the patient's progress. If no further dietetic review is planned, arrange to review the patient (as per Flow Chart on page 2) and discontinue when appropriate.

Some patients may require ONS during a hospital stay but ONS may NOT be required on discharge since a fortified diet can be provided.

No patients should be discharged on ONS products for repeat prescriptions without a nutritional care plan from a Dietitian. In the absence of this care plan, ONS products should not be entered onto GP prescribing clinical systems.

13. Care homes

Care homes should provide residents with an appropriate diet. ONS **should not** be used as a substitute for the provision of fortified food. Suitable snacks, food fortification as well as homemade milkshakes /smoothies and over the counter products can be used to improve the nutritional intake of those at risk of undernutrition.

- **Do not** automatically prescribe an ONS on carer's request without appropriate nutritional assessment.
- Follow the Flow Chart (page 2) and ensure regular re-assessment carried out.
- Advice and resources can be found on care home companion website including information for homemade nourishing drinks, food fortification, snacks and tips for dementia patients (<https://carehomecompanion.uk/eating>) or check https://www.derbyshiremedicinesmanagement.nhs.uk/assets/Clinical_Guidelines/Formulary_by_BNF_chapter_prescribing_guidelines/BNF_chapter_9/Nutrition_and_Hydration_CARE_HOME_PACK.pdf.
- Consider giving fortified homemade milkshakes between meals.
- Provide assistance and encouragement with eating when appropriate

14. Palliative care and ONS prescribing

The use of ONS in palliative care should be assessed on an individual basis. The aim of the nutritional care plan changes as a patient progresses through the stages of palliative care (see table below). Emphasis should always be on the enjoyment of nourishing food and drinks and maximising quality of life.

Table 7: Nutritional management in different stages of palliative care:

<p>Early Palliative Care</p> <p>Patient is diagnosed with a terminal disease, but death is not imminent. Patients may have months or years to live and maybe undergoing palliative treatment to improve quality of life.</p>	<p>Follow the nutritional support flowchart (see page 2) and address the underlying causes of malnutrition.</p> <ul style="list-style-type: none"> • Nutritional screening and assessment in this patient group is a priority and appropriate early intervention could improve the patient’s response to treatment and potentially reduce complications. • However, if a patient is unlikely to consistently manage 2 servings of ONS per day, they are unlikely to derive any significant benefit to well-being or nutritional status from the prescription. • Over the counter products can be recommended if required as per the nutritional support flowchart.
<p>Late Palliative Care</p> <p>The patient’s condition is deteriorating, and they may be experiencing increased symptoms such as pain, nausea and reduced appetite.</p>	<p>Nutritional screening, weighing and initiating prescribing of ONS at this stage is NOT recommended.</p> <ul style="list-style-type: none"> • The goal of nutritional management should NOT be weight gain, but improved quality of life. • Patients should be encouraged to eat and drink the foods they enjoy in amounts they are able to comfortably manage. • Avoid prescribing ONS for the sake of ‘doing something’ when other dietary advice has failed – be aware that family or carers may request ONS. It is important to sensitively discuss with families and carers issues around eating and the need for comfort and enjoyment of food. Too much focus on nutritional intake can cause anxiety which could affect quality of life.
<p>Last Days Of Life</p> <p>The patient is likely to be bed-bound, very weak and drowsy with little desire for food or fluid.</p>	<p>The aim should be to provide comfort for the patient and offer mouth care and sips of fluid or mouthfuls of food, as desired.</p> <ul style="list-style-type: none"> • Patient unlikely to benefit from ONS • Avoid prescribing ONS for the sake of ‘doing something’ when other dietary advice has failed – be aware that family or carers may request ONS. It is important to sensitively discuss with families and carers issues around eating and the need for comfort and enjoyment of food. Too much focus on nutritional intake can cause anxiety which could affect quality of life.

References

1. Nutrition Support for Adults. Oral Nutrition Support, Enteral Tube Feeding and Parenteral Nutrition. NICE CG32. February 2006
2. PrescQIPP bulletin 261 Guidelines for the appropriate prescribing of oral nutritional supplements (ONS) for adults in primary care. October 2021

Reviewed in consultation with dietetic team at UHDB and CRHFT

Document control	Date
Ensure Plus Crème/ yoghurt style, resource fibre 2.0 discontinued- remove	April 2024

Appendix 1: Calculating MUST Score



Step 1 BMI score

BMI kg/m ²	Score
>20 (>30 Obese)	= 0
18.5-20	= 1
<18.5	= 2

+ Step 2 Weight loss score

Unplanned weight loss in past 3-6 months	
%	Score
<5	= 0
5-10	= 1
>10	= 2

+ Step 3 Acute disease effect score

If patient is acutely ill **and** there has been or is likely to be no nutritional intake for >5 days
Score 2

If unable to obtain height and weight, see reverse for alternative measurements and use of subjective criteria

Acute disease effect is unlikely to apply outside hospital. See 'MUST' Explanatory Booklet for further information

Step 4

Overall risk of malnutrition

Add Scores together to calculate overall risk of malnutrition
Score 0 Low Risk Score 1 Medium Risk Score 2 or more High Risk

Step 5

Management guidelines

**0
Low Risk**
Routine clinical care

- Repeat screening
Hospital – weekly
Care Homes – monthly
Community – annually for special groups e.g. those >75 yrs

**1
Medium Risk**
Observe

- Document dietary intake for 3 days
- If adequate – little concern and repeat screening
 - Hospital – weekly
 - Care Home – at least monthly
 - Community – at least every 2-3 months
- If inadequate – clinical concern – follow local policy, set goals, improve and increase overall nutritional intake, monitor and review care plan regularly

**2 or more
High Risk**
Treat*

- Refer to dietician, Nutritional Support Team or implement local policy
- Set goals, improve and increase overall nutritional intake
- Monitor and review care plan
Hospital – weekly
Care Home – monthly
Community – monthly

* Unless detrimental or no benefit is expected from nutritional support e.g. imminent death.

All risk categories:

- Treat underlying condition and provide help and advice on food choices, eating and drinking when necessary.
- Record malnutrition risk category.
- Record need for special diets and follow local policy.

Obesity:

- Record presence of obesity. For those with underlying conditions, these are generally controlled before the treatment of obesity.

Re-assess subjects identified at risk as they move through care settings

See The 'MUST' Explanatory Booklet for further details and The 'MUST' Report for supporting evidence.

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Big Nutrition for Small Appetites

If you are not eating very much and losing weight it is important to increase the calorie and protein content of your diet. Fortifying foods will do this without increasing the amount you eat.

You may need to fortify your diet if:

You have a poor appetite, eating less food and losing weight unintentionally.

You have a good appetite but are still losing weight unintentionally.

- You can be more susceptible to health problems such as infections, tiredness and depression. Being underweight can also lead to avoidable hospital admissions.
- Healthy eating guidelines which recommend a low fat diet are not appropriate for you.
- Choose full fat products.
- Remember to try to have 6-8 cups of fluid per day.
- A glass of fresh fruit juice is a rich source of vitamin C and can be helpful for healing wounds and sores.

Here are **5 easy** ways to help you to add more calories and protein to your food.

1. Make up and take a pint of fortified milk every day (see recipe below). You can use it for all your drinks, on cereals, to make puddings, sauces, soups, milk jellies and in other recipes that require milk.

(A pint of this milk per day provides almost 600 calories and 40g protein)

Fortified milk

1. Take one pint of full cream/whole milk.
2. Add 4 tablespoons of skimmed milk powder to a small amount of milk and mix to a paste.
3. Top up with the remaining milk from the 1 pint.



Store in the fridge and use throughout the day.

2. Choose high calorie drinks – milkshakes, milky coffee, malted milk, hot chocolate or soup made with fortified milk. Aim for two of these every day.

Milkshake - 380 calories

200mls fortified milk
 3 teaspoons milkshake powder
 2 tablespoons double cream

- 1) Mix all the ingredients together and serve cold.



Milky Coffee - 450 calories

150mls fortified milk
 1 teaspoon coffee powder
 4 tablespoons of double cream

- 1) Mix the milk and cream
- 2) Warm in a microwave or pan
- 3) Stir in the coffee powder



Hot Chocolate or Malted Milk 520 calories

150mls fortified milk
 4 teaspoons of hot chocolate
 4 tablespoons of double cream

- 1) Mix the milk and cream
- 2) Warm in a microwave or pan
- 3) Stir in the hot chocolate powder



3. Fortify your foods. Here are some suggestions:

Use these to add calories...		Add them to
2 tablespoons of double cream	150 calories, 0.5g protein	<ul style="list-style-type: none"> • Porridge and cereals • Soups, mashed potato, sauces • Custard, milky puddings, yogurt, mousse • Fruit, cake, desserts
2 teaspoons of butter or spread	75 calories, 0g protein	<ul style="list-style-type: none"> • Eggs, tinned tomatoes, beans • Vegetables, potatoes, sauces • Extra thick on toast, crumpets, sandwiches, malt loaf
2 heaped tablespoons of grated cheese	160 calories, 8g protein	<ul style="list-style-type: none"> • Eggs, beans, toast • Soup, potatoes, vegetables, sauces • Sprinkle on main meals
1 heaped tablespoon of skimmed milk powder	50 calories, 2.5g protein	<ul style="list-style-type: none"> • Custards, rice puddings • Creamy sauces
<p>Other high calorie foods to add liberally to your existing foods include: Mayonnaise, peanut and other nut butters, dripping, chocolate spread, jam, honey, evaporated milk</p> <p>A video regarding food fortification is available at: https://www.youtube.com/watch?v=2tS7fP7aUy8</p>		

4. Aim for 3 small meals a day and snacks in between. Little and often is more appealing for a small appetite:

Examples of high calorie snacks	
Sweet snacks	Savoury snacks
<ul style="list-style-type: none"> • High calorie biscuits (e.g. Chocolate coated, cookies, shortbread) • Flapjacks, cakes and pastries • Scone with butter, jam and cream • Malt loaf or teacake with butter • Chocolate bar • Thick and creamy yogurt or fruit fool • Rice pudding or custard pot • Mousse (not low fat) • Trifle • Toast with butter and jam, honey or chocolate spread 	<ul style="list-style-type: none"> • Cheese and biscuits • Cheese straw • Cheese scone with butter • Scotch Egg • Cocktail sausages • Quiche • Sausage roll • Cheese and onion roll • Pork pie • Crisps, nuts or Bombay mix • Toast with butter and peanut butter, meat paste, pate or soft cheese

5. You can buy Meritene Energis Shakes, Aymes Retail, Complan, Nurishment and Nurishment Extra from your supermarket or chemist. If there are any specific dietary concerns regarding diabetes, Coeliac Disease or renal disease or modified texture diet ask for further guidance from your G.P or Dietitian.

Scan QR code for food fortification and fortified milk video 

For comments on this leaflet please contact PALS: 0800 032 32 35
 THER-DIET-PIL-64

Date Reviewed: Sept 2023

Review Date: Sept 2025



Big Nutrition for Small Appetites for Lactose and Dairy Free (Vegan) Diets

If you are not eating very much and losing weight it is important to increase the calorie and protein content of your diet. Fortifying foods will do this without increasing the amount you eat.

This information sheet is designed for those of you who may not be able to tolerate dairy products or you may choose to follow a dairy free or vegan diet. The aim of this information is to give you ideas on how to fortify your existing dietary intake without consuming milk products.

You may need to fortify your diet if:

You have a poor appetite, eating less food and losing weight unintentionally or you have a good appetite but are still losing weight unintentionally.

- You can be more susceptible to health problems such as infections, tiredness and depression. Being underweight can also lead to avoidable hospital admissions.
- Healthy eating guidelines may not be appropriate for you if you are losing weight or struggling with a poor nutritional intake.
- Choose full fat or higher calorie foods at the supermarket.
- Remember to try to have 6-8 cups of fluid per day.
- A glass of fresh fruit juice is a rich source of vitamin C and can be helpful for healing wounds and sores.

Here are **4 easy** ways to help you to add more calories and protein to your food.

1. Use a pint of high calorie lactose or dairy free milk daily (containing over 55kcal/100ml). Some plant-based milks are lower in protein and calories therefore it is important to choose a high calorie lactose free of dairy free milk. These may include:

Lactose and Dairy Free Milks – per 100ml (Correct as of Jan 2023)			
Name	Kcals	Protein	Other Nutrients
Alpro Junior Growing Up Milk (soya based)	64kcal	2.5g	Vitamin C, D, B2, B12, calcium, iron and iodine
Oatly Barista	61kcal	1.1g	Vitamins B2, B12, D and calcium
Oatly Oat Drink Whole	60kcal	1.1g	Vitamins B2, B12, D and calcium
Moma Oat Barista Edition (oat based)	62kcal	1g	Vitamins B2, B12, D and calcium
Alpro Growing up Oat Drink	60kcal	1.8g	Vitamins A, B2, B12, C, D and calcium, Iodine, Iron and Zinc
Arla Lacto-Free Whole Milk (cow's milk based and only suitable in lactose free diet)	56kcal	3.3g	Vitamin B12 and calcium
Alpro This Is Not M*Lk Whole Oat Drink	62kcal	0.7g	Vitamin D and Iodine
Alpro Plant Protein Original Soya Drink	57kcal	5.0g	Vitamin B2, B12, D and Calcium

Fortify these milk alternatives by adding soya/oat/coconut cream e.g. 350ml high calorie soya milk mixed with 250ml soya cream. **This can increase the calories to around 600kcal and over 10g protein.**

Choose high calorie drinks. You can make more nutritious drinks at home from the fortified milk than shop brought alternatives. Here are some examples:

<p style="text-align: center;">Hot Cocoa 300kcal, 6g protein</p> <ul style="list-style-type: none"> - 150mls fortified plant milk - 4 teaspoons of cocoa - 4 teaspoons sugar <ol style="list-style-type: none"> 1) Mix the milk and cocoa 2) Warm in a microwave or pan 3) Stir in the sugar 	<p style="text-align: center;">Banana Milkshake 430kcal, 5.5g protein</p> <ul style="list-style-type: none"> - 200mls fortified plant milk - 1 banana - 80g dairy free vanilla ice-cream <ol style="list-style-type: none"> 1) Add all of ingredients into a blender and blitz until smooth 2) Pour into a glass
<p style="text-align: center;">Smoothie 500kcal, 9g protein</p> <ul style="list-style-type: none"> - 80g raspberries - 70g dried apricots - 10g ground linseed/ flaxseed - 200ml fortified plant milk <ol style="list-style-type: none"> 1) Add all of ingredients into a blender and blitz until smooth 2) Pour into a glass 	<p style="text-align: center;">Cuppa Soup 390kcal, 30g protein</p> <ul style="list-style-type: none"> - 150mls fortified plant milk - 1 sachet vegan appropriate Cuppa Soup - 30g soya protein powder <ol style="list-style-type: none"> 1) Add both powders together in a mug 2) Heat milk in microwave or on the hob until warm 3) Add milk into mug and whisk.

2. Fortify your foods. It is recommended to add foods to your diet to increase the calorie content throughout the day. Here are some suggestions:

Use these to add...		Add them to
1 tablespoon of vegan mayonnaise	66kcal, 0g protein	Eggs, mashed potatoes and sandwiches
2 teaspoons of vegetable spread	50kcal, 0g protein	Vegetables, potatoes, sauces, soups, toast, crumpets, sandwiches
Matchbox size piece of vegan cheese	90kcal, 0.5g protein	Eggs, beans, toast, soup, potatoes, vegetables, sauces or sprinkle on main meals
1 tablespoon of peanut, almond, cashew, hazelnut or other nut butters	95kcal, 3.5g protein	Fruit, sandwiches, toast, crumpets, smoothies
1 tablespoon of ground or whole seeds	50kcal, 3g protein	Yoghurts, soups, cereals, smoothie
30g soya / pea protein powder	110kcal, 25g protein	Milkshakes, smoothies, yoghurts, soups, cereals, sauces

Other high calorie foods to add to foods include:

Hummus, dripping (only if lactose/dairy free and not avoiding animal products), jam, golden syrup, cream cheese alternatives, olive, sunflower or vegetable oil, plant based creams.

A video regarding food fortification is available at: <https://www.youtube.com/watch?v=2tS7fP7aUy8>

3. Aim for 3 small meals at least 2 snacks daily. Little and often is more appealing for a small appetite. Most supermarkets have their own 'free from' section with products which don't contain milk. Alternatively, many own brand products happen to be milk free and can be cheaper options. Examples of suitable snacks include:

Examples of high calorie snacks (Correct as of Jan 2023)	
Sweet snacks	Savoury snacks
<ul style="list-style-type: none"> • Dried fruits • Fry's chocolate creams • Lotus biscuits • Fox's Ginger Crinkle Crunch and Party Rings • Bourbon Biscuits (check brand) • Oreo Cookies • Jacobs Fig rolls • McVities Ginger Nuts, Fruit Shortcakes, Fig Rolls and Chocolate Chip Hobnobs • Dairy free ice cream • Fruit toast with dairy free spread and jam • Trail Mix • Soya desserts • Plain chocolate • Turkish Delight (check brand) • Soya or coconut yogurt • Suitable 'free from' sponges and cakes. 	<ul style="list-style-type: none"> • Nuts • Crisps flavour depending– check label • Cream cracker (check brand) • Rice cakes with nut butter • Ryvita with cream cheese alternative, hummus, avocado, tahini or bean dip • Nut butter with veg sticks • Toast with vegetable spread and nut butter, meat paste or pate (if not avoiding animal products)

Please note: Always check the food label

Milk and all other milk products will appear on the food label in **bold type** if contained in the product. Look out for:

- | | | |
|-------------------------------|-----------------------------|-------------------|
| • Buttermilk | • Cow's Milk (Fresh Or UHT) | • Condensed Milk |
| • Cream / Artificial Cream | • Evaporated Milk | • Butter |
| • Butter Oil | • Ghee | • Margarine |
| • Cheese | • Fromage Frais | • Ice Cream |
| • Yoghurt | • Casein (Curds) | • Caseinates |
| • Calcium Or Sodium Caseinate | • Hydrolysed Whey Protein | • Lactoglobulin |
| • Lactoalbumin | • Lactose | • Milk Powder |
| • Skimmed Milk Powder | • Milk Protein | • Milk Sugar |
| • Milk Solids | • Non-Fat Milk Solids | • Modified Milk |
| | • Whey Solids | • Hydrolysed Whey |
| | • Whey | |

If there are any specific dietary concerns regarding diabetes, Coeliac Disease or renal disease or modified texture diet ask for further guidance from your G.P or Dietitian.

Scan QR code for food fortification and fortified milk video →



For comments on this leaflet please contact PALS: 0800 032 32 35

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Reviewed: Sept 2023

Review Date: September 2025

Appendix 4: Standard ONS Products For Adults *Please read section 9 before prescribing*

POWDERED products						
NAME	COST per unit	PRESEN TATION	FLAVOURS	Energy per unit with 200ml full fat milk	Protein per unit with 200mls of full fat milk	ADDITIONAL INFORMATION
EnergieShake Powder	44p	4 x 57g sachets	Banana, neutral, vanilla, chocolate, strawberry	381 kcal	15.8g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Aymes Shake	52p	7 x 57g sachets	Banana, strawberry, chocolate, vanilla, neutral	384 - 389 kcal	15.6 - 16.0g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Foodlink Complete	52p	7 x 57g sachets	Banana, chocolate, natural, strawberry, vanilla*	383 kcal	19g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Foodlink Complete Tub	52p	1596g tub 28 x 57g servings	Banana, chocolate, natural, strawberry, vanilla*	383 kcal	19g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Complan Shake	54p	4 x 57g sachets	Original, vanilla, strawberry, chocolate, banana	387 kcal	15.8g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Ensure Shake	57p	7 x 57g sachets	Strawberry, vanilla and banana	389 kcal	17g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Fresubin Powder Extra	73p	7 x 57g sachets	Chocolate, neutral, strawberry, vanilla	420 kcal	17.5g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Aymes Actasolve Savoury	76p	7 x 57g sachets	Chicken, vegetable	Made with water 247 - 251 kcal	8.5-8.6g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Foodlink Complete Fibre	86p	7 x 63g sachets	Banana, chocolate, natural, strawberry, vanilla	399 kcal	18.6g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Aymes Actasolve Smoothie	99p	7 x 66g	Mango, peach, pineapple & strawberry & cranberry	298kcal	10.7g	<ul style="list-style-type: none"> • Gluten free • Lactose free • Vegan
Foodlink Smoothie	£1	7 x 66g	Orange & mango, red berry, peach, tropical	287kcal	10g	<ul style="list-style-type: none"> • Gluten free • Lactose free • Vegan
<i>STARTER PACK products. Starter Packs should only be issued for and acute 1-2 week prescription to determine flavour preference. These usually give a shaker to aid with mixing</i>						
EnergieShake Powder	58p	5x 57g sachets	Banana, neutral, vanilla, chocolate, strawberry	381 kcal	15.8g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Aymes Shake Starter Pack	71p	6 x 57g sachets	Banana, strawberry, chocolate, vanilla, neutral	384 - 389 kcal	15.6 - 16.0g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Complan Shake Starter Pack	75p	5 x 57g sachets	Original, vanilla, strawberry, chocolate, banana	387 kcal	15.8g	<ul style="list-style-type: none"> • Gluten free • Not lactose free
Foodlink Complete Start Pack	80p	5x 57g 1 x 63g (fibre)	Banana, chocolate, natural, strawberry, vanilla	378 - 386 kcal	18.3 - 18.7g	<ul style="list-style-type: none"> • Gluten free • Not lactose free

READY MADE products. Suitable as a sole source of nutrition if recommended by dietitian						
NAME	COST PER UNIT	VOLUME	FLAVOURS	Energy per unit	Protein per unit	ADDITIONAL INFORMATION
Altraplen Energy	£0.99	200ml	Vanilla, strawberry, banana, chocolate	300kcal	12g	<ul style="list-style-type: none"> • Gluten free • Lactose free
EnergieShake Complete 1.5kcal	£1.01	200ml	Vanilla, chocolate, strawberry, banana	300kcal	12g	<ul style="list-style-type: none"> • Gluten free • Lactose free
Aymes Complete	£1.11	200ml	Banana, chocolate*, strawberry, vanilla	300 kcal	12g	<ul style="list-style-type: none"> • Not lactose free • Gluten free • *chocolate flavour contains fibre
Fortisip Bottle	£1.25	200ml	Neutral, vanilla, chocolate, banana, strawberry	300 kcal	12g	<ul style="list-style-type: none"> • Lactose free • Gluten free
Ensure Plus Milkshake Style	£1.33	200ml	Banana, chocolate, coffee, fruits of the forest, neutral, peach, raspberry, strawberry, vanilla	300 kcal	12.5g	<ul style="list-style-type: none"> • Residual lactose • Gluten free
Fresubin Energy	£1.49	200ml	Banana, blackcurrant, cappuccino, chocolate, lemon, neutral, strawberry, tropical fruit, vanilla	300 kcal	11.2g	<ul style="list-style-type: none"> • Gluten free • Residual lactose
Fortisip Plant Based	£1.54	200ml	Mango passionfruit, mocha	300kcal	12g	<ul style="list-style-type: none"> • Lactose free • Gluten free • Vegan
Resource Energy	£2.56	200ml	Chocolate, vanilla, strawberry/ raspberry	300 kcal	11.2g	<ul style="list-style-type: none"> • Lactose free • Gluten free
READY MADE products – compact volume of 125mls						
Altraplen Compact	£1.39	125ml	Hazel chocolate, vanilla, strawberry, banana	300 kcal	12g	<ul style="list-style-type: none"> • Gluten free • Lactose free
Fortisip Compact	£1.48	125ml	Vanilla, strawberry, banana, mocha, chocolate, neutral	300 kcal	12g	<ul style="list-style-type: none"> • Not lactose free • Gluten free
Ensure Compact	£1.56	125ml	Banana, strawberry, vanilla	300 kcal	13g	<ul style="list-style-type: none"> • Not lactose free • Gluten free
READY MADE products – Savoury flavour						
Nil						
READY MADE products – yoghurt style						
Fresubin YoDrink	£1.71	200ml	Apricot-peach, lemon, raspberry	300kcal	15g	<ul style="list-style-type: none"> • Gluten free
READY MADE products – juice (consider for dairy intolerance/ allergy only)						
Aymes Actagain Juice	£1.70	200ml	Apple, orange, cranberry & raspberry, mango & passionfruit	300kcal	11g	<ul style="list-style-type: none"> • Gluten free
Altrajuce	£1.89	200ml	Apple, blackcurrant, orange, strawberry	300kcal	7.8g	<ul style="list-style-type: none"> • Gluten free • Lactose free
Fresubin Jucy Drinks	£2.06	200ml	Apple, cherry, blackcurrant, pineapple, orange	300kcal	8g	<ul style="list-style-type: none"> • Gluten free • Lactose free
Fortijuice	£2.12	200ml	Lemon, apple, orange, strawberry, tropical	300kcal	8g	<ul style="list-style-type: none"> • Gluten free • Lactose free
Ensure Plus Juice	£2.40	220ml	Orange, apple, lemon & lime, strawberry, peach, fruit punch	330 kcal	10.6g	<ul style="list-style-type: none"> • Gluten free • Lactose free

Prices correct at time of review Nov 2023. Product availability and details are subject to change at any time and should be checked by the person prescribing.

Appendix 5: Specialist Nutritional Products

Other products, such as those listed below, should be prescribed **ONLY on the advice of a Dietitian**. Pre-thickened supplements should be prescribed only after a formal dysphagia assessment.

Examples of specialist products:

Altraplen Protein		Fresubin 2kcal Crème	
Altrashot	Ensure Plus Advance	Fresubin 5kcal Shot	Nutilis Fruit Level 4
Aymes Actacal Crème	Ensure Plus Fibre	Fresubin Energy Fibre	Nutricrem
Calogen	Ensure TwoCal	Fresubin Original Drink	Peptamen
Calogen Extra	Forticreme Complete	Fresubin Protein	Polycal Liquid
Caloreen Powder	Fortisip 2kcal	Fresubin Thickened	Polycal Powder
Calshake	Fortisip Compact Fibre	Fresubin YoCreme	Procal Powder
Duocal Super Soluble	Fortisip Compact Protein	Liquigen	Procal Shot
Elemental 028 Extra	Fortisip Extra	Maxijul Powder	Scandishake Mix
Enshake	Fresubin 2 kcal +/- Fibre	Modulen IBD	
Ensure Cans		Nutilis Complete Drink Level 3	

Examples of specialist dysphagia products: (for information only, please follow speech and language therapist and dietitian recommendations).

DYSPHAGIA PRODUCTS						
Please follow recommendations for consistency as per speech and language therapy						
NAME	COST /unit	PRESENTATION	FLAVOURS	IDDSI Descriptor	Energy per unit	Protein per unit
Aymes Shake Compact	52p	57g sachet	Strawberry, vanilla, banana, chocolate, neutral	Level 1	316kcal	12.6g
Aymes Savoury	76p	57g sachet	Chicken and vegetable	Level 1	250kcal	8.5g
Foodlink Complete Fibre	86p	57g sachet	Banana, chocolate, natural, strawberry, vanilla	Level 1	399kcal	18.6g
Altraplen Protein	£2.05	200ml	Strawberry, vanilla	Level 1	300kcal	20g
Aymes Actasolve Smoothie	99p	66g sachets	Mango, peach, pineapple and strawberry, cranberry	Level 2	297kcal	10.7g
Altraplen Compact	£1.39	125ml	Hazel chocolate, vanilla, strawberry, banana	Level 2	300kcal	12g
Aymes 2.0kcal	£1.94	200ml	Strawberry, vanilla, banana	Level 2	400kcal	16g
Fresubin Thickened Level 2	£2.51	200ml	Wild strawberry, vanilla	Level 2	300kcal	20g
Nutilis Complete Crème Level 3	£2.46	125g	Vanilla, strawberry, chocolate	Level 3	300kcal	18g
Nutilis Complete Drink Level 3	£2.46	125ml	Vanilla, strawberry, chocolate, lemon tea, mango passion fruit	Level 3	300kcal	18g
Fresubin Thickened Level 3	£2.51	200ml	Wild strawberry, vanilla	Level 3	300kcal	20g
EnergieShake Dessert	£1.10	125g	Caramel, chocolate	Level 4	188kcal	9.4g
Aymes Actacal Crème	£1.42	125g	Chocolate, vanilla	Level 4	188kcal	9g
Nutricrem	£2.04	125g	Chocolate orange, mint chocolate, strawberry, vanilla	Level 4	225kcal	12.5g
Fresubin 2kcal Crème	£2.04	125g	Vanilla, wild strawberry, cappuccino, praline, chocolate	Level 4	250kcal	12.5g
Fresubin Dessert Fruit	£2.49	125g	Apple-prune	Level 4	200kcal	8.8g
Fresubin Yocreme	£2.57	125g	Apricot-peach, biscuit, lemon, raspberry	Level 4	188kcal	9.4g
Nutilis Fruit Level 4	£2.88	150g	Apple, strawberry	Level 4	200kcal	10g