

NEW LARGE-SCALE STUDY WILL LOOK AT HOW NUTRITION CAN HELP KEEP PATIENTS FROM RETURNING TO THE HOSPITAL

Advocate Health Care and Abbott Will Conduct Study on 3,000 Adult Patients to Quantify the Effectiveness of Nutrition Care in Hospital Settings

ABBOTT PARK, Ill., Oct. 20, 2014 /PRNewswire/ -- At a time when hospitals are under increasing pressure to improve patient outcomes, Advocate Health Care -- one of the nation's leading health systems -- is embarking on a major research program with Abbott (NYSE: ABT) to demonstrate how nutrition protocols can reduce both patients' readmission rates and costs in the hospital, a goal for all U.S. hospitals.

The program is a collaboration between Advocate Health Care, Russell Institute for Research & Innovation at Advocate Lutheran General Hospital, the Center for Applied Value Analysis (CAVA), and Abbott. The study will enroll 3,000 adult patients admitted to four Advocate hospitals, making this one of the largest U.S. studies to gather information on the effectiveness of nutrition interventions in real-world settings.

Study Intended to Stimulate Change in Hospitals

The prospective study will follow patients in real time from admission through 30 days after discharge to determine the impact rapid nutritional intervention has on decreasing 30-day readmission rates. According to the study's design, all patients will receive nutritional screenings upon being admitted. At two of the hospitals, malnourished and those at-risk patients will quickly receive nutritional treatment (an oral nutrition supplement) 24 to 48 hours sooner than standard practice. The patients enrolled at these two hospitals will also receive additional education, a discharge nutrition care plan and post-discharge reminder calls.

The readmission rates at these two "pilot" hospitals will then be compared with the readmission rates among malnourished patients who received the current standard of care at the other two hospitals.

"Our goal for this study goes far beyond demonstrating what Advocate Health Care can do to improve the quality of care for our patients," said Tom Summerfelt, Ph.D., vice president, research and innovation, Advocate Health Care. "As the largest accountable care organization in the country and one of the largest health systems in the Midwest, we have the broad patient population to provide real-world evidence of the value of nutrition interventions in improving patient outcomes, lowering costs and reducing readmission rates. No matter what the size of the hospital, these findings should have relevance because they demonstrate what is possible and can be implemented quickly."

Hospitals Looking for Evidence from Real-World Settings

The impetus for this large-scale study is the need to accelerate the adoption of effective nutrition practices in hospitals. Today, it is estimated that up to 50 percent of patients are either malnourished or at risk for malnutrition when they enter the hospital¹ and many will experience a nutritional decline during their stay.²

Although numerous studies link the effective treatment of malnutrition in hospitals with 14 percent fewer overall medical complications³ and a 28 percent drop in avoidable hospital readmissions,⁴ hospitals are only now starting to recognize the impact in reducing health care costs and avoidable hospital readmissions.

This month, Medicare again raised its maximum penalty for hospitals that have too many preventable cases of patient readmissions within 30 days. The findings from this research can help raise awareness that early and quick nutrition interventions improve patient outcomes.

"A large-scale study of this kind will help show the real health outcomes that nutrition can have for patients in the hospital," said Robert H. Miller, Ph.D., Divisional Vice President, R&D, Scientific and Medical Affairs, at Abbott Nutrition. "As a healthcare company and leader in science-based nutrition, Abbott is committed to working in partnership with key researchers and institutions to demonstrate the impact nutrition can have in improving the quality of care and reducing health costs in today's demanding hospital environment."

The study will start enrolling patients this month and findings will be released in 2015.

About Advocate Health Care

Advocate Health Care, named among the nation's Top 5 large health systems based on quality by Truven Analytics, is the largest health system in Illinois and one of the largest health care providers in the Midwest. Advocate operates more than 250 sites of care, including 12 hospitals that encompass 11 acute care hospitals, the state's largest integrated children's network, five Level I trauma centers (the state's highest designation in trauma care), three Level II trauma centers, one of the area's largest home health care companies and one of the region's largest medical groups. Advocate Health Care trains more primary care physicians and residents at its four teaching hospitals than any other health system in the state. As a not-for-profit, mission-based health system affiliated with the Evangelical Lutheran Church in America and the United Church of Christ, Advocate contributed \$661 million in charitable care and services to communities across Chicagoland and Central Illinois in 2013.

About Abbott

Abbott is a global healthcare company devoted to improving life through the development of products and technologies that span the breadth of healthcare. With a portfolio of leading, science-based offerings in diagnostics, medical devices, nutritionals and branded generic pharmaceuticals, Abbott serves people in more than 150 countries and employs approximately 69,000 people.

Visit Abbott at www.abbott.com and connect with us on Twitter at @AbbottNews.

References

¹ Barker LA, et al. Int J Environ Res Public Health 2011;8:514-527

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³ Milne AC, Potter J, Vivanti A, Avenell A. Protein and energy supplementation in elderly people at risk from malnutrition. Cochrane Database Syst Rev. 2009(2):CD003288.

⁴ Gariballa S, Forster S, Walters S, Powers H. A randomized, double-blind, placebo-controlled trial of nutritional supplementation during acute illness. Am J Med. 2006;119(8):693-699

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