

Cubitan results in **faster healing** of pressure ulcers



Cubitan results in **faster healing** of pressure ulcers over a standard enteral nutrition formula*

Recommend **Cubitan** for your patients with wounds to see **faster healing**



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*See reverse side for details

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Disease-specific, versus standard, nutritional support for the treatment of pressure ulcers in institutionalized older adults: A randomized controlled trial

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ABSTRACT

OBJECTIVES:

To investigate whether a disease-specific nutritional approach is more beneficial than a standard dietary approach to the healing of pressure ulcers (PUs) in institutionalized elderly patients.

DESIGN:

Twelve-week follow-up randomized controlled trial (RCT).

SETTING:

Four long-term care facilities in the province of Como, Italy.

PARTICIPANTS:

Twenty-eight elderly subjects with grade II, III, and IV PUs of recent onset (<1-month history).

INTERVENTION:

All 28 patients received 30 kcal/kg per day nutritional support; of these, 15 received standard nutrition (hospital diet or standard enteral formula; 16% calories from protein), whereas 13 were administered a disease-specific nutrition treatment consisting of the standard diet plus a 400ml oral supplement or specific enteral formula enriched with protein (20% of the total calories), arginine, zinc, and vitamin C ($P < .001$ for all nutrients vs control).

MEASUREMENTS:

Ulcer healing was evaluated using the Pressure Ulcer Scale for Healing (PUSH; 0=complete healing, 17=greatest severity) tool and area measurement (mm^2 and %).

RESULTS:

The sampled groups were well matched for age, sex, nutritional status, oral intake, type of feeding, and ulcer severity. After 12 weeks, both groups showed significant improvement ($P < .001$). The treatment produced a higher rate of healing, the PUSH score revealing a significant difference at Week 12 (-6.1 ± 2.7 vs -3.3 ± 2.4 ; $P < .05$) and the reduction in ulcer surface area significantly higher in the treated patients already by Week 8 ($-1,140.9 \pm 669.2 \text{ mm}^2$ vs $-571.7 \pm 391.3 \text{ mm}^2$; $P < .05$ and $\sim 57\%$ vs $\sim 33\%$; $P < .02$).

CONCLUSION:

The rate of PU healing appears to accelerate when a nutrition formula enriched with protein, arginine, zinc, and vitamin C is administered, making such a formula preferable to a standardized one, but the present data require further confirmation by high-quality RCTs conducted on a larger scale.

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