ABSTRACT:

Background: Malnutrition among hospitalized patients is associated with suboptimal recovery, unfavorable prognosis and increased mortality. However, malnutrition in hospitalized patients is often overlooked, underdiagnosed, and frequently inadequately addressed in clinical practice. We determined the prevalence and associated factors of malnutrition in hospitalized adult patients at Lira Regional Referral Hospital (LRRH).

Methods: we conducted a cross-sectional study at medical wards of LRRH during November and December 2023. The study included patients aged ≥18years through consecutive sampling method. We excluded those who were too unwell to respond to the research questions. Socio-demographic and clinical characteristics were obtained through interviewer-administered questionnaires. The prevalence of malnutrition was assessed using the Malnutrition Universal Screening Tool (MUST), which utilizes body mass index (BMI) scores for classification. Individuals with BMI scores <18.5 kg/m² were categorized as undernourished, those with BMI scores <18.5 kg/m² or ≥25 kg/m² were classified as malnourished, and BMI scores of 18.5-24.9 kg/m² were considered normal. Malnutrition was further categorized based on weight loss percentages, using the Subjective Global Assessment (SGA) tool: normal (weight loss 0-<5%), mild/moderate (weight loss 5-10%), and severe (weight loss >10%). Modified Poisson regression was used to evaluate associations between under nutrition and independent variables.

Results: In total, 423 patients were recruited with median age of 40 (inter-quartile range [IQR]: 24-63) years; 223 (53%) were female. Overall, 176 (42%, 95% CI: 37-46%) had malnutrition; 116 (27%) were undernourished, 73 (17%) were mild/moderately undernourished, and 43 (10%) severely undernourished. Being aged >64 years (aPR 1.19, 95% CI: 1.01- 1.39), and having adequate dietary intake (aPR 0.91, 95% CI: 0.82-0.99), were independently associated with under-nutrition.

Conclusion: Approximately 4 out of every 10 patients screened at LRRH had malnutrition. Patients of advanced age were more likely to be undernourished, while those with adequate dietary intake were less likely to be undernourished. The high prevalence of malnutrition highlights the need for increased attention to nutritional assessment and intervention in clinical practice. Additionally, the findings underscore the importance of targeted nutritional strategies, particularly for older patients. Adequate dietary intake could reduce the magnitude of under-nutrition and potentially enhance clinical outcomes in this setting.

Keywords: Malnutrition; Prevalence; Nutrition status; Hospitalized patients; Uganda.