

## Quick Guide: Oral nutritional supplement (ONS) prescribing in primary care

### Start by establishing if patient is at risk of malnutrition?

- ⇒ Weigh patient, obtain height & weight history over approximately the last 6 months
- ⇒ Calculate MUST (Malnutrition Universal Screening Tool) score [MUST calculator](#) (accessible on mobile phones)

### Consider reason why malnutrition has occurred and how this could be mitigated:

- ⇒ Disease, disorder or medical condition – provide disease related advice; treat nausea, vomiting, constipation; ensure source of pain is addressed & pain is controlled
- ⇒ Social – consider referral to social prescriber; access to food/shopping; use of food banks, luncheon groups, Meals on Wheels, social/support groups, family involvement; treat anxiety/depression & refer to appropriate services
- ⇒ Dental – ensure good oral hygiene; advise on dental care

MUST score	Nutrition assessment	Initial nutrition intervention	Nutrition monitoring
<p><b>Low risk</b></p> <p>(MUST score 0)</p> <p>= <b>Low risk of malnutrition</b></p> <p>No nutritional treatment required*</p>	<p>BMI &gt;20</p> <p><b>AND</b></p> <p>&lt;5% unplanned weight loss in last 6 months</p>	<p>None needed*</p>	<p>Routine monitoring*</p>
<p><b>Medium risk</b></p> <p>(MUST score 1)</p> <p>= <b>At risk of malnutrition</b></p> <p>Treat using <a href="#">food based</a> advice*</p>	<p>BMI 18.5 – 20</p> <p><b>OR</b></p> <p>5 – 10% unplanned weight loss in last 6 months</p>	<p>Establish what patient's <a href="#">treatment goal(s)</a> are</p> <p>&amp; Give food based advice using most appropriate resource (<a href="#">short</a> or <a href="#">full</a>)</p> <p>&amp; Consider advising purchase of <a href="#">OTC multivitamin &amp; mineral tablet</a> in addition</p> <p>&amp; Review <a href="#">treatment goal(s)</a>, ideally monthly</p>	<p>Measure &amp; record:</p> <ul style="list-style-type: none"> <li>• Progress against <a href="#">treatment goal(s)</a></li> <li>• Weight</li> <li>• BMI</li> <li>• MUST score</li> </ul> <p>If <a href="#">treatment goal(s)</a> are being met, continue until appropriate to stop #</p> <p>If <a href="#">treatment goal(s)</a> are <b>not</b> being met, consider treating patient as <b>High risk</b></p>
<p><b>High risk</b></p> <p>(MUST score 2 – 6)</p> <p>= <b>At high risk of malnutrition</b></p> <p>Treat using <a href="#">food based</a> advice</p> <p>&amp; either <a href="#">homemade</a> or OTC supplements (<i>Aymes Retail, Complan or Meritene</i>)</p> <p>[<i>except when thickened fluids are required due to diagnosed dysphagia when <a href="#">advice regarding thickened supplements</a> should be followed instead</i>]</p>	<p>BMI &lt;18.5</p> <p><b>OR</b></p> <p>&gt;10% unplanned weight loss in last 6 months</p> <p><b>OR</b></p> <p>BMI &lt;20</p> <p><b>AND</b></p> <p>&gt;5% unplanned weight loss in the last 6 months</p>	<p>Establish what patient's <a href="#">treatment goal(s)</a> are</p> <p>&amp; Give food based advice using most appropriate resource (<a href="#">short</a> or <a href="#">full</a>)</p> <p>&amp; Advise use of <a href="#">Homemade supplements</a> <b>OR</b> OTC supplements</p> <p>[ONS should only be prescribed if patient/carer unable to prepare homemade or OTC supplements, in which case ready to drink products are likely to be most appropriate choice]</p> <p>&amp; Consider advising purchase of <a href="#">OTC multivitamin &amp; mineral tablet</a> in addition</p> <p>&amp; Review <a href="#">treatment goal(s)</a> monthly</p> <p>&amp; Refer to Dietitian <b>only</b> if patient meets Dietetic referral criteria</p>	<p>Measure &amp; record:</p> <ul style="list-style-type: none"> <li>• Progress against <a href="#">treatment goal(s)</a></li> <li>• Weight</li> <li>• BMI</li> <li>• MUST score</li> </ul> <p>If <a href="#">treatment goal(s)</a> are being met, continue until appropriate to stop #</p> <p>If <a href="#">treatment goal(s)</a> are <b>not</b> being met, consider whether a prescribed ONS is more likely to be taken than a homemade or OTC supplement? (If not, ONS prescription is unlikely to be appropriate, regardless of patient's level of malnutrition)</p>

\*Unless patient has deep wound/pressure injury (Category 2 – 4), in which case treat as Medium/High risk

# See 'When to stop prescribing ONS' overleaf

## Set treatment goal(s) (what does the patient want to achieve?)

### Treatment goal examples

Improve or maintain functional ability

Improve or maintain quality of life

Facilitate wound healing

Improve or maintain nutritional status/weight

Minimise decline in nutritional status/weight

### What to measure at each review

Reported ability to undertake activities of daily living

Reported quality of life before & after intervention

Wound severity/size before & after intervention

Weigh & calculate MUST score before & after intervention

Rate of weight loss/percentage of weight lost before & after intervention

## When is it appropriate to prescribe an ONS?

Patient meets [ACBS Criteria](#) for that specific product to be prescribed (evidence of a disease/disorder/medical condition causing malnutrition - see MUST overleaf)

**AND ONE** of the following to criteria can be evidenced:

1. Patient is at high risk of malnutrition AND evidence suggests that patient/carer is unable to prepare [homemade](#) or OTC supplements
2. Patient is at high risk of malnutrition AND is not meeting [treatment goal\(s\)](#) after 1 month of [food based](#) treatment & either [homemade](#) or OTC supplements AND evidence suggests that patient is more likely to take a therapeutic dose (bd) of prescribed ONS compared with [homemade](#) or OTC supplements

**Please note:** Dietitians may occasionally request an ONS prescription when either 1 or 2 is not applicable, but in this case the dietitian **must provide detailed clinical justification for their request** (please see [Additional Adult Managing Malnutrition Guidance](#))

## Which ONS to prescribe (prescribe a 1 week supply initially, then prescribe monthly as acute script)

Criteria	If Care Home resident advise use of 'homemade supplements'	ONS Product (*first line choice*) - Therapeutic dose = 2 per day
<ul style="list-style-type: none"> <li>✓ Patient/carers can prepare powder ONS</li> <li>✓ Patient can manage 2 x 230ml ONS per day</li> <li>✓ Patient likes sweet, milky drinks</li> </ul>	<p style="text-align: center;">Advise staff to provide <a href="#">'Homemade fortified milkshake (ICS recipe)'</a> 2 per day</p>	<p>Food based advice &amp; *Aymes Shake * or Food based advice &amp; *Foodlink Complete*</p>
<ul style="list-style-type: none"> <li>✗ Patient/carers cannot prepare powder ONS</li> <li>✓ Patient can manage 2 x 230ml ONS per day</li> <li>✓ Patient likes sweet, milky drinks</li> </ul>	<p style="text-align: center;">Advise staff to provide <a href="#">'Homemade fortified milkshake (ICS recipe)'</a> 2 per day</p>	<p>Food based advice &amp; *Aymes Actagain 1.5 Complete (Previous name Aymes Complete)* or Food based advice &amp; *Altraplen Energy *</p>
<ul style="list-style-type: none"> <li>✓ Patient is vegan</li> <li>✓ Patient/carers can prepare powder ONS</li> <li>✓ Patient can manage 2 x 230ml ONS per day</li> <li>✓ Patient likes sweet drinks</li> </ul>	<p style="text-align: center;">Advise staff to provide <a href="#">'Homemade fortified vegan milkshake (ICS recipe)'</a> 2 per day</p>	<p>Food based advice &amp; *Aymes Actasolve Smoothie* [suitable for vegans]</p>
<ul style="list-style-type: none"> <li>✗ Patient does not like milky drinks</li> <li>✓ Patient can manage 2 x 230ml ONS per day</li> <li>✓ Patient likes sweet drinks</li> </ul>	<p style="text-align: center;">Advise staff to provide <a href="#">'Homemade fortified fruit juice (ICS recipe)'</a> 2 per day</p>	<p>Food based advice &amp; *Aymes Actagain Juce* or Food based advice &amp; *Altrajuce*</p>

**Other ONS can be prescribed if they have been requested by a Dietitian who has provided adequate clinical justification for request** - please ensure that the Dietitian has advised you of the following:

- Clinical reason for requesting a product other than products listed above
- What the aims/goals of the prescription request are and who is responsible for monitoring/review
- For how long the prescription is likely to be needed

## Stop prescribing an ONS when any of the following apply:

- When treatment goal(s) are met
- When patient has BMI >20 and is gaining weight
- When requested to do so by Dietitian
- When patient is unable/unwilling to take ONS as a therapeutic dose (2 per day) (consider whether another product is suitable instead)
- When pt is reaching end of life, continuing to try to take ONS is likely to diminish (rather than improve) patient's quality of life

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