

# # 3970125033 : MAJOR PHARMACY

KEY WORD: TOTAL PARENTERAL NUTRITION/ EVALUATION/ UTILIZATION/ REVIEW/ CRITERIA/ GUIDELINE/ CENTRAL  
VENOUS CATHETER

KULTIDA CHAIJINDA : EVALUATION OF TOTAL PARENTERAL NUTRITION ADMINISTERED VIA A CENTRAL  
VENOUS CATHETER IN ADULT PATIENTS AT CHULALONGKORN HOSPITAL : ASSIST PROF APHIRUDEE  
HEMACHUDHA. THESIS COADVISOR : ASSIST PROF. MONTCHAI CHALAPRAWAT , MD. 142 pp. ISBN 974-639-  
557-2.

Total parenteral nutrition is indicated in certain circumstances. The used of total parenteral nutrition is  
expensive and may carry complications. The purpose of this study was to evaluate how appropriately was the use of total  
parenteral nutrition in adults according to the standard. Safety and effectiveness were also included.

The study was performed prospectively in all patients who received total parenteral nutrition at  
Chulalongkorn hospital during December 1997 to May 1998. Informations were collected from patient's medical record,  
by interviewing and monitoring of clinical signs. 108 patients were included, 63.9 % (69 cases) were men and 36.1 %  
(39 case) were women. The mean age of the patients was 57.6 years. 67.7 % (73 cases) had cancer. The major  
indications for total parenteral nutrition were gut obstruction (33.3 % (36 cases) ) and peripheral blood stem cell  
transplant (13.0% (14 cases) ). The mean length of total parenteral nutrition therapy was 17.2 days. 66.7 % (72 cases)  
were admitted to surgical wards.

Information, that might be use for nutritional assessment, was gathered by mean of interview 67.6 %  
(73 cases), 56.5 % (61 cases) by physical examination, 79.6 % (86 cases) assessment of weight loss and 85.2 %  
(92 cases) by level of serum albumin. 66.7 % (72 cases) were categorized as parenteral nutrition helpful. 83 cases  
(76.8 %) used weight to estimate energy requirement, 39.8 % of these patients (43 cases) received appropriate  
carbohydrate content whereas, 30.5 % (33 cases) had for fat calories and 33.3 % (36 cases) for protein. Laboratory  
monitoring in most patients was not specific for total parenteral nutrition therapy. Positive outcome parameters for total  
parenteral nutrition patients included : weight gain 36.1% (39 cases), increase of serum albumin 28.7% (31 cases), and  
70.4% (76 cases) were able to return to enteral nutrition.

The use of total parenteral nutrition therapy in this study, in general, was not appropriate as judged by  
indication, relative contraindication and nutrition requirement. In addition, nutritional assessment was not adequate.  
Monitoring by laboratory parameter in these patients was aimed for progress of the disease rather than for the adequacy  
of total parenteral nutrition itself.

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