Clinical Nutrition: Early Intervention

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Preface

It can be successfully argued that, teleologically, the acute phase response has been of fundamental importance in the survival of life as we know it today. Since the original work of Cuthbertson, significant advances in our knowledge have increased our partial understanding of the immense complexity of this stereotypic, integrated cascade of metabolic, hormonal and mediator-driven process. Furthermore, emerging evidence is revealing the concept that the outcome of this process, be it recovery or mortality, may be intimately linked to what Hippocrates identified as ‘constitution’ and today we call genetics. Certainly, the latter promises to unravel the apparent complex mechanism(s) of ‘a-beneficial-adaptive-process-gone-wrong’ phenomenon as manifested in the systemic inflammatory response syndrome and its attendant multiple-system organ failure, which is associated with high mortality.

Of crucial importance in clinical outcomes is the clearer definition of the role nutrition plays in this process, since the nitrogen ‘wasting’ nature of the metabolic alterations inherent in this process cannot be endogenously sustained indefinitely. In this regard, the provision of nutrition support, now widely accepted as it is in terms of preventing nutrient deficits, malnutrition and attenuating catabolism, is afforded significant importance in view of the emerging evidence on the immunomodulatory effects of specific nutrients and their ability to alter the inflammatory response. These latter developments in the field of nutrition have brought to the fore a series of questions regarding the route, timing and duration of any such administered support as well as its composition. Although evidence-based support for such an approach continues to accumulate, it has brought with it additional questions regarding the clinical setting(s), in which nutrition support may, indeed, contribute to beneficial clinical outcomes as part of the overall patient management.
Preface

In order to address these pressing questions, a group of specialists in biochemistry, body composition, intensive care, medicine, nutrition, pediatrics, physiology and surgery from many countries worldwide were brought together, under the auspices of Nestlé, in the serene surroundings of Stellenbosch, South Africa, for the 7th Nestlé Nutrition Workshop, Clinical Nutrition: Early Intervention. The state-of-the-art presentations did not only put a sound perspective on the latest developments in the field, but also generated intense and extensive discussions, which underscored the difficulties, complexities and challenges facing the healthcare practitioner in administering nutritional support beneficially in the presence of the acute phase response as part of the overall patient management.

The proceedings of the 7th Nestlé Nutrition Workshop, Clinical Nutrition: Early Intervention, as published in this volume of the Nestlé Nutrition Workshop Series: Clinical and Performance Program, accurately reflect the contribution made to new developments, adeptly summarize current knowledge in this field, and reflect the success of the workshop.

*Demetre Labadarios, Claude Pichard*
Foreword

Not only the right timing, but also the appropriate measures regarding early intervention in clinical nutrition, seem to be important for the sake of critically ill patients. The focus of this workshop was hence to demonstrate the advantages of initiating enteral nutrition in different disease states earlier than frequently practised. Moreover, the underlying basic mechanisms in inflammatory, immunological and organ-specific diseases and conditions, some pathogenetic relationships between the actual needs and provision of nutrients, as well as the cost-effectiveness aspects of enteral nutrition were covered.

I would like to thank the two chairmen of this 7th Nestlé Nutrition Workshop of the Clinical and Performance Program, Prof. Demetre Labadarios and Prof. Claude Pichard, both outstanding experts in clinical nutrition, for putting the program together and inviting a group of speakers, who are known to be opinion leaders in this intricate field of possible interrelations between clinical nutrition and disease. Invited scientists from 10 countries contributed to the discussions that are published here. Dr. Nicholas Partington from Nestlé (South Africa) (Pty) Limited and his team, in particular Ms. Anne-Marié De Beer, provided excellent logistic support and the participants enjoyed the warm South African hospitality. Dr. Denis Barclay from the Nestlé Nutrition Strategic Business Division in Vevey, Switzerland, was responsible for the scientific coordination. His intensive cooperation with the chairmen was essential for the success of this workshop.

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