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ERAS NUTRITION PROTOCOL FOR ELECTIVE COLECTOMY, DUODENECTOMY, PANCREATICODUODENECTOMY, GASTRIC-, PELVIC-, RECTAL- OR ABDOMINAL SURGERY

What is ERAS

Enhanced recovery after surgery (*ERAS*) is the evidence-based care protocol developed by the ERAS Society. It describes the perioperative care pathway with recommendations for patient care at various steps in the perioperative process. The ERAS care pathways reduce surgical stress by optimal control of pain, early oral diet and early mobilization after surgery. This has resulted in reduced rates of morbidity, faster recovery and shorter length of stay in hospital and as a consequence, reduced costs.

Patients must be consulted by a dietician 3 - 7 days before planned surgery and preoperative carbohydrate loading and immune-nutrition must be started 3 - 7 days prior surgery

The following will be done by the dietician

The patient will be informed about the feeding protocol (pre- and postoperative), as well as the importance of it. A nutritional assessment and diet history will be taken and nutritional needs calculated to reach nutritional goals in preparation for surgery and thereafter.

Preoperative nutritional care for colectomy/duodonectomy/gastrectomy

- Addition of nutritional supplements to reach nutritional goals where preoperative intake is not optimal or in malnourished patients or patients with unplanned weight loss starting 5 - 7 days prior surgery where possible.
- In general no mechanic bowel preparation will be used.
 As preparation, clear fluid supplements or elemental supplements will be used to feed optimally according to calculated patients' needs starting 3 days before surgery up to 2 hours before surgery (Elemental O28, Peptamen -Prebio, Provide Xtra, Fortijuice, Recource.) This treatment reduces the prevalence of preoperative thirst, hunger and anxiety. This treatment (avoiding preoperative fasting) also results in less postoperative protein losses as well as maintained muscle mass and strength.
- Immunonutrition when needed according to dietician's evaluation starting 5 7days before surgery (Glutamine, Arginine, Omega 3, anti-oxidants)

Preoperative nutritional care for abdominal surgery

- Addition of nutritional supplements to reach nutritional goals where preoperative intake is not optimal or in malnourished patients or patients with unplanned weight loss starting 3 7 days prior to surgery if possible.
- In general no mechanic bowel preparation will be used Solids up to 6 hours prior to surgery and clear fluid supplements up to 2 hours prior surgery (Elemental O28, Peptamen -Prebio, Provide Xstra, Fortijuice, Recource.
- Immunonutrition when needed according to dietician's evaluation starting 5 7days before surgery (Glutamine, Arginine, Omega 3, anti-oxidants)

Perioperative early oral intake

- Chewing gum (reduce time to first bowel movement)
- Laxatives and prokinetics (normalise gastro intestinal transit after surgery)
- Clear fluids and clear fluid supplements 4 hours after surgery
- Following meal should be mixed fluids and protein energy supplements
- Light soft food with protein energy supplements to optimalise nutritional requirements within 24 hours after surgery
- Immuno-nutrition