



President's Message

Fall 2017

TGCSPEen

Board of Directors

2017-2018

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It is hard to believe that my time as TGCSPEen President is coming to an end. Our chapter's success this year was due to the selfless dedication, contributions, and hard work of our 2017 TGCSPEen Board of Directors. I would like to personally thank Judy Brown (Past President), Anne Tucker (President Elect), Rebecca Toon (Treasurer), Lauren Probstfeld (DAL-Publications), Ann Priest (DAL-Program Planning), Reagan Collins (DAL-Membership/Nominations) and Heather Davis (Secretary) for all of their efforts.

I also wanted to send out a special thank you to the four board members who are stepping down from the board this year. A big thank you to Ann Priest for her amazing job obtaining sponsors and coordinating the majority of our webinars and dinner events. Thank you to Lauren Probstfeld for keeping us informed through newsletters and flyers. Also, thank you to Reagan Collins for keeping the board focused on what our members want through polls. Lastly, I want to thank Judy Brown who was always available to answer questions and provide guidance to the President as well as share technical expertise during webinars. This upcoming year we will have four officer positions available, including President Elect, DAL-Publications, DAL-Program Planning and DAL-Nominations/Membership. If you are looking for a chance to become more involved, here it is!

Our final event for the year is the Annual Fall Dinner. Our Fall Dinner is an excellent opportunity to network with local members, learn, and vote for the new TGCSPEen Board. It is one of the ways TGCSPEen is committed to providing you with high quality educational opportunities.

We are anxiously awaiting the announcement of topics and speakers for next year's ASPEN webinar series. Our sponsorship of these webinars would not be possible without the support of our local sponsors. A huge thank you to our 2017 sponsors: Coram, Nestle, Alcresta, and Shire.

Lastly, if you know of any ASPEN members who are not a part of TGCSPEen, please encourage them to join. They may visit our Facebook page and/or contact any of the Board of Directors for more information. Membership benefits include free access to ASPEN webinars, networking with other nutrition professionals in the Houston-Galveston area and more. I appreciate the opportunity to have served as TGCSPEen President. Have a wonderful day and hope to see you at the Fall Dinner!!

Sincerely,

Renee Walker MS, RDN, LD, CNSC, FAND

TGCSPEen President 2016-2017

Save the Date!

ASPEN 2018 Nutrition Science and Practice Conference

January 22-25, 2018

Caesars Palace in Las Vegas, NV

Early Bird Registration ends 11/8/2017

Certification in Nutrition Support (CNSC)

Spring Application deadline: March 23, 2018

Testing Period: April 14, 2018 thru April 28, 2018

CNSC exam fees:

ASPEN Members	\$315.00
Non-Members	\$415.00

Visit nutritioncare.org/nbnsc for more information!



2017 Sponsors—We Thank You!

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You are cordially invited to TGCSPEN's Annual Fall Dinner and Elections!



When: Wednesday, November 8, 2017

6PM: Networking

6:30PM: Dinner and Presentation

Where: La Griglia

2002 West Gray Street, Houston, TX 77019

Speaker: Douglas Farmer, MD, FACS

Topic: *Strategies in the Management of Parenteral Support*

Register today by calling 844-858-9303 by **October 31, 2017**

TGCSPEN Fall Dinner 2017 is for members and invited guests only

Thanks to the generosity of Shire, we will not be charging for this year's Fall dinner – but please consider donating \$10 to a Hurricane Harvey relief fund instead.

No CEU's provided



2017 Board of Directors Nominee Bios

Director At Large of Publications

Gabriela Gardner RDN-AP, LD, CNSC

Gabriela Gardner is the dietitian for an outpatient digestive disease center in the Texas Medical Center and also has a private practice for nutrition counseling and consulting. Gabriela has contributed to the public as a guest speaker for support groups and media appearances on various topics related to gastrointestinal disease and wellness. She also enjoys volunteering for dietetics organizations and is an active member of the Southeast Region of the Texas Academy. As a clinician, she has an interest in nutrition support and has presented her work at Clinical Nutrition Week and Digestive Disease Week. She has also published in *Nutrition in Clinical Practice* and is a peer reviewer for the American Society of Parenteral and Enteral Nutrition's journals. In her free time, Gabriela enjoys cooking, reading, and yoga.

Director At Large of Program Planning

Judy Brown MS, RD, LD, CNSC

Judy Brown is a certified nutrition support clinician from Houston, TX. She has over 15 years experience in clinical nutrition including areas such as nutrition research, public health nutrition, clinical nutrition, and nutrition support. She works as a clinical dietitian specialist at the Michael E. DeBakey VAMC. She has worked in nutrition support providing care to complex patient populations such as oncology, transplant, and pediatrics throughout Southeast Texas. She is a current member of several professional groups including the Academy of Nutrition & Dietetics, the American Society for Parenteral and Enteral Nutrition, Dietitians in Nutrition Support and the Oley foundation and has served on the board for both TGCSPEN and the local Oley support group.

2017 Board of Directors Nominee Bios

Director At Large of Nominations and Membership

Jessica Tilton MS, RD, LDN, CNSC

Jessica Tilton graduated from Case Western University in Cleveland Ohio in 2002 with a Masters in Public Health Nutrition. She completed her dietetic internship at the Akron Health Department in Akron, Ohio in 2002. From December 2002 to June 2004, she worked at the MetroHealth Center for Community Health in Cleveland, Ohio as an outpatient dietitian seeing primarily inner city populations. She also worked for Odyssey Hospice in Cleveland from December 2002 to June 2004. Jessica worked from December 2004 to March 2015 at Abbott Northwestern Hospital in Minneapolis, Minnesota. She specialized in oncology , working with the Autologous Stem Cell Transplant Program. She also provided outpatient coverage 2 days per week, seeing patients with diabetes, renal failure and GI disturbances. In January 2016, Jessica began to work at CHI St Luke's Health. She currently specializes in critical care nutrition support. She works in cardiovascular critical care and the neurology ICU. Her current interests include alternative nutrition care. When not working, she does yoga at YogaOne Bellaire or Uptown. She also takes care of two English Mastiffs, Winston and Sherlock, who weigh respectively 245 and 178 pounds.

Call for Nominations!

It is not too late to be considered for an open Board of Directors position! If you would like to run for an open position, please send your bio to Reagan Collins at

RDCollins@MDAnderson.org

If you have served on the TGCSPEN Board of Directors in the past, and would like the opportunity to run for president-elect, please send your bio to Reagan Collins at

RDCollins@MDAnderson.org

Nutrition Support for Oral Cavity Cancer Patients

Written by: Meredith Miller, Dietetic Intern at Michael E. DeBakey VA Medical Center

Oral cavity malignancies are those that originate in the cell lining within the lips, gums, front two-thirds of the tongue, the floor of the mouth beneath the tongue, the hard palate, or the area of gum behind the wisdom teeth.¹ Surgery is considered the primary treatment option and may involve complete tumor resection, neck dissection, and/or plastic reconstructive surgery based on the severity of the tumor's stage.² More advanced tumors may also require radiation and/or chemotherapy treatment as primary or adjuvant therapy.²

Oral cavity cancers and corresponding treatments are frequently associated with symptoms that hinder individuals' ability to consume adequate oral nutrition. These symptoms may include trismus (locked jaw), early satiety, poor dentition, mucositis, dysguesia, dysphagia, and the development of dental caries.³ Different surgical interventions may also alter a patient's anatomy and contribute to acute/chronic dysphagia or the need for oral restriction while their surgical site heals.⁴ All of these side effects and barriers can contribute to secondary problems such as poor wound healing, infection, weight loss, dehydration, and malnutrition.³

Adequate nutritional management is essential in optimizing recovery outcomes and each patient's quality of life. Goals of nutritional interventions should be to help patients correct any deficiencies, overcome nutritional barriers, and ultimately optimize nutrient intake. Various surgical interventions and adverse symptoms may warrant the acute and/or chronic use of artificial nutrition support.⁴ More extensive and reconstructive surgical treatments (i.e. free vascularized flaps or bone transfer) have been found to be associated with a higher need for nutrition support.⁴

If the patient is anticipated to only require enteral nutrition for a short period of time, nasal access is ideal when feasible. However, long-term use of percutaneous endoscopic gastrostomy (PEG) feedings is typically indicated for patients in which the tumor location and consequential treatment directly impacts swallowing patterns.⁵ Other indications for PEG placement include radiation therapy with or without chemotherapy, low BMI, advanced tumor stage, pretreatment dysphagia symptoms, advanced age, and various extensive surgeries. Prophylactic PEG tube placement is a common practice used to prevent malnutrition, dehydration, and other anticipated adverse outcomes of oral cavity cancer and other types of head and neck cancer.³

When choosing a type of enteral formula, several factors must be considered based on the patient's needs and health status. Increasing evidence suggests that immune-enhancing formulas may have anti-cachectic effects and improve functional status in cancer patients. These formulas may include individual or a combination of various nutrients such as arginine, omega-3 fatty acids in the form of MCT or fish oil, and glutamine.⁶ One recent study showed that formulas containing arginine, RNA, and omega-3 fatty acids reduced the frequency rate of infections and wound complications in post-surgical HNC patients.⁷ Another study found an association between glutamine and arginine-enriched solutions and improvements in pain, appetite, dry mouth, sticky saliva, taste alterations, and swallowing problems in subjects during radiation treatment.⁸

Changes in nutritional status may occur as treatment progresses over time; therefore, appropriately planned interventions are necessary to closely monitor and track these changes. Oral cavity cancer patients may develop adverse symptoms that may not have been present at the time of the initial assessment.³ In contrast, a patient may also exhibit improvements in initial symptoms and may be able to transition to more advanced oral diets. As a result, a dietitian should continually compare patient outcomes and appropriately adjust interventions that reflect any changes and align with the patient's goals.⁹ In doing so, proactive nutritional management may help minimize the likelihood of malnutrition, ensure successful recovery, and optimize the long-term quality of life of patients with oral cavity cancer.

References

1. National Cancer Institute (NCI). (2017). Head and Neck Cancers. Retrieved from: <https://www.cancer.gov/types/head-and-neck/head-neck-fact-sheet>
2. Frohwitter G, Buerger H, Korsching E, Van Diest PJ, Kleinheinz J, & Fillies T. (2017). Site-specific gene expression patterns in oral cancer. *Head & Face Medicine*, 13, 6. <http://doi.org.ezproxyhost.library.tmc.edu/10.1186/s13005-017-0138-0>
3. Nutrition Care Manual (NCM). (2017) Oncology: Head & Neck. Academy of Nutrition and Dietetics. Retrieved from: www.nutritioncaremanual.org/topic.cfm?ncm_category_id=1&ncm_toc_id=145170
4. Van der Linden N, Kok A, Leermakers-Vermeer M, et al. (2016). Indicators for Enteral Nutrition Use and Prophylactic Percutaneous Endoscopic Gastrostomy Placement in Patients With Head and Neck Cancer Undergoing Chemoradiotherapy. *Nutrition in Clinical Practice*. Vol 32, Issue 2, pp. 225 – 232. Doi: 10.1177/0884533616682684
5. Pulkkinen J, Rekola J, Asanti M, Grenman R. (2014). Prophylactic percutaneous endoscopic gastrostomy in head and neck cancer patients: results of tertiary institute. *Eur Arch Otorhinolaryngol*. 271(6):1755-1758.
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7. Felekis D, et al. (2010). Effect of perioperative immuno-enhanced enteral nutrition on inflammatory response, nutritional status, and outcomes in head and neck cancer patients undergoing major surgery. *Nutr Cancer*. 62(8):1105-12. doi: 10.1080/01635581.2010.494336.
8. Yuce Sari S, Yazici G, Yuce D, Karabulut E, Cengiz M, Ozyigit G. (2016). The effect of glutamine and arginine-enriched nutritional support on quality of life in head and neck cancer patients treated with IMRT. *Clin Nutr ESPEN*. 16:30-35. doi: 10.1016/j.clnesp.2016.08.003.
9. Evidenced Analysis Library (EAL). (2013). ONC: Nutrition Monitoring and Evaluation of Adult Oncology Patients 2013. Retrieved from: http://www.adaevidencelibrary.com/template.cfm?template=guide_summary&key=4175&highlight=Oncology&home=1

Drug Shortage References

American Society for Enteral and Parenteral Nutrition

http://www.nutritioncare.org/Professional_Resources/Drug_Shortages_Update/

American Society of Health-System Pharmacists

<http://www.ashp.org/shortages>

U.S. Food and Drug Administration

<http://www.fda.gov/Drugs/drugsafety/DrugShortages/default.htm>

Institute for Safe Medication Practice Identification

<http://www.ismp.org/newsletters/acutecare/articles/20100923.asp>

TGCSPEN Membership Information

Previously, joining TGCSPEN and ASPEN required two separate transactions. Now, individuals can add both chapter membership and ASPEN membership to their shopping cart at one time. With this change, we hope to eliminate an obstacle to growing our membership by making it easier and more convenient to join TGCSPEN.

ASPEN student members may join TGCSPEN for FREE! Please contact us if you are a student member of ASPEN and would like to join TGCSPEN

2 Free CE opportunities

ASPEN members can earn free CE credits for reading pre-selected articles in the *Journal of Parenteral and Enteral Nutrition (JPEN)* and then successfully passing a knowledge assessment test. Log into [A.S.P.E.N.'s eLearning Center](#) to access an electronic copy of the article (or read the article in your hard copy of the journal), complete the knowledge assessment test, and claim your credit!

TGCSPEN Newsletter Contribution Opportunities

We are always looking for contributions to the TGCSPEN newsletter. If you would like to contribute to the TGCSPEN newsletter as a guest author or if you are conducting interesting research you would like to share with your fellow TGCSPEN members, we would like to hear from you!

Email Lauren Probstfeld at Lauren.Probstfeld@va.gov for more information.