

Refeeding syndrome - Vitamin replacement

Refeeding syndrome consists of metabolic changes that occur on the reintroduction of nutrition to in those who are malnourished or in the starved state. The consequences of untreated re-feeding syndrome can be serious; causing hematologic abnormalities and result in death.

The risk can be reduced by preventing rapid reintroduction of nutrition alongside supplementation and monitoring/correction of electrolytes and vitamins. Vitamin replacement should ideally be done on the same day/before initiating feed in order to try and minimise the risk of developing refeeding syndrome.

The following should be prescribed for patients who are at risk of refeeding syndrome:

Oral:

Thiamine 100mg tablets 2-3 OD (in divided doses) for 10 days

+

Forceval capsules 1 OD for 10 days

Enteral:

Thiamine 100mg tablets 2-3 OD (in divided doses) for 10 days (Can be crushed and dispersed in water for administration via enteral feeding tubes)

+

Forceval soluble tablets 1 OD for 10 days. The soluble tablets can be mixed with water prior to administration via enteral feeding tubes.

Intravenous:

- Pabrinex (IV): 1 pair OD for 10 days
- Pabrinex (IV): 2 pairs TDS for 2 days, then 1 pair OD for 8 days (With alcohol related issues)

Two ampoules (1 Pair) of Pabrinex contain: Thiamine hydrochloride 250mg - ascorbic acid 500mg - nicotinamide 160mg - pyridoxine hydrochloride 50mg - riboflavin 4mg.

The above should be continued while an inpatient or until 10 days have passed (not for discharge), or can be given for longer if specifically requested by the Dietitians/Nutrition team.

High risk of re-feeding problems if:

One or more of the following:

- BMI less than 16 kg/m2
- Unintentional weight loss >15% within last 3-6 months
- Little or no nutritional intake for more than 10 days
- Low levels of potassium, phosphate, calcium or magnesium prior to feeding

Two or more of the following:

- BMI less than 18.5 kg/m2
- Unintentional weight loss >10% within the last 3-6 months
- Little or no nutritional intake for more than 5 days
- A history of alcohol abuse or drugs including insulin, chemotherapy, antacid or diuretics

Author: Matthew Wallis, Specialist Clinical Pharmacist, Critical Care & Nutrition

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