

Background

Malnutrition is a common health condition that affects older persons.

Little is known on patient- and informal caregiver related factors in the development of malnutrition. This study aims to explore the perceptions of frail geriatric patients and their informal caregivers to identify factors contributing to a high risk of malnutrition.

Methods

Qualitative study with recorded and verbatim transcribed semi-structured interviews from July until November 2018

Twelve frail geriatric patients and 14 informal caregivers were recruited from both the geriatric clinic and geriatric outpatient clinic.

The median age of the patients was 87.5 years (range 71–93 years), and that of the caregivers was 64 years (range 50–90 years).

Data were analyzed using the principle of open coding of early data.

Quotes

"No, the government does enough. They are trying to get people to eat healthy so that they don't eat fries all the time."

"I remember well the war years. We went to the farmers to pull roots out of the ground. The lasting effect of all this is that I only eat to survive and nothing else."

"I eat because it is a ritual of the day and because it is necessary to live. But I do not look forward to a meal."

"Sometimes it is contradictory; first you are allowed to eat it, and then you are not."

"Maybe also loneliness: "Why should I cook? Look at my mother, I bring her food, but she needs to heat it and, in the end, she only takes some Cup-a-Soup."

Results

Three themes were identified:

- 1) Emotions related to eating
- 2) Knowledge about nutrition and malnutrition
- 3) Support regarding daily dietary intake, e.g. involvement of the general practitioner.

Social aspects of eating were discussed in all three themes.

Themes did not differ between caregivers and patients.

Conclusions

Patients and caregivers lack knowledge concerning healthy nutrition and have limited insight into the risk for malnutrition.

Accessible information concerning healthy nutrition and the prevention of malnutrition that is targeted to this population is highly needed.

We need to focus on the positive emotions and social aspects pertaining to meals and nutrition

