

Use of feeding tubes decreases among nursing home residents with advanced dementia

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In a study appearing in the August 16 issue of *JAMA*, Susan L. Mitchell, M.D., M.P.H., of Hebrew SeniorLife Institute for Aging Research, Harvard Medical School, Boston, and colleagues examined feeding tube insertion rates from 2000-2014 among U.S. nursing home residents with advanced dementia.

Over the last 2 decades, research has failed to demonstrate benefits of tube feeding in patients with advanced dementia. Expert opinion and position statements by national organizations increasingly advocate against this practice. For this study, data were derived from federally mandated Minimum Data Set assessments completed quarterly, as required, on all residents in U.S. nursing homes between January 1, 2000, and October 31, 2015. Residents who met certain study criteria were included in the analysis.

Between 2000 and 2014, 71,251 residents with advanced dementia and recent dependence for eating were identified with the following characteristics: average age, 84 years; women, 76 percent; white, 86 percent; black, 9.5 percent; and prior stroke, 14 percent. These characteristics were similar across years. The proportion of residents receiving feeding tubes over the next 12 months declined from 12 percent in 2000 to 6 percent in 2014. Insertion rates declined between 2000 and 2014 among white residents (8.6 percent to 3.1 percent) and black residents (38 percent to 18 percent). However, black residents



were more likely to get tube fed in 2000 and 2014 than white residents.

"The proportion of U.S. nursing home residents with advanced dementia and eating dependency receiving feeding tubes decreased by approximately 50 percent between 2000 and 2014," the authors write. "Feeding tube use decreased across racial groups, but remained relatively higher among black residents, consistent with prior research."

"To ensure the message from existing evidence and expert recommendations is disseminated and disparities are reduced, fiscal and regulatory policies are needed that discourage tube feeding and promote a palliative approach to <u>feeding</u> problems in patients with <u>advanced</u> <u>dementia</u>."

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