

QUICK GUIDE: Prescribing ORAL NUTRITIONAL SUPPLEMENTS (ONS) for Adults in Primary Care

FIRST LINE: 'FOOD FIRST' ADVICE

Provide patient with "[Boost Your Nutritional Intake](#)" leaflet

Encourage the patient to aim for the following every day, for 1 month, before prescribing ONS:

① x pint fortified whole milk

Mix 1 pint of whole milk with 4 tablespoons dried milk powder. Add milkshake powder to make a nourishing drink.

② x high energy snacks

e.g. cheese and crackers, sausage roll, samosa, banana, nuts, yoghurt.

③ x fortified meals

e.g. Add butter, cream, cheese, ground nuts or dried milk powder to foods.

- Consider ONS if food first advice has not improved weight after 1 month. Continue food-first advice alongside ONS.
- Patient needs to meet an ACBS criteria below* and check patient's [MUST](#) score is 2 or above before prescribing.
- Set a goal(s) with the patient and add a review date on the clinical system for 2-3 months.
- **ONS free sample services:** [Aymes](#) (ActaGain), [Nualtra](#) (Altraplen/Foodlink)

The following first line ONS are green-coded and may be initiated in Primary Care

POWDERED ONS: use first when patient/carer can make them up as more cost-effective and nutrient dense



Complan Shake

Add 200ml whole milk

380kcal, 15g protein, 51p

Flavours: Banana, Chocolate, Original, Strawberry, Vanilla

Alternatives: Foodlink Complete + 200ml whole milk (58p)

Compact options: Add 100mls whole milk

Aymes Shake Compact (57p), Foodlink Complete Compact (58p)

Milk-free/juice style: Add 150mls water, suitable for vegans

Aymes ActaSolve Smoothie (£1.08), Foodlink Smoothie (£1.11)

Soup style: Aymes ActaSolve Savoury (93p)

Patients should not be prescribed more than TWO powdered ONS each day as this may exceed recommended micronutrient requirements



Aymes Shake

Add 200ml whole milk

383kcal, 19g protein, 57p

Flavours: Banana, Chocolate, Ginger, Neutral, Strawberry, Vanilla

Consider bottled ONS if patient cannot tolerate a powdered ONS or if patient/carer is unable to make up a powder

Ready to drink - BOTTLED ONS (if unable to use a powder option)



Altraplen Energy

200ml bottles

300kcal, 12g protein, £0.99

Flavours: Banana, Chocolate, Strawberry, Vanilla

Alternatives: Aymes ActaGain 1.5 Complete (£1.11)

Milk-free Suitable for vegans: Fortisip PlantBased 1.5kcal (£1.54)

Aymes ActaGain Plant Powered 1.5 (£1.54)

Juice-style: Aymes ActaGain 1.5 Juce (£1.80), Fortijuice (£1.80),

Altrajuice (£1.89)

Refer to Dietitian if patient does not tolerate any of the above options and/or requires additional nutritional support. Do not use these standard products if patient is prescribed thickener, as they may not be safe for them to use.

Prices MIMS December 2024

- ***ACBS Criteria:** • Disease related malnutrition • Dysphagia • Pre-operative preparation of patients who are undernourished • Proven inflammatory bowel disease • Following total gastrectomy • Bowel fistulae • Short bowel syndrome • Intractable malabsorption • Continuous ambulatory peritoneal dialysis (CAPD) • Haemodialysis, or • Specifically prescribable for individual conditions.

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Before considering ONS prescription

- Screen for malnutrition using the [MUST](#) screening tool and treat underlying causes of malnutrition
- Agree an appropriate measurable aim of treatment e.g. weight maintenance, weight gain, quality of life
- Promote a 'food first' approach by providing the 'Boost Your Nutritional Intake' leaflet.

ONS in Care Homes

Care Homes should be maximising a 'food first' approach, including offering fortified milky drinks before considering ONS prescription. If residents meet prescribing criteria for ONS, then a **powdered** ONS option should be used. Please see 'Reviewing Oral Nutritional Supplements in Care Homes' to support prescribing in Care Homes.

When to start ONS?

ONS may be initiated in primary care after appropriate first line 'food first' advice has been trialled for 1 month, they have a MUST score of 2, and they meet the product's ACBS indication(s). Please refer to the full ONS formulary for further information.

Patients who may benefit from ONS prescription include:

- Those with 'MUST' score of 2 or more who are not improving after 1 month following 'food first' advice
- Those with 'MUST' score of 3 or 4

Please refer the patient for a dietitian assessment if:

- Patient has complex nutritional needs or requires ONS as their main/sole source of nutrition
- Patient is prescribed thickener as the standard ONS products may not be suitable
- Patient fails to stabilise/improve after initial prescription of ONS and underlying causes of malnutrition have been treated

Prescribing ONS:

- Discuss preferences with patient and use formulary to decide best option for patient
- Set clear treatment goals with patient prior to starting ONS, including timeframe for use
- Prescribe powder ONS first-line when a patient/carer can make it up
- Consider prescribing an initial 7-day supply for patients to trial product
- Once patient tolerance established, prescribe on acute 28-day script then review progress before issuing further prescriptions
- Recommended dose is TWO SACHETS/BOTTLES DAILY. Once daily and PRN prescribing is unlikely to be clinically effective and is not encouraged
- To avoid spoiling appetite, ONS should be taken between meals and after other snacks/nourishing drinks
- ONS should not be given as a meal replacement, but in addition to usual diet
- Once opened, ONS should be drunk within 4 hours or stored in the fridge for up to 24 hours to drink throughout the day

Only green-coded ONS products may be initiated in Primary care.

Any other products should only be initiated on the recommendation of a registered dietitian.

Reviewing/Stopping ONS

- Monitor 'MUST' score progress against treatment aims and ONS compliance, reinforce 'food first' advice
- If stable/improving, agree further aims of treatment and timescales if necessary
- Consider reducing/stopping ONS if patient is eating normally and is gaining weight, or weight stable for ≥6 months
- Consider if nutritional intervention remains appropriate, particularly in patients nearing end of life
- Stop ONS if patient is unable or unwilling to take ONS in a therapeutic dose or if they do not meet ACBS indications
- Once ONS stopped, advise patient to continue 'food first' advice, to monitor their weight and intake, and to contact GP if any concerns
- If ongoing concerns/deterioration, consider alternative ONS options or refer to dietitian for further guidance