Increasing Calories in the Enteral Diet

Weight gain and subsequent maintenance are common concerns for the enteral, or tube-fed, patient. Working with your dietitian and physician, you can find ways to increase your caloric intake. Generally speaking, a weight gain of a half-pound to a full pound per week can be achieved with an increase of approximately 250–500 calories per day. When comparing the enteral diet to the oral diet, strategies for increasing calories are quite similar. These strategies include:

Increase the Volume

In an oral diet, you would first simply try eating more. The same idea applies to the enteral diet. If you use the bolus method for tube feeding, the most basic strategy to increase calories is to increase the volume of each bolus meal. Try slowly increasing a meal volume by 30- to 60-mL (1- to 2-ounce) increments. Often, the adult stomach can tolerate a total volume of 240–480 mL per meal. If you are receiving a continuous feed via pump, a slow increase in rate (start with increments of 2–5 mL/hour, as tolerated) can be used to obtain a goal of an additional 120–480 mL per day.

Increase the Frequency

If unable to tolerate additional volume per bolus feeding, you can try increasing the number of feedings per day. Again, an increase of 120–480 mL per day is a practical goal. This can be accomplished by adding an additional meal per day (space meals at least two hours apart). Or, you can add two to three smaller, 60- to 120-mL “snacks” between normally scheduled bolus feedings, or add one smaller feeding at bedtime.

Increase the Density

In terms of food, it is understood that a bite of cheesecake packs more calories than the same amount of fruit does. This concept also applies to various enteral formulas. If an increase in formula volume or frequency is not tolerated, the next strategy is to manipulate the formula density.

Calorie density is noted in the name of most commercial formulas. A “1.0” formula provides one calorie per milliliter. Try increasing the formula density incrementally, using formulas that provide 1.2, 1.5, and 2.0 cal/mL. (Note: High-density formulas contain less water than low-density formulas. If switching to a denser formula, additional water will have to be provided as flush. Consult the formula label to compare total water content in each product. A registered dietitian can help you determine your total fluid needs.)

If using a blenderized formula, you can increase the density by mixing the formula with less water. A variety of products can also be added to enhance nutrition without substantially altering volume. These include powdered products such as a protein module or a liquid MCT (medium-chain-triglyceride) oil. MCT oil is more readily digested than other forms of fat, making it a good choice for those struggling with diarrhea and malabsorption.

Keep in mind that not all interventions are appropriate for every patient. Be sure to talk to your doctor before making any changes to the enteral regimen that has been prescribed for you. Working with your doctor and dietitian to formulate an individualized, balanced approach for increasing calories is the best way to go!

Written by Brittany L. Wright, RD, Enteral Specialist, Coram CVS/Specialty infusion services. Reviewed by Carol Ireton-Jones, PhD, RD, LD, and Laura Matarese, PhD, RD, CNSC. References available upon request.
A Regular Guy: My First Oley Conference

Stephen Alan Boyar

On board the plane from JFK Airport to Orlando with my wife, Melba, waiting to take off for my first Oley conference, I sigh. I will never overcome my anxiety about getting through Security. I remember the scene from two hours ago.

There's Something Wrong with Me

I'm certain I will be thrown in jail as a suspected terrorist. To defuse the tension I know I should announce to the TSA (Transportation Security Administration) agent ordering me to step into the body scanner that I have a feeding tube. I don't want to. But I do—even though it's none of his or anyone else's business that I have a hole in my stomach and a tube hanging out of it.

Again the agent barks, “Step into the scanner.”

Either he didn't hear me or chose to ignore me. I tell him I have a letter from my doctor. He takes it but doesn't read it, doesn't even look at it.

“Move into the scanner.”

They're going to freak out when they see the tube looped and secured by a tube holder taped to my chest.

Help along the way

A Regular Guy: My First Oley Conference

Steve and Melba relax between conference sessions.

This will look to them—as it would to me—like a bomb.

Outside the scanner, the same agent demands I identify my bags exiting the conveyor-belt scanner. One bag has not come out, the one with my valuables. I tell him I want to wait for it, but he orders me to follow him, now. He needs to see the feeding tube,

My First Conference, cont. pg. 2

School Days

Michele Horton

Many parents feel apprehension and concern when their kids complete preschool. The thought of sending our precious children off into the big world of kindergarten is enough to make any parent panic. Add special medical needs into the mix, and the apprehension and concern turn into absolute fear.

The thought of sending my (g-tube fed, peanut and milk anaphylactic) son to a public school was overwhelming. Someone other than me or my family would be responsible for feeding him? I could not get comfortable with this. No one could do as good of a job as I could. And how would the school accept him?

I dreaded school for years. I knew the day would come, and I spent many, many years fearing it.

School Days, cont. pg. 7

SF Meeting, Marathon

The Oley Foundation will be coordinating several one-day regional conferences for 2014–2015, with support from NPS Pharma. We were inspired to hold the first conference in San Francisco in July when Oley member Emma Tillman, PharmD, PhD and home parenteral nutrition (HPN) consumer, notified us she was signed up to run the San Francisco Marathon. That's 26.2 hilly miles, and Emma was determined to—and did—run it, along with several others comprising ‘The Oley Running Team’ and about 20,000 strangers (running the full or a half-marathon).

SF Regional Conference, cont. pg. 9