Enteral Nutrition Indications in Patients with Gastrointestinal Diseases: ASPEN Recommendations

Enteral nutrition (EN) is a vital component of nutrition for patients with gastrointestinal (GI) diseases and allows for delivery of nutrients when oral intake alone is inadequate to meet nutrition needs. Based on the ASPEN evidence-based consensus recommendations¹, this practice tool addresses key questions regarding the indications for and the initiation timing of EN for patients with GI disease.



What are the indications for enteral feedings in patients with GI diseases?

EN Indication	Considerations
Gastrointestinal (GI) diseases (e.g., inflammatory bowel diseases, chronic liver disease, acute pancreatitis) when the patient is at risk or has emerging malnutrition due to inadequate oral intake.	 Patients most likely to require EN will be those with underlying malnutrition at the time of diagnosis or who are developmentally undergoing periods of rapid growth (notably, infants and adolescents). Refractory inflammation and severe malabsorption (notably, in patients with liver disease) will increase the likelihood of requiring EN.
Crohn's disease (CD), as therapeutic option for the induction of remission	 Exclusive EN (EEN) should be considered as a first-line therapy for the induction of remission in children with CD. EEN may be an alternative to corticosteroid therapy for the induction of remission in adults with CD and a high likelihood of treatment adherence.
Severe acute pancreatitis (SAP), in preference to PN	 It is safe to commence EN within 48 h of admission in stable patients predicted to have SAP. EN by the nasogastric route can be considered first line; the nasojejunal route is indicated when nasogastric feeding is not tolerated. Polymeric formula is the first choice for EN in severe acute pancreatitis.

Reference:

1. Bechtold ML, Brown PM, Escuro A. et al. When is enteral nutrition indicated? JPEN J Parenter Enteral Nutr. 2022; 46:1470-1496.

Note: This content has been developed based on ASPEN Board-approved documents. The information presented here is for use by healthcare professionals to inform other clinicians and/or patients/caregivers. Recommendations provided here do not constitute medical or other professional advice and should not be taken as such. To the extent that the information presented here may be used to assist in the care of patients, the primary component of quality medical care is the result of the professional judgment of the healthcare professionals providing care. The information presented here is not a substitute for the exercise of professional judgment by healthcare professionals. Circumstances and patient specifics in clinical settings may require actions different from those recommended in this document; in those cases, the judgment of the treating professional. Use of this information does not in any way guarantee any specific benefit in outcome or survival. This tool is intended to supplement, but not replace, professional training and judgment.

