

NHS NORTH EAST LONDON POSITION STATEMENT

ORAL NUTRITIONAL SUPPLEMENTS (ONS) ON DISCHARGE FROM HOSPITAL

Position Statement for Primary Care

- Patients discharged from hospital on ready-made ONS **should be reviewed** in Primary Care in line with NEL ONS guidelines [Link \(Q Ref 3 from the guidelines enclosed\)](#).
- If there is an ongoing need for ONS they should be changed to powdered ONS as first-line treatment unless the exceptions in the table below apply.
- The first choice formulations for powdered ONS are:
 - **Aymes Shake Powder**
 - **Foodlink Complete Powder.**
- If a discharge letter from a hospital dietitian specifies that powdered ONS are not suitable, this recommendation should be followed.
- Patients should be informed where possible that ONS prescribed in hospital may change when they are discharged.
- If the dietitian recommends a specialist product, with an explanation, then it should be continued.

Table 1. Exceptions where ready-made ONS may be prescribed

Difficulty mixing drinks and no carer support (e.g., severe dexterity or visual impairment).

This does not apply to care homes.

Dysphagia requiring pre-thickened ONS (with Speech and Language Therapy (SLT) input).

Lactose intolerance (ready-to-drink ONS are very low in lactose).

Complex nutritional needs requiring specialist products (e.g., renal or liver disease, poorly controlled diabetes, gastrointestinal disorders) where a dietitian has advised continuation of ready to drink ONS.

Table 2. Choices where alternatives to Aymes Shake Powder / Foodlink Complete Powder need to be prescribed.

First choice of readymade ONS (Unless there are compelling reasons for a second line or specialist supplement)	Altraplen Energy (Milkshake Style)
Patients requiring a compact style ONS	Aymes Shake Compact Powder or Foodlink Complete Compact Powder
In situations where patients cannot tolerate milk based sip feeds, (prescribe juice style preparation)	ActaSolve Smoothie Powder

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BACKGROUND

Oral Nutritional Supplements (ONS) are used in the management of malnutrition and are frequently prescribed at hospital discharge.

North East London ONS Guidelines (2025) [Link](#) state that **powdered ONS** should always be prescribed as **first-line unless contraindicated**.

Ready-made ONS are higher cost and often provide lower nutritional value per serving compared with powdered ONS (when made up with full-fat milk).

Evidence suggests that a large proportion of ONS prescribing in primary care is inappropriate or could be more cost-effective.

This position statement supports Primary Care Clinicians in reviewing and changing ONS to recommended products following discharge from hospital. It is fully in line with the NEL ONS Guidelines.

SCOPE

This position statement applies to all requests for ONS prescribing in NEL primary care following hospital discharge.

It does not apply to enteral feeding regimens or patients under the care of a Home Enteral Feeding Team.

ROLES AND RESPONSIBILITIES

Primary Care Clinicians should follow the actions listed in this position statement.

Prescribing of oral nutritional supplements (ONS) following hospital discharge,

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NHS North East London Pharmacy and Medicines Optimisation Team are responsible for reviewing this document and ensure information within the position statement is accurate and up to date.

NHS Hospital clinicians should inform patients where possible that ONS prescriptions may change on discharge. This will in time be noted as standard on the discharge letter.

Where powdered ONS are not appropriate, the discharge letter should clearly state the reason.

GPs and non-medical prescribers in primary care should review patients discharged from secondary care where ONS needs to be continued. Patients should be switched from ready-made ONS to powdered ONS in line with the guidelines ([Q Ref 3 from the guidelines enclosed](#)) unless a valid clinical reason for exception is documented.

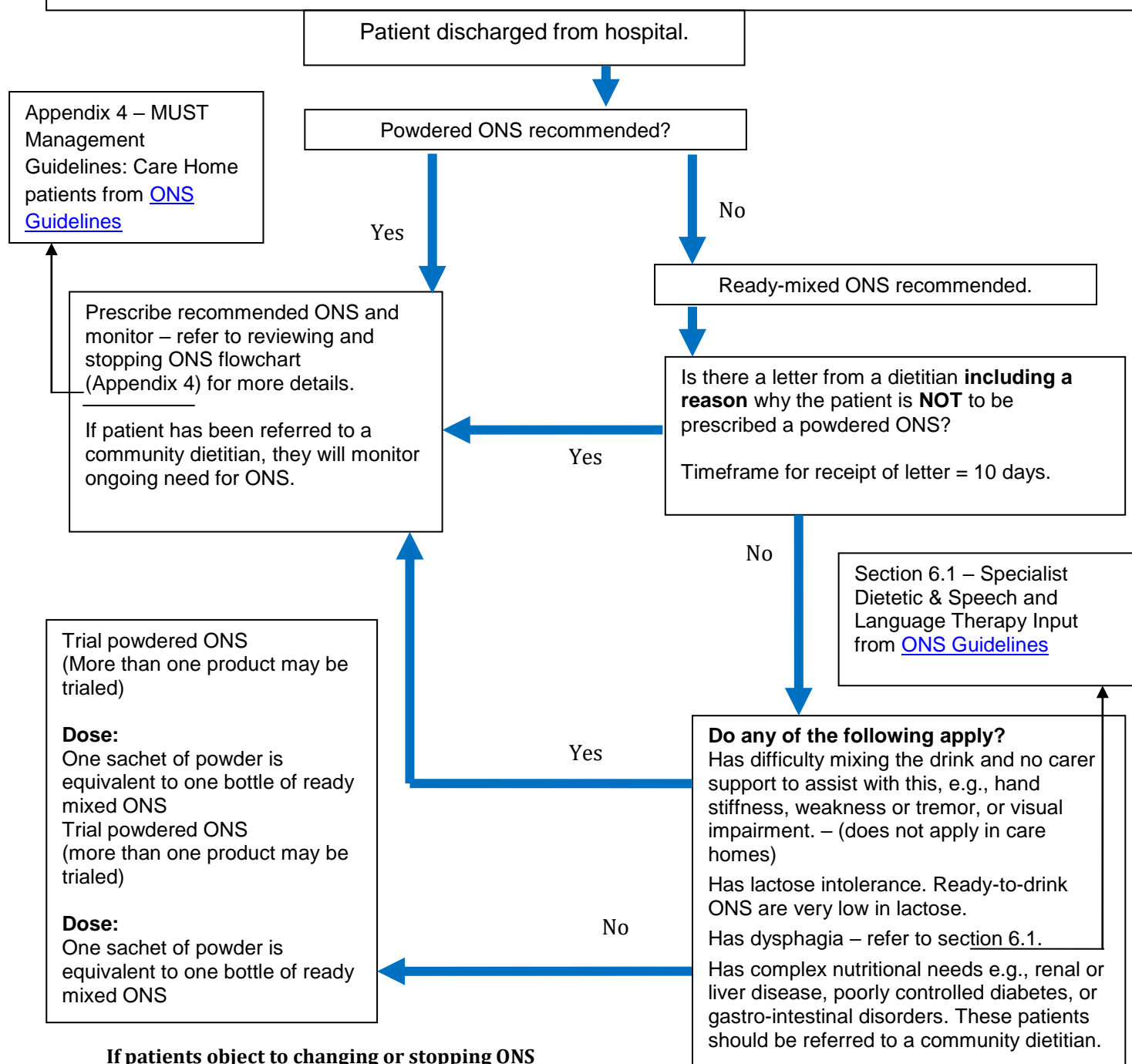
INTERNAL AND EXTERNAL REFERENCES

North East London Guidelines on the Identification, Treatment and Management of Malnutrition in Adults, including the appropriate prescribing of Oral Nutritional Supplements, Version 1.2, July 2025.

NICE. Nutrition support in adults: oral nutrition support, enteral tube feeding and parenteral nutrition (CG32). February 2006.

BAPEN. Managing Malnutrition in Adults. Updated 2021.

Quick Reference 3: Changing ONS after hospital discharge: Taken from [ONS Guidelines](#)



If patients object to changing or stopping ONS

- Explain that these products are usually for short-term use only.
- Powdered ONS may be perceived as inferior to pre-mixed ONS. However, powdered ONS typically contain 15-19 g protein and nearly 400 kcal per drink (when mixed with milk) compared with 12g protein and 300kcal per drink for ready-mixed varieties.

- Explain that prescription is according to set evidence-based criteria. As the patient no longer meets these, the prescriber should not prescribe.