

Vitamin Supplementation in Refeeding Syndrome

Patients with refeeding syndrome can suffer neurological and cardiac problems from thiamine (Vitamin B1) deficiency.

Moderate or High Risk of Refeeding Syndrome

If enteral route available:

1. Administer Thiamine 100mg orally (or crushed and flushed via feeding tube) three times daily for 10 days with the first dose being administered 30 minutes before initiating feeding.
2. Administer Vitamin B Compound Strong 1 tablet 3 times daily (or 5mls Vitamin B Syrup, Vigranon B[®], 3 times daily via feeding tube) for 10 days.
3. Administer 1 Sanatogen A-Z[®] once a day (or 1 Forceval[®] Soluble once daily dissolved in 50mls water via feeding tube) for 10 days.

If enteral route not available, the patient has anorexia nervosa or has chronic alcoholism:

1. Administer intravenous Pabrinex[®] (ampoules 1 and 2 = one pair) once a day 30 minutes before initiating feeding and then once daily for 3 days. If after 3 days it is not possible to revert to oral or enteral route, further supplementation should be discussed with the Nutrition team.

Very High Risk of Refeeding Syndrome

Give intravenous Pabrinex[®] (Ampoules 1 and 2 = one pair) every 8 hours for 2 days and then follow moderate or high risk guidelines.