

8th FRANC Taiwan



掃描或點擊進入報名

Maximizing Nutrition Therapy in Patient Care

🕒 **Aug. 4, 2024** Sun. 09:30 ▶ 17:20

📍 張榮發基金會國際會議中心 1001廳 (臺北市中正區中山南路11號)

Time	Topic	Speaker
09:30-10:00	Registration	
10:00-10:10	Opening Remarks	莊政諺 醫師 臺中榮總

Nutrition therapy: An integral part of surgical care

Chairperson : 王照元 醫師 | 高醫、莊政諺 醫師 | 臺中榮總

Time	Topic	Speaker
10:10-10:50	How to Choose the Optimal Supplemental Parenteral Nutrition in Surgical Care	吳峯旭 醫師 臺中榮總
10:50-11:30	Nutrition in ERAS: A Key to Faster Recovery and Reduced Complications	蔡元耀 醫師 中國附醫
11:30-12:10	Maximizing the Benefits of PN Therapy: The Synergistic Role of Glutamine and Fish Oil	孫麒洄 醫師 林口長庚
12:10-12:30	Panel Discussion	All
12:30-13:30	Lunch	

Challenges in Nutritional Care for Cancer Patients

Chairperson : 周文其 醫師 | 林口長庚、謝佳訓 醫師 | 林口長庚

Time	Topic	Speaker
13:30-14:10	The Impact of Supplemental PN on Cancer Treatment Outcomes and Quality of Life	謝孟哲 醫師 義大癌醫
14:10-14:50	Glutamine's benefits and experience sharing for cancer patient	陳敬左 醫師 臺大新竹
14:50-15:10	Panel Discussion	All
15:10-15:30	Coffee Break	

From theory to therapy: Optimizing Nutrition Intervention in ICU

Chairperson : 陳銘仁 醫師 | 台北馬偕、王鑑瀛 醫師 | 臺北榮總

Time	Topic	Speaker
15:30-16:10	Importance of lipid emulsions: beyond energy provision	陳義展 醫師 基隆長庚
16:10-16:50	Micronutrients: Strengthening the weak link in nutrition therapy	楊明杰 醫師 義大醫院
16:50-17:10	Panel Discussion	All
17:10-17:20	Closing Remarks	王鑑瀛 醫師 臺北榮總

演講摘要及講師基本資料表

(一)演講摘要

主題 (中文及英文)	<p>中文：如何選擇最適合的補充靜脈營養在外科病人?</p> <p>英文：How to Choose the Optimal Supplemental Parenteral Nutrition in Surgical Care?</p>
課程日期/時間	2024/08/04 10:10-10:50
摘要內容	<p>Malnutrition in patients undergoing surgery is common. The incidence of malnutrition in surgical patients has been reported to range from 23–33% depending on type of surgery and nutrition assessment tool used. Malnutrition is commonly seen in surgical patients with an underlying illness such as malignancy, chronic organ failure, and inflammatory bowel disease.</p> <p>Adequate nutritional provision is important for malnutrition patients to improve clinical outcomes. Starting enteral nutrition (EN) as early as possible is recommended and preferred to parenteral nutrition (PN). However, patients who undergo emergency abdominal operations may have alterations in their intra-abdominal environment and gastrointestinal motility leading to limitation in starting an enteral diet. If critically ill patients undergoing surgery who are not eligible for early EN, we could provide early supplemental PN to achieve adequate calorie and protein target to avoid malnutrition impact clinical outcomes.</p>

(二)講師資料表

講師姓名(中文)	吳峯旭	講師姓名(英文)	Wu Feng-Hsu		
最高學歷	學 校：臺北醫學大學				
	科 系：醫學系				
	單位名稱	職稱	教學年資	實務年資	研究年資
現 職	台中榮總一般外科	主治醫師		6	
經 歷	台中榮總重症醫學部重症加護外科	科主任		1	
	台中榮總重症醫學部重症加護外科	主治醫師		3	
	臺中榮總嘉義分院一般外科	主治醫師		1	

	台中榮總一般外科	總醫師		3	
	臺中榮民總醫院外科部	住院醫師		3	
專 長	消化道及肝膽胰腫瘤及外科手術、胃癌、腹腔鏡微創手術、 達文西機器人手臂肝膽胰及消化道手術、疝氣、乳房疾患、 甲狀腺及副甲狀腺手術、一般外科、外傷、重症照護、靜脈 營養				
備 註	教育部部定助理教授(2023/2-迄今)				

演講摘要及講師基本資料表

(一) 演講摘要

主題 (中文及英文)	<p>中文：ERAS 中的營養: 術後加速康復及減少併發症的關鍵</p> <p>英文：Nutrition in ERAS: A Key to Faster Recovery and Reduced Complications</p>
課程日期/時間	2024/08/04 10:50-11:30
摘要內容	<p>The foundation of ERAS is built on the principle that optimal perioperative care is not just about the surgical procedure but encompasses preoperative, intraoperative, and postoperative phases. Nutrition, as an integral part of ERAS, addresses these phases comprehensively. Preoperative nutritional assessment and optimization are the first steps towards ensuring patients enter surgery in the best possible condition. Identifying and correcting nutritional deficiencies, particularly in malnourished patients, can significantly reduce surgical risks and enhance recovery. CRS was the earliest specialty to implement ERAS. Through preoperative nutritional assessment and intervention, malnourished patients are supported with supplemental parenteral nutrition (sPN) and trace elements, enabling them to follow ERAS protocols. This approach accelerates postoperative recovery and reduces complications, providing significant clinical benefits.</p>

(二) 講師資料表

講師姓名(中文)	蔡元耀	講師姓名(英文)	Tsai Yuan-Yao		
最高學歷	學 校：高雄醫學大學				
	科 系：醫學系				
	單位名稱	職稱	教學年資	實務年資	研究年資
現 職	中國醫藥大學附設醫院大腸直腸外科	主治醫師	8	8	8
經 歷	衛生福利部澎湖醫院	主治醫師		2	

專 長	大腸直腸癌手術，發炎性腸道疾病手術				

演講摘要及講師基本資料表

(一)演講摘要

主題 (中文及英文)	中文：如何藉由麩醯胺酸及魚油優化靜脈營養治療 英文：Maximizing the Benefits of PN Therapy: The Synergistic Role of Glutamine and Fish Oil
課程日期/時間	2024/08/04 11:30-12:10
摘要內容	<p>PN therapy provides essential nutrients directly into the bloodstream, bypassing the gastrointestinal tract. While PN is crucial for maintaining nutritional status in patients with compromised gut function, the addition of specialized nutrients can further enhance its efficacy. Glutamine and fish oil are two such nutrients that have demonstrated significant benefits when included in PN regimens.</p> <p>Supplementation with glutamine in PN therapy has been shown to preserve gut barrier function, reduce bacterial translocation, and support immune cell function. Additionally, glutamine serves as a primary fuel source for rapidly proliferating cells, such as enterocytes and lymphocytes, facilitating tissue repair and recovery.</p> <p>The inclusion of fish oil in PN therapy has been associated with reduced inflammation, improved lipid profiles, and enhanced immune response. Omega-3 fatty acids modulate the production of pro-inflammatory cytokines and eicosanoids, shifting the balance towards a more anti-inflammatory state. This modulation is particularly beneficial in critically ill patients, where excessive inflammation can lead to complications such as sepsis and organ dysfunction.</p> <p>Clinical studies have provided robust evidence supporting the inclusion of glutamine and fish oil in PN regimens. Patients receiving PN supplemented with these nutrients have shown improved clinical outcomes, including reduced length of hospital stay, lower infection rates, and decreased incidence of organ failure. Moreover, the synergistic effects of glutamine and fish oil have been linked to enhanced overall survival in critically ill populations.</p>

(二)講師資料表

講師姓名(中文)	孫麒洵	講師姓名(英文)	Sun Ci-Yuan
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最高學歷	學 校：高雄醫學大學				
	科 系：後醫系				
	單位名稱	職稱	教學年資	實務年資	研究年資
現 職	林口長庚醫院	主治醫師			
專 長	大腸直腸外科				

演講摘要及講師基本資料表

(一) 演講摘要

主題 (中文及英文)	<p>中文：及時地補充靜脈營養對於癌症病患的臨床益處</p> <p>英文：The Impact of Supplemental PN on Cancer Treatment Outcomes and Quality of Life</p>
課程日期/時間	2024/8/4 13:10 - 14:10
摘要內容	<p>Malnutrition worsens health-related quality of life (HRQoL) and the prognosis of patients with advanced cancer. Cachexia in advanced cancer is a multifactorial syndrome that associates weight loss, sarcopenia and loss of fat tissue. Nutritional guidelines for patients with advanced cancer recommend a multimodal management, including increasing food intake, promoting physical activity, and fighting against SIRS, alongside anticancer treatment. if oral food intake is inadequate despite counselling and oral nutritional support, supplemental enteral nutrition or parenteral nutrition (PN) may be implemented. PN may be more effective for more rapidly increasing calorie intake, with fewer adverse events except for infectious complications. The Overall Survival was distinctively decreased in the malnutrition group, especially for those with incomplete CCRT. Continually 7-day sPN can improves body composition and muscle strength in cancer patients at nutritional risk. sPN may provide important clinical and quality of life benefits to patients with cancer.</p>

(二) 講師資料表

講師姓名(中文)	謝孟哲	講師姓名(英文)	Meng-Che, Hsieh		
最高學歷	學 校：中山醫學大學				
	科 系：醫學系				
	單位名稱	職稱	教學年資	實務年資	研究年資
現 職	義大癌治療醫院	腫瘤科主任	3	4	4
經 歷	高雄長庚醫院	血液腫瘤科主治醫師	0	4	4

專 長	固態腫瘤治療, 癌症營養, 安寧緩和治療				

演講摘要及講師基本資料表

(一)演講摘要

主題 (中文及英文)	<p>中文：Gltamine 對於癌症病患的臨床益處及台大經驗分享</p> <p>英文：Glutamine's benefits and experience sharing for cancer patient</p>
課程日期/時間	2024/08/04 14:10-14:50
摘要內容	<p>In hypermetabolic situations, glutamine is intensively used by rapidly dividing cells such as enterocytes, lymphocytes, and fibroblasts as nitrogen source and/ or alternative energy fuel.</p> <p>In the great majority of these clinical studies, glutamine supplementation in cancer patients improves host metabolism and clinical situation without increasing tumor growth. Potential mechanisms of glutamine effects include maintenance of mucosal integrity, improved immune competence, inhibition of cell proliferation, increased apoptosis rate, increased synthesis of glutathione, induction of heat shock protein synthesis, and increased synthesis of glucagon's-like peptides. appropriate exogenous glutamine supply is safe and can beneficially contribute to diminish risks of high-dose chemotherapy and radiation and help patients to complete CCRT treatment.</p>

(二)講師資料表

講師姓名(中文)	陳敬左	講師姓名(英文)	Chen Jing Zuo		
最高學歷	學 校：台北醫學大學				
	科 系：醫學系				
	單位名稱	職稱	教學年資	實務年資	研究年資
現 職	臺大醫院 新竹分院	主治醫師			
經 歷	台灣大學醫學院附設醫院腫瘤醫學部	住院醫師			

專 長	<ol style="list-style-type: none">1.一般腫瘤診斷與治療 (化學治療/標靶/免疫治療)2.乳癌3.肝膽/食道/胃/腸癌4.肺癌5.頭頸癌6.其他癌症7.腫瘤藥物臨床試驗
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演講摘要及講師基本資料表

(一) 演講摘要

主題 (中文及英文)	中文: 脂肪乳劑於重症患者營養支持的重要性 英文: Importance of lipid emulsions: beyond energy provision
課程日期/時間	2024/08/04 15:30-16:10
摘要內容	<p>Energy deficit is a common and serious problem in intensive care units and is associated with increased rates of complications, length of stay, and mortality. Parenteral nutrition (PN), either alone or in combination with enteral nutrition, can improve nutrient delivery to critically ill patients. Lipids provide a key source of calories within PN formulations, preventing or correcting energy deficits and improving outcomes.</p> <p>Early data suggest use of a mixed lipid emulsion (LE) with a soybean oil reduction strategy in parenteral nutrition (PN) may improve clinical outcomes. Duke University Hospital made a full switch to a Soybean oil/MCT/Olive/Fish Oil lipid (4-OLE) from pure soybean oil-based LE in May 2017. Since 4-OLE has limited evidence related to its effects on clinical outcome parameters in US hospitals, evidence for clinical benefits of switching to 4-OLE is needed.</p> <p>4-OLE was successfully implemented and reduced soybean oil LE exposure in a large academic hospital setting. The introduction of 4-OLE was associated with reduced LOS, UTI rates, and mitigated hepatic dysfunction in critically ill patients. Overall, these findings prove a switch to a soybean oil-LE sparing strategy using 4-OLE is feasible and safe and is associated with improved clinical outcomes in adult PN patients.</p>

(二) 講師資料表

講師姓名(中文)	陳義展	講師姓名(英文)	YiChan Chen		
最高學歷	學 校：長庚大學				
	科 系：醫學系				
	單位名稱	職稱	教學年資	實務年資	研究年資
現 職	一般外科	主治醫師	9	11	3
經 歷	外科	加護病房病房主任		6	

	教學部	臨床技能中心 主任			
專 長	原發肝惡性腫瘤 轉移性肝臟腫瘤				

演講摘要及講師基本資料表

(一) 演講摘要

主題 (中文及英文)	<p>中文：微小卻重要的微量元素-從 ICU 指南到臨床實踐</p> <p>英文：Micronutrients: Strengthening the weak link in nutrition therapy</p>
課程日期/時間	2023/07/09 13:30-14:10
摘要內容	<p>Patients who are critically ill experience a complex systemic inflammatory response syndrome. As part of the inflammatory response, ROS, RNS, and both proinflammatory and anti-inflammatory cytokines, such as tumor necrosis factor-alpha (TNF-α), interleukin-1-beta (IL-1β), interleukin-6 (IL-6), and interleukin-8 (IL-8) are released.</p> <p>Micronutrients, such as vitamins and trace elements, are essential for maintaining the physiologic functions of the mitochondria, for example, the provision of cellular energy through the production of adenosine triphosphate (ATP) and the regulation of cell signaling, differentiation, and death. On the one hand, trace elements such as copper, iron, manganese, selenium, and zinc act as important cofactors of antioxidative enzymes, for example, catalase, glutathione peroxidase (GPx), and superoxide dismutase (SOD). Micronutrients represent essential antioxidative and anti-inflammatory components for maintaining the inflammatory and redox homeostasis in health and disease.</p> <p>Especially during critical illness, micronutrient deficiency and its association with deleterious outcomes have been observed manifold, indicating a key role in the metabolic and immunologic stress response. Based on current evidence, restoring the balance between reductants and oxidants early during the ICU stay might be beneficial to improve overall patient outcome, whereas strong evidence for pharmacotherapy with excess loading with either single antioxidative compounds or antioxidant cocktails is still missing, even though data on vitamin C still lend some promise.</p>

(二) 講師資料表

講師姓名(中文)	楊明杰	講師姓名(英文)	Ming-chieh Yang
最高學歷	學 校：國立中山大學		

	科 系：生物科學系				
	單位名稱	職稱	教學年資	實務年資	研究年資
現 職	義大癌治療醫院	主治醫師	3年十個月	三年十個月	
經 歷	高雄榮民總醫院	重症加護外科 主治醫師	1年1個月	九年八個月	
	美國約翰霍普金斯	研究員			一年四個月
	高雄榮民總醫院	外科、一般外		六年兩個月	
	蘇澳榮民醫院、嘉 義榮民醫院	住院醫師		兩年	
專 長	消化系外科、重症醫學				