Dialyze Direct Renal Nutrition

Providing Optimal Nutrition to our Patients

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Nutrition Goals

Quality of Life

Deter Malnutrition

Deter Hyperkalemia

Deter Renal Osteodystrophy

Deter Fluid Overload, Hypertension and Cardiac Failure

Quality of Life

- Good familiar food improves quality of life
- Variety
- Flavor
- Texture



Food they can chew and swallow safely

Food they can feed themselves

Deter Malnutrition

Provide adequate calories and protein by providing food they like.

Supplement with Nepro if necessary

Question cause of poor appetite

Medication side effects?

Other medical conditions?

Depression?

Decreased taste, smell?

Limited activity/muscle loss



How to Measure Malnutrition?

- Albumin- better indicator for inflammation and fluid overload than of nutrition status.
- Physical Assessment-Feel for muscle wasting
 - A wasted temporal muscle losses rigidity
 - Patient Simulation: Putting Malnutrition Screening, Assessment,
 Diagnosis, and Intervention into Practice; http://anhi.org/courses/my-courses
- Measure strength with hand dynamometer which is a better measurement than albumin.
- Measure food intake and Weight Loss

Liberalize Diet

- Allow Whole Grains
 - Good for GI health and may decrease inflammation
 - Limited phosphorus absorption
 - Adds variety to diet



How about Beans?

- Beans can easily be incorporated into the renal diet along with rice or pasta.
- It provides fiber and is easy to chew
- It's a familiar food to many ethnic groups
- Monitor potassium levels
- Keep portions small



And Nuts?

- Nuts are OK but may be difficult for patients to chew or swallow.
- Limited phosphorus absorption
- Peanut Butter is fine.
- Some are high in potassium



What should be limited

- High Potassium Foods
 - Bananas, orange juice, tomato sauce, avocado, dark leafy greens. Potatoes, prunes and winter squash.
- Dairy Products
 - Highly absorbable phosphorus, also high in potassium and often high in salt.
- Salt







Salt

- Salt makes you thirsty and thirst leads to fluid overload in dialysis patients.
- Fluid overload increases blood pressure and leads to heart failure.
- Fluid overload makes dialysis more difficult, leads to cramping and hypotension episodes while on dialysis.

Teach Staff and Family to Read Labels

Sodium-to-Calorie Ratio



Example:

Sodium140 Calories ... 100

Ratio = 1.4

Ratio Key: 1.0 or lower - good 2.0 or higher - bad