IMPACT OF BALANCING GRAMS OF QUALITY PROTEIN INTAKE ON NUTRITIONAL STATUS AND QUALITY OF LIFE IN CKD PATIENTS


1Department of Nephrology, Dietetics, Postgraduate Institute of Medical Education and Research, Chandigarh, India
2Department of Nephrology, Gastroenterology, Postgraduate Institute of Medical Education and Research, Chandigarh, India
3Department of Nephrology, Biochemistry, Postgraduate Institute of Medical Education and Research, Chandigarh, India
4Department of Nephrology, Pediatrics, Postgraduate Institute of Medical Education and Research, Chandigarh, India
5Department of Nephrology, Diabetes, Postgraduate Institute of Medical Education and Research, Chandigarh, India
6Department of Nephrology, Biochemistry, Postgraduate Institute of Medical Education and Research, Chandigarh, India

Abstract: The 16th International Congress on Nutrition and Metabolism in Renal Disease 2012

Objective: To analyze effect of optimizing the protein quality intake [high biological value (HBV), net protein utilization (NPU)] or protein efficiency ratio (PER) of food article] on uremic toxins, nutritional status and quality of life in CKD patients consuming 0.6-0.8 g/kg body wt. protein; 80% of which is from poor quality.

Method: 145 predialysis CKD patients were enrolled who completed a food frequency questionnaire, quality of life (QOL) performa, nutritional status evaluation (dietary intake, anthropometry, serum albumin, total protein) before and after diet counseling (≥50% HBV protein [from casein and egg base]); energy 35-40 Kcal/kg body wt.).

Results: Creatinine reduced significantly (p < 0.001), non significant change in blood urea GFR improved (p = 0.001); nutritional intake increased; good quality proteins intake ratio (p < 0.001), energy (p < 0.001) BMI elevated (p > 0.01) and perception of QOL improved after diet counseling.

Conclusion: Judicious planning of quality protein intake within restricted quantity along with calorie optimization is critical to reduce protein waste products. Therefore, proper timely diet counseling to combat ignorance & impart awareness to CKD patients is of utmost importance.

http://dx.doi.org/10.1016/j.krcp.2012.04.390

EFFECTS OF L-CARNITINE SUPPLEMENT ON PLASMA COAGULATION AND ANTICOAGULATION FACTORS IN HEMODIALYSIS PATIENTS

Fariba Hakekhozhaei, Hadi Tabibi, Minoo Ahmadinejad

1Faculty of Nutrition Sciences and Food Technology, Shahid Beheshti University of Medical Sciences, Tehran, Iran
2Department of Clinical Nutrition & Dietetics, Faculty of Nutrition Sciences and Food Technology, National Research Shahid Beheshti University of Medical Sciences, Tehran, Iran
3Faculty of Nutrition Sciences and Food Technology, Shahid Beheshti University of Medical Sciences, Islamic Republic of Iran
4Department of Clinical Nutrition & Dietetics, Faculty of Nutrition Sciences and Food Technology, National Research Shahid Beheshti University of Medical Sciences, Tehran, Iran
5Department of Clinical Nutrition & Dietetics, Faculty of Nutrition Sciences and Food Technology, National Research Shahid Beheshti University of Medical Sciences, Tehran, Islamic Republic of Iran

Background: Hypercoagulability is an important risk factor for thrombosis and its complications in hemodialysis patients. This study was designed to investigate the effects of L-carnitine supplement on plasma coagulation and anticoagulation factors in hemodialysis patients.

Methods: Thirty-six hemodialysis patients were randomly assigned to either a carnitine or a placebo group. Patients in the carnitine group received 1000 mg/day oral L-carnitine for 12 weeks, whereas patients in the placebo group received a corresponding placebo. At baseline and the end of week 12 compared with baseline. The reductions were significant compared with the placebo group (p < 0.05). No significant differences were observed between the two groups with regard to mean changes of the activity of plasma protein C, coagulation factors V, VII, IX, and serum PAI-1 to tPA ratio.

Conclusion: L-Carnitine supplement reduces serum CRP, a marker of systemic inflammation, and plasma fibrinogen, an inflammation-related coagulation factor, in hemodialysis patients. Therefore, L-carnitine may play an effective role in preventing cardiovascular diseases in these patients.

http://dx.doi.org/10.1016/j.krcp.2012.04.391