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NUTRITION CARE PROCESS AND NUTRITION STATUS WITHIN END STAGE RENAL DISEASE UNDERGOING HEMODIALYSIS PATIENT

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Objectives : The prevalence of under nourished in the patient of end stage renal failure undergoing hemodialysis is high. In 1995 Cipto Mangunkusumo Hospital reported that 53.2 % of 111 patients were undernourished and KDOQI reported the prevalence of malnutrition in dialysis patient is 50 – 70%. This study was conducted in renal unit, division of renal and hypertension Cipto Mangunkusumo Hospital between July 2016 and January 2017. The objective of this study is to determine nutrition status first assessment and re assessment after nutrition care process and nutritional counseling & education.

Methods : At first assessment dietitian provide to give nutrition diagnosis, nutrition intervention/nutrition therapy and collaboration with nephrologist. Re assessment is delivered 6 months later with monitoring and evaluation. Nutrition status was determined by subjective global assessment (SGA). Nutrition counseling for patient is given by face to face using flyer contains the recommendation of recorded individual meal. The sample is 143 patients of end stage renal failure who undergoing hemodialysis. Consist of 91 male and 51 female within the ages of sample under 60 years is 83 patients and above 60 years is 61 patients.

Results : This study showed by using SGA in first nutrition assesment on July 2016 84% of patients were well nourished (SGA A), 16% of patients were under nourished (SGA B) and there is no patient with poor nourished (SGA C). After nutrition intervention and education reasasement 6 months later on January 2017, 82% of patients were well nourished (decreased by 2%) and there is slightly increase in under nourised patients 18% (increased by 2%). In body weight record of SGA is found that after 6 months of monitoring and evaluation patient's body weight changed by 0.2 ± 2.7 kg. Paired t – test showed there is no significan difference in nutrition status using SGA between July and January ($p>0.05$). Dyalysis patient has higer risk of catabolic factor, among this population found comorbidities with malignancy and hepatic failure.

Conclusions : Nutrition status is related to nutrition care process and intervention by ompitimizing nutrition status affected during dialysis treatment

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but many factor is also influenced. It is imperative for health provider and dietitian to maintain patients not only in well nourished patient but also in under nourished by giving adequate of consistent education in nutrition care at the beginning dialysis therapy; and periodically monitoring of nutrition status and nutrition counseling. It is also suggested to conduct the same study with large number of sample on monitoring and evaluation nutrition status of dialysis patient in longer time.

Keywords : nutrition status, Subjective Global Assesmen , nutrition care process, dialysis