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Comparison between SGA (Subjective Global Assessment) and MIS (Malnutrition Inflammation Score) in Chronic Kidney Disease on Haemodialysis at Cipto Mangunkusumo General Hospital 2018

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Objectives: To assess and find out the comparison between SGA and MIS screening of Malnutrition on Haemodialysis, also determining ideal screening tools for CKD on Haemodialysis

Methods: Study of screening tools was organized as cross sectional study in 2018, using SGA tool and MIS tool. A sample 107 adults with CKD on HD were analyzed during June – July consists of 56 male and 51 female. SGA categorized with; A well nourished, B moderate malnutrition, C severe malnutrition, however MIS is scored by total points; 0-2 mild malnutrition, 3-5 moderate malnutrition, ≥ 9 severe malnutrition.

Results: SGA test result 90 patients are well nourished (84,1%), moderate malnutrition 11 patients (10,3%) and severe malnutrition 6 patients (5.6%). The result is under Indonesian prevalence of malnutrition that is 50 – 65%. However MIS data showed the opposite, total well nourished or mild malnutrition are 69 patients (64.5%), moderate malnutrition 27 patients (25.2%) and severe malnutrition 11 patients (10.3%). Average energy requirement is 1563 ± 560 Kcal/day, both of well nourished patients in SGA and MIS screening is adequate 83% (1297 ± 323 kcal/day) in severe malnutrition inadequate (55%; 862 ± 221 kcal/day). Protein average requirements is 64 ± 9.3 grams/day, both well nourished patients using SGA and MIS screening protein intake is sufficient 79% (50 ± 8.2 gram/day), however in severe malnutrition only 45% (29 ± 6.2 gram/day). Compared energy protein intake to screening tools showed only MIS score is influenced by energy intake ($p < 0.048$).

Conclusions: Nutrition screening tools for chronic kidney disease on haemodialysis is take part in nutrition status determination and malnutrition; it is needed to be practiced in dialysis center to overcome problem related nutrition and malnutrition preformed by dietitian collaborating with physican. Both of SGA and MIS have comprehensive evaluation; however MIS screening is supported with biochemical data such as albumin and TIBC (total iron binding capacity) that effected inflammation and reflected nutrition status.