



Shaping Tomorrow's Nephrology: Insight-Driven Kidney Care

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## **Enteral Plant-Dominant Low Protein Diet (PLADO) Implementation in Chronic Kidney Disease (CKD) Stadium 4 Post Coronary Artery Bypass Graft (CABG) : A Case Study**

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**Case Study :** Introduction: Plant-dominant low protein diet is low protein dietary pattern with more than 50% protein made from plants. This diet helps slow down kidney failure. Objective: This study aim to optimize nutrition intake in patient undergo CABG surgery with PLADO diet intervention. Methods: A case study was conducted on a 75-year-old man with good nutritional status in geriatric patients (BMI 30 kg/m<sup>2</sup>) with Coronary Artery Disease, Diabetes Mellitus, CKD Grade 4, and Hypertension comorbidities. Post surgery, dietary intake including energy, protein, fat, carbohydrate, potassium, and kidney function, were monitored and evaluated until completion of treatment. Patient was given enteral Plado diet modified from mungbean and soybean. Results: Preoperative laboratory testing showed impaired renal function (CKD 4) and hyperkalemia. Postoperative dietary requirements were energy 2100 kcal (35 kcal/kg ideal body weight), 50 grams of protein (0.8 grams/kg ideal body weight), 58 grams of fat, 344 grams of carbohydrate, and 2800 mg of potassium. Dietary intervention was administered in stages, starting from 30% energy requirement with enteral PLADO diet. The patient had neurogenic dysphagia, so the diet was administered via nasogastric tube (NGT) until completion of treatment. Dietary support was gradually increased until the 11th day of treatment after CABG. Energy intake reached 86% requirement, protein 0.87 grams/kg ideal body weight, carbohydrate 94% requirement, potassium 99% requirement, with normal blood sugar, CKD 3b (improve), and blood potassium decreased. The patient was given nutritional counselling in the form of a Low Protein Cardiac Diet 2100 kcal of energy and 50 grams of protein. Liquid Diet consisted of 3x300 mL, 3x250 mL via NGT. Conclusion: During 11 days of treatment, patient receives enteral PLADO diet. It is proven to meet dietary requirement and maintains kidney function. The patient discharge without any kidney replacement therapy and continuing intake via NGT.