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Nutritional Assessment on Pediatric Hemodialysis Outpatients in Indonesia's Tertiary Hospital

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Objectives: Malnutrition is fairly serious problem in the world. Malnutrition is common found in Chronic Kidney Disease (CKD) patients. Early identification patients who are malnourished is very crucial to start nutritional support or intervention and follow up. Nutritional assessment in children with CKD undergoing hemodialysis (HD) is challenging because there were no single reference tools. Regarding the limitation, we want to investigate nutritional status and malnutrition in children undergoing HD due to end stage renal failure (ESRF) with anthropometric parameter, Subjective Global Nutritional Assessment (SGNA) re-scoring and food intake.

Methods: This study was a cross-sectional study which is conducted in pediatric hemodialysis outpatient in September 2022 to Januari 2023. The patients and caregiver have reference to a nutritional education from dietitian. Total 30 children with ESRF undergoing HD were pre-school, school-age, and adolescent. Dietary assessment with food recall 24-h and food record 3x24-h.

Results: Based on population there were 62% boys and 38% girls which is 3% pre-school, 40% school-age, and 57% adolescent. The patient nutritional status showed 67% wasted and 77% stunted. Malnutrition status by SGNA re-scoring showed 60% mild and 27% moderate malnourished. Macronutrient intake such as energy, protein, fat, and carbohydrate mean were increased ($p < 0.05$), micronutrient intake such as potassium, and phosphate were also increased ($p < 0.05$), however mean weight of height value increment not statistically significant ($p > 0.05$), mean SGNA was decreased ($p > 0.05$), sodium and calcium intake increment ($p > 0.05$).

Conclusions: This study showed that nutritional status evaluation using food intake instrument in our patient have statistically significant result, while SGNA re-scoring and anthropometric parameter did not show a statistically significant. We recommend further studies to evaluate other objective parameters to assess both nutritional and malnutritional status for CKD pediatric patients.