ABSTRACT

Renal Dietetics Management in the End Stage Renal Dialysis Population in Trinidad and Tobago

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This baseline study is the first to describe relationships between macronutrient intake and indicators of nutritional status in the dialysis population in Trinidad and Tobago. The potassium content of local fruits was investigated in connection with nutritional counselling.

Methods
Following Ethics committee approval and informed consent, 199 maintenance patients were recruited. Demographic, clinical and other pertinent information was collected through facility records, patient interviews and measurements (both anthropometric and blood analyses). The potassium content of selected local fruits and gala apples was established by Jenway PFP7 flame photometer, after extraction using the Rowan, Zajicek and Clabrese (1982) process. Data was analysed using SPSS Statistics 17.0 The level of significance for this study was set at p=0.05

Conclusion
Novel new data was provided on the Trinidad and Tobago maintenance dialysis population. A typical patient was likely to be in the 45 – 64 age range, hypertensive, sedentary and unemployed, with a poor nutritional biochemical profile and grossly inadequate energy and macronutrient intake.

There is a clear indication for early and regular nutritional assessment of dialysis patients to ensure all persons initiating dialysis and those on dialysis at risk of malnutrition, are identified for counselling and dietary management by a Dietitian. Also, there is the need for the reassessment of local guidelines on the dietary restriction for potassium, as well as further analyses of other nutrients of significance in ‘locally’ grown foods especially since it was found that the potassium content of fruits grown in Trinidad is variable, but approximately half of the fruits assayed (mango, pineapple, portugal and pommecythere) had comparable potassium content to that of the Gala apple routinely recommended.

Keywords: Maintenance dialysis, nutrition, dietary management, Trinidad and Tobago.