

DOES DIALYSING IN THE AFTERNOON CONTRIBUTE TO MALNUTRITION IN HAEMODIALYSIS PATIENTS?

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PROBLEM:- Malnutrition is a recognised problem in haemodialysis patients. The causes of malnutrition in this population are varied and can be related to clinical, psychological, treatment or socio-economic factors. Identifying risk factors for malnutrition is essential in preventing and treating the problem effectively.

PURPOSE:- Team discussion on the issue of providing food to patients on the renal unit led us to question whether attending for dialysis, on particular days and at particular times, was a potential risk factor for malnutrition in a maintenance haemodialysis population.

DESIGN:- 66 patients at the main dialysis unit and 18 at the satellite unit were asked to complete a questionnaire. The questionnaire was designed to examine whether patients ate differently on dialysis and non dialysis days and the factors that may be contributing to this difference, such as transport arrangements, time of dialysis, arrangements for food provision at home and poor appetite. The renal dietitians subjectively assessed nutritional status on all patients.

FINDINGS:- 50 patients from the main unit (MU) and 14 from the satellite unit (SU) returned completed questionnaires. 43% of SU patients reported a variation in meal pattern and intake on dialysis days (DD) compared to 74% of MU patients. 42% of MU patients missed at least one meal on DD and of these 43% were assessed as malnourished. MU patients spent an average of 1 hour longer away from home on DD than SU patients. Older patients and patients attending dialysis on the afternoon shift were more likely to miss meals on DD. Timing of transport was a common reason for missing meals on DD.

CONCLUSION:- Non clinical factors such as timing of dialysis, waiting for transport and long hours away from home on dialysis days can have a significant impact on the food intake and nutritional status of haemodialysis patients, particularly those who are elderly and have little support with meal provision at home.

RELEVANCE:- Identifying risk factors for malnutrition is the first step in prevention and treatment. Non clinical risk factors should be included in nutrition screening and assessment. The whole renal team should be involved in providing guidelines on help with catering for patients at home or provision of food on the renal unit for those assessed as at risk.