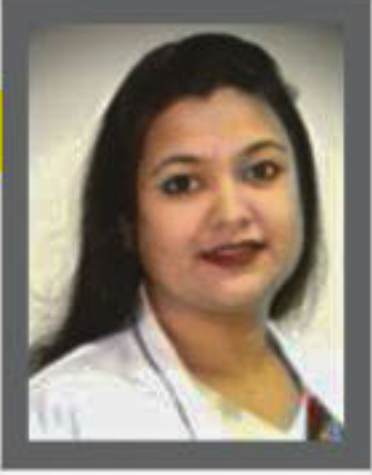


A NOTE ON NUTRITION

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Effect of diet on a diseased kidney

When you have chronic kidney disease, diet is an important part of your treatment plan. Dietary treatment sometimes can be extremely complicated with coexisting conditions like diabetes and may change over time depending on the functional status of the kidney. However, a proper diet plan recommended by a dietician or kidney specialist can help the patient manage the condition better and lead a better quality life.

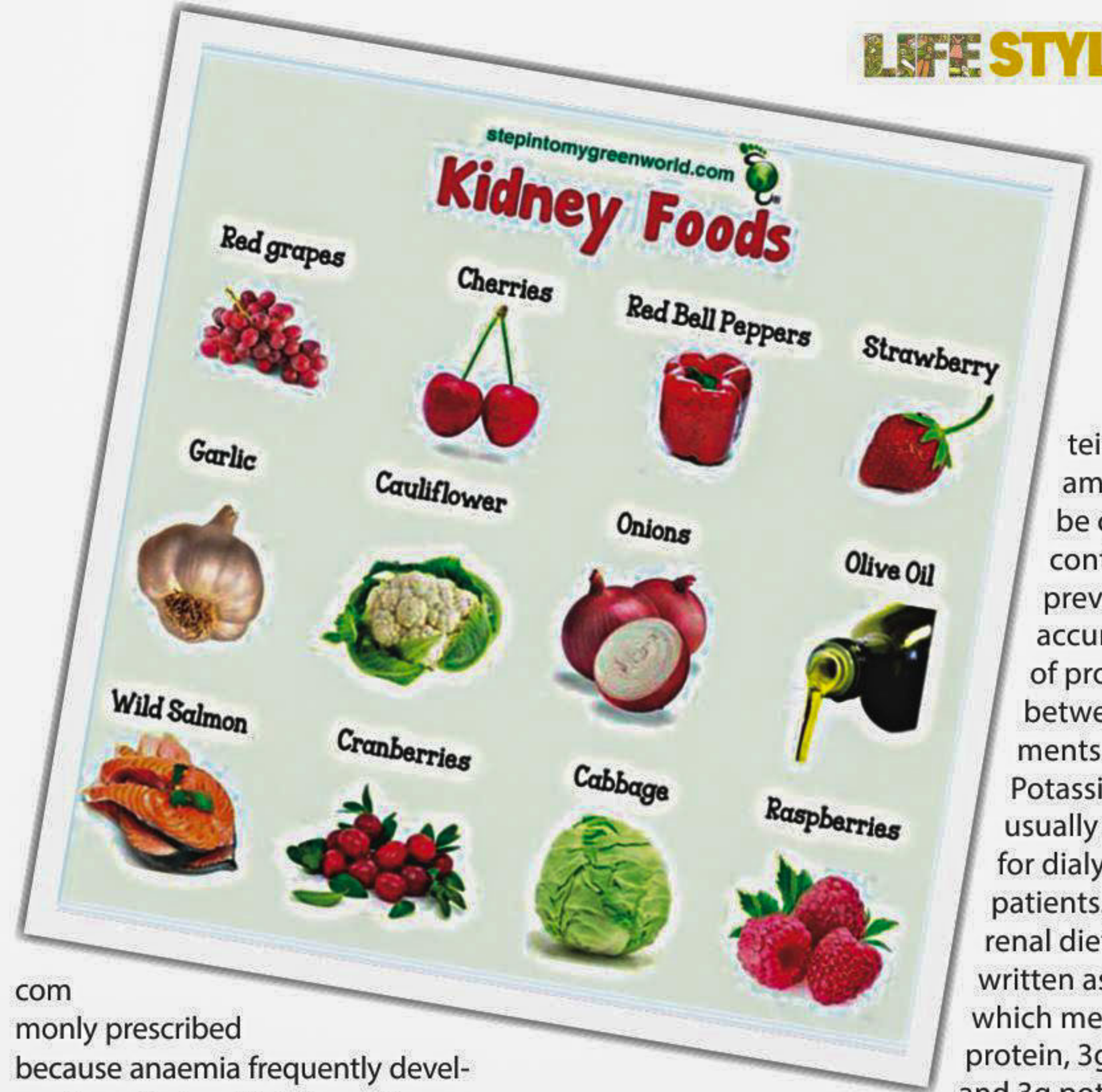
Diet for kidney/renal disease is intended to reduce the amount of excretory workload by the kidneys and help them in maintaining fluid, acid-base and electrolyte balance. It is essential that these patients receive sufficient calories unless they are overweight. Energy requirements should be fulfilled by carbohydrate and fat. The fats should be unsaturated (good fat) to prevent hyperlipidaemia (high level of lipid/fat). Most frequently, protein is restricted as it increases the amount of nitrogen waste which the kidney must handle.

Restriction of sodium or salt intake is ordered if there is edema (swelling in the leg) and hypertension (high blood pressure). Foods like potato, tomato, dates, mango, beet, carrot, spinach, pumpkin, citrus fruits, banana and dry fruits contain potassium and hence these may be restricted for some patients because there is high level of potassium in end stage renal disease (ESRD).

Excess potassium can cause cardiac arrest. One precaution that applies here is that patients with ESRD should not use salt substitute to avoid sodium because the sodium in these products are replaced with potassium.

High phosphorus found in protein rich food such as dairy products, meat, legumes, nut and seeds as well as whole grain is another mineral which needs to be limited.

Patients with kidney disease often have an increased need for Calcium, vitamins B, C and D, and supplements are often given. Iron is



commonly prescribed because anaemia frequently develops in patients with kidney disease.

Fluid intake is regulated after monitoring the fluid status by regularly checking the weight and comparing it to the weight immediately following a dialysis session.

DIET DURING DIALYSIS

Dialysis patients may need additional pro-

tein, but the amount must be carefully controlled to prevent the accumulation of protein waste between treatments.

Potassium is usually restricted for dialysis patients. A typical renal diet could be written as "80-3-3" which means 80g protein, 3g sodium and 3g potassium a day. Usually a diet

contains 3g of sodium, which is the equivalent of a no-added-salt diet. Sodium and salt requirement could increase with perspiration, vomiting, fever and diarrhoea.

Photo: Collected



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