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D - 20 - Nutritional Status of Renal Transplant Patients at the University Hospital Onofre Lopes (HUOL/UFRN)

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INTRODUCTION: Kidney transplantation is the treatment of choice for end-stage renal disease, exceeding dialysis in terms of survival and quality of life. Kidney recipients are affected by changes in nutritional status, and these changes are associated with increased risk of complications after transplantation. OBJECTIVES: Evaluate the anthropometric and biochemical nutritional status of immediate renal post-transplant patients at the University Hospital Onofre Lopes (HUOL). MATERIALS AND METHODS: Descriptive study was conducted from September 2015 to February 2016, with 10 patients treated at the nephrology clinic of HUOL in Natal/RN, Brazil, renal transplant reference center of Rio Grande do Norte (RN). Data were collected at 15 days after transplantation. To assess the nutritional status were used Body Mass Index (BMI), classified according to the WHO (1995) for adults and Lipschitz (1994) for the elderly; and serum albumin concentrations, according with Waitzberg (2006). DISCUSSION AND RESULTS: We included 10 patients with a mean age of 40.7 ± 12.3 years, most were male (70%) of brown colored / mulatto (80%) and who received deceased donor kidney grafts (80%). The etiology of most frequent stage renal disease was hypertension (64.3%) followed by glomerulonephritis (28.6%) and pyelonephritis (7.1%). Regarding nutritional status, these patients had BMI of 23.9 ± 4.3 kg/m². 70% with adequate weight and 30% overweight. Serum albumin concentrations were 3.9 ± 0.3 g/dL, and only 10% of patients had nutritional risk according to this parameter. CONCLUSION: The most kidney recipients evaluated in this study had normal BMI and serum albumin, however, overweight, obesity and malnutrition are common problems after renal transplantation, and these changes in nutritional status can lead to increased morbidity and mortality in this period. Thus, the nutritional assessment of kidney recipients is essential to plan nutritional interventions and improve the quality of life of this population.

Keywords: Renal transplant, End-stage renal disease, Nutritional assessment

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