American College of Physicians Internal Medicine Meeting

Best dietary practices for patients with CKD

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 PHILADELPHIA — A plant-based diet is an important factor in slowing the progression of chronic kidney disease and improving symptoms, according to a presentation at the ACP Internal Medicine Meeting.

Many physicians feel insecure and uncomfortable in giving advice about nutrition because most were not taught it in medical school, Marijane Hynes, MD, clinical professor of medicine at The George Washington University Medical Faculty Associates, said during her presentation.

 “We have no problem telling someone to stop smoking, but ... we don’t tell our patients to eat a vegetable at lunch and dinner and these are very simple things we can do” to improve their quality of life, especially those with a chronic condition, such as CKD, she said.

A healthy diet yields several benefits in patients with CKD, including reduced mortality, so it is important for physicians to ask their patients about their diet histories and counsel them on good nutritional habits, she said.

Plant-based diets, such as the Mediterranean and DASH diets, that are higher in fruits and vegetables and limit processed foods, are the most beneficial for CKD, she said. Diets rich in vegetable proteins, rather than animal proteins, improve acidosis and slow nephropathy in patients with CKD and poor renal function, according to Hynes. The typical Western diet that is high in animal protein and cereal grains, but low in fresh fruits and vegetables increases the high net endogenous acid production and workload for each individual nephron, she said.

“Vegan diets are the newest trend coming down the pipe in terms of renal studies,” Hynes said.

Evidence has shown that low protein vegan diets are associated with survival equivalent to dialysis but at a much lower cost, she said. A total of 0.8 g/kg of protein is recommended for adults with CKD, she said.

Physicians should encourage patients with CKD to avoid or limit highly processed foods, phosphorous, fat, beer and spirits, she said.

Hynes also noted that drinking two or more dark colas a day is associated with CKD and increased intake of fructose is associated with increased uric acid, which is a potential risk factor for CKD.

Consuming high amounts of water, enough to produce 3 to 4 liters of urine a day, may slow the progression of early CKD, polycystic kidney disease and/or recurrent kidney stones, she said.

“The best diet is the one your patient will follow that is vegetable based,” Hynes said. “Try not to be religious about counseling patients about diet, they really get a little tough about this.” – by Alaina Tedesco

Reference:

Hynes M. Nutrition and diet for the internist: 10 things you need to know so you can teach your patients. Presented at: ACP Internal Medicine Annual Meeting. April 11-13, 2019; Philadelphia.

Disclosure: Hynes reports no relevant financial disclosures.