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Treatment of chronic kidney disease patients with ketoanalogue supplemented low protein diet and ketonanalogue supplemented very low protein diet

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Introduction: A low protein diet (0.6 G/Kg BW) and a very low protein diet (0.3 G/Kg BW) supplemented with ketoanalogues have been shown to be even more efficacious in further improving the benefits of a low protein diet in CKD patients.

Material & Methods: 164 adult patients with Stage 3 to Stage 5 (Predialysis) were initiated on ketoanalogue supplemented low protein diet (sLPD) after informed consent and the necessary Institutional Ethics Committee approvals. Based on their affordability, 116 patients randomly were assigned to the sLPD group whereby they received 0.6 gm/kg BW of dietary proteins supplemented by ketoanalogues (Renolog; La RenonHealthCare, Ahmedabad, India) at a dosage of one tablet per 10 Kg body weight. 48 patients received 0.3 gm/kg BW supplemented by Renolog at a dose of one tablet per 5 Kg body weight. Renal, metabolic, nutritional parameters and anthropometric analysis were done in both groups at the start of the study, at the end of six months and at the end of twelve months of treatment.

Results: Total number of patients in the study group were 164 of which 116 were on sLPD and 48 were on sVLPD regimen. Period of study was twelve months. The number of Renolog tablets consumed per day in the sLPD group was 6.10 ± 1.03 and 12.19 ± 1.83 in the sVLPD group. The difference was statistically significant ($p < 0.001$).

Biography

He is a pioneer in the field of Peritoneal Dialysis Internationally and Cadaver Kidney Transplantation (<http://blogs.hbr.org/2012/11/a-great-idea-for-lowering-cost/>) and well known in the areas of Chronic Kidney Disease Management, Critical Care Nephrology including CRRT, Liver Dialysis (MARS & FPSA; Prometheus: Largest series in the Country). He was responsible for the Country's first Simultaneous Heart and Kidney Transplantation (SHK). A Member of various Task Forces & Committees that has developed Best Practice Guidelines CKD and Anaemia management. He is the Chief Co-ordinator of the Asia Pacific Chapter for ISPD and Past Councillor of ISPD. He successfully held the prestigious 2nd Asian Chapter Meeting of the ISPD, Hyderabad in January 2005 and Co-Director of the 3rd Hemodialysis University TM of ISHD at Hyderabad, March 2014 (<http://hdu2014.com/>). He is an Internationally acknowledged expert in Telemedicine in Dialysis (<http://blogs.hbr.org/2012/04/how-telemedicine-saves-lives-a/>), Reverse 'Medical' Innovation & Medical Tourism. He has contributed extensively in International Journals such as KI, AJKD, JASN, NDT, Transplantation Proceedings, PDI, Nephrology, American Journal of Gastroenterology, Contributions to Nephrology etc.

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