

DIETARY SODIUM AND APPETITE IN HEMODIALYSIS

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Sodium (Na^+) intake is difficult to control because many foods are naturally high in Na^+ , and most prepared/prepackaged foods have significant amounts of Na^+ added to enhance taste and prolong shelf-life. The purpose of this report is to describe the concentration of Na^+ in foods consumed on nondialysis and dialysis days. 24-hour dietary recalls were obtained with unscheduled telephone calls on 1 weekend day, 1 nondialysis weekday and 1 dialysis weekday and analyzed using NDS-R. Participants included 22 hemodialysis patients, mean age 52 years (SD=17), 82% minorities, 59% male, mean duration dialysis 30 mos (SD=42). Participants consumed 1,379 total gms (SD=545) of food on dialysis weekdays compared to 1,614 gms (SD=592) on nondialysis weekdays and 1,560 gms (SD=586) on weekends ($p=0.38$). The ratio of Na^+ to total weight of food consumed per day was highest on nondialysis weekdays (1.7mg/gm/day; SD=0.71) and lowest on dialysis weekdays (1.6mg/gm/day; SD=0.54; $p=0.66$). The amount of food consumed was compared for participants consuming ≥ 1.5 mg/gm/day of Na^+ and < 1.5 mg/gm/day. Those consuming ≥ 1.5 mg/gm/day Na^+ consumed fewer total grams of food compared to those consuming < 1.5 mg/gm/day (1,373 versus 2,037gms; $p<0.001$) on nondialysis weekdays. On weekend days, the same pattern was seen, but was only marginally significant (1,210 versus 1,564 gms; $p=0.08$). On dialysis weekdays, participants consuming ≥ 1.5 mg/gm/day of Na^+ consumed 1,665 total gms of food compared to 1,482 gms in those consuming < 1.5 mg/gm/day ($p=0.99$). Those consuming higher concentrations of Na^+ on nondialysis days appear to have poorer appetite on those days. The findings of this pilot study highlight the importance of simultaneously addressing dietary restrictions and dietary adequacy with nutritional counseling.

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