

SGA AND SERUM ALBUMIN ARE GOOD PREDICTORS OF DEATH IN MALNOURISHED HEMODIALYSIS PATIENTS

B Knap, M Arnol, A Ridič, J Buturovič-Ponikvar, R Ponikvar, AF Bren.

University Medical Centre Ljubljana, Department of Nephrology, Ljubljana, Slovenia.

INTRODUCTION

Many patients with end-stage renal disease are malnourished, and cross-sectional studies have shown that markers of malnutrition may predict death. In this study, we investigated the association of Subjective Global Nutritional Assessment (SGA) and serum albumin with mortality in a single hemodialysis center.

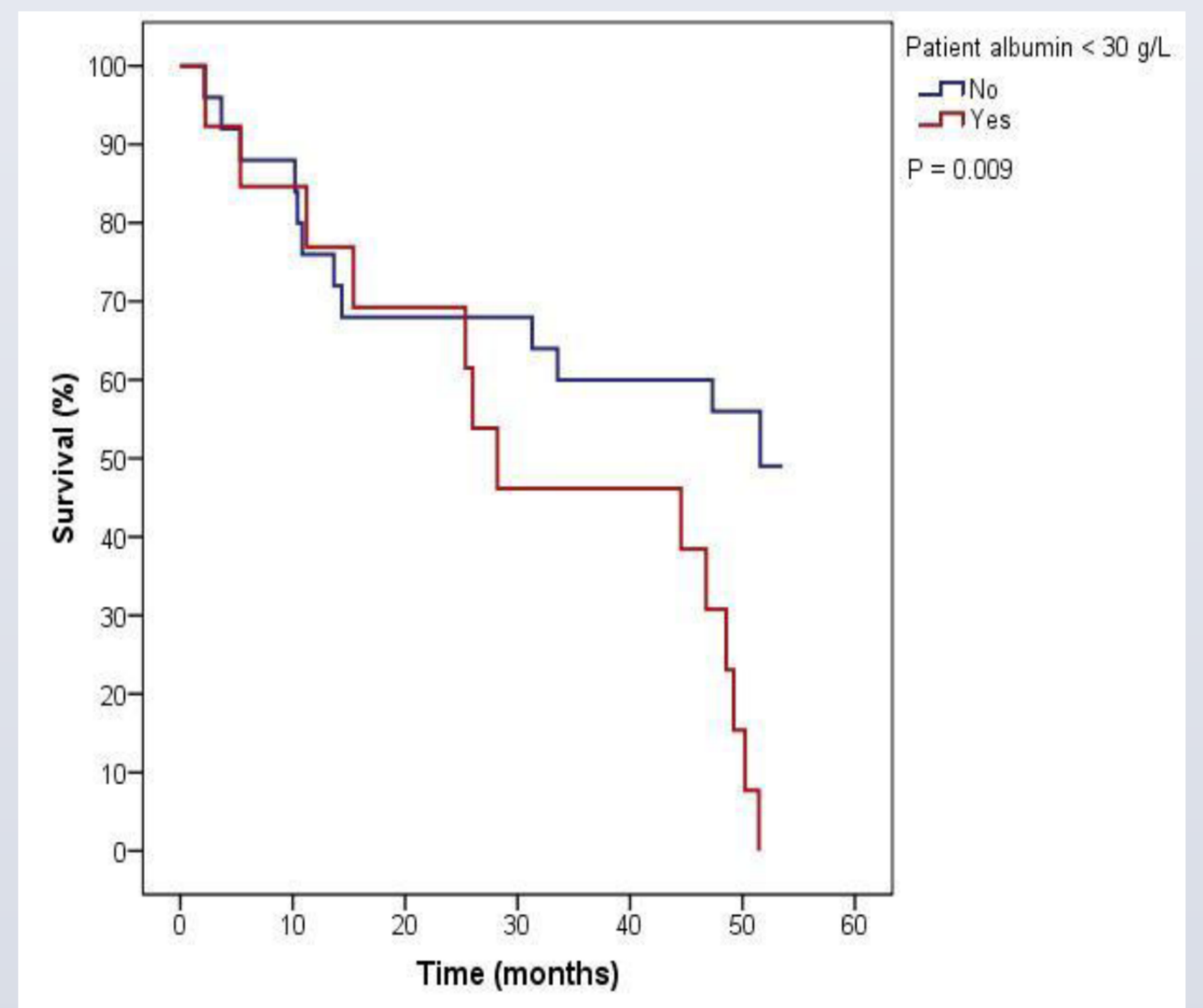
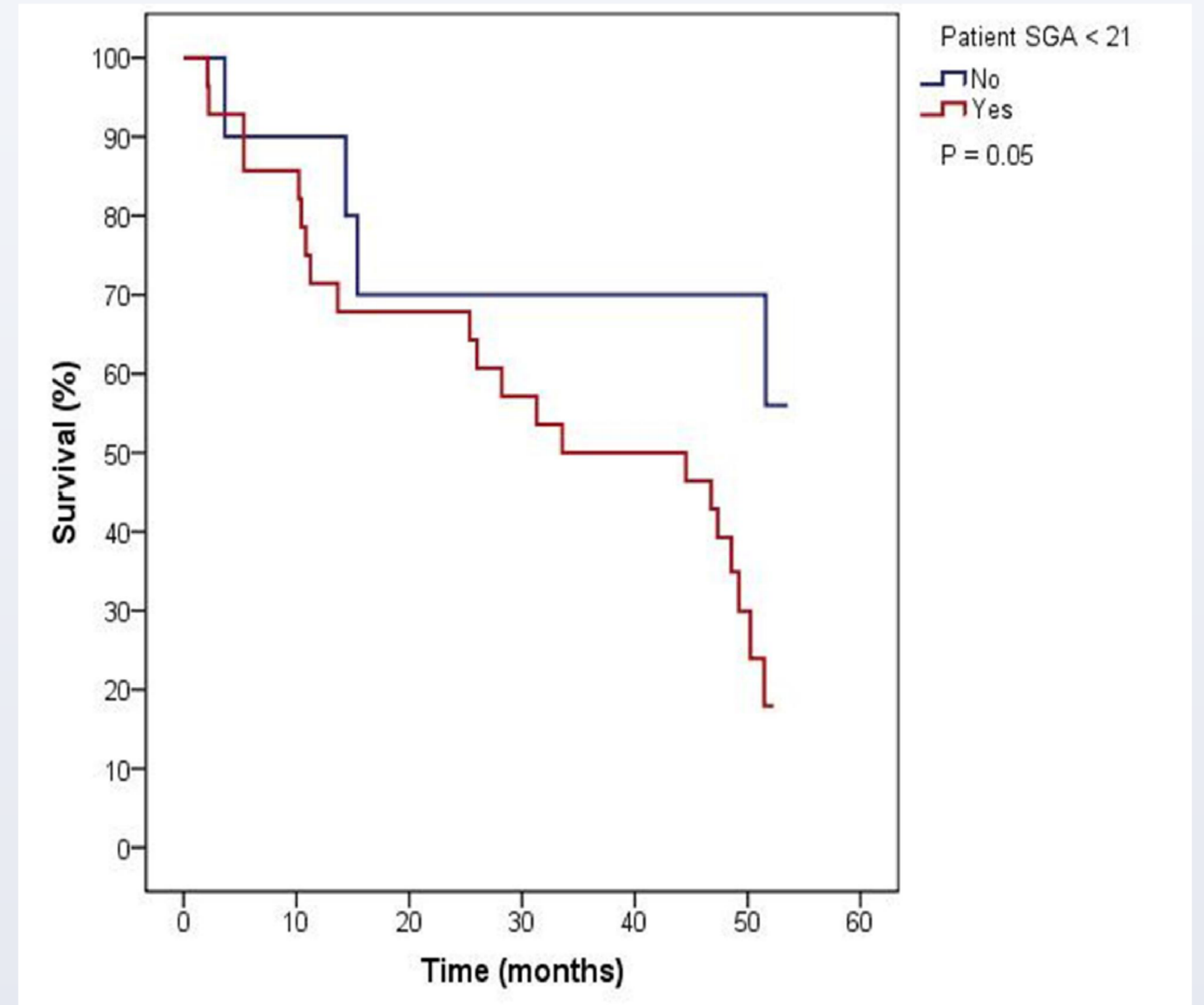
METHODS

In our study 39 out of 183 hemodialysis patients (21.3%) showed results of malnutrition. Nutritional intervention and observation were started in the malnourished group. We observed patient survival rate in the next 50 months. Classical parameters for evaluation of nutritional status such as SGA, body weight, and routine biochemical parameters were analyzed. SGA values less than 21 and serum albumin less than 30 g/l are critical for prognosis of malnourished patients.

RESULTS

In a 50-month follow-up study of 39 malnourished patients, 25 patients (64%) died despite nutritional intervention and intensive therapy. The causes of death were cardiovascular event in 9 pts (36%), sepsis in 7 pts (28%) cachexia in 5 pts (20%), and cancer in 4 pts (16%). Only 10 pts had SGA > 21 and 6 of these pts (60%) survived. Twenty-nine pts had SGA value < 21 and only 8 of these pts (27.6%) survived. Kaplan-Mayer survival rate after 50 months was 56% in patients with SGA > 21 and 24% in patients with SGA < 21 ($p = 0.05$). In 13 pts with albumin < 30 g/l the mortality rate was 100%. Survival rate was significantly better in pts with serum albumin > 30 g/l (56%; $p = 0.009$).

univerzitetni
klinični center ljubljana
University Medical Centre Ljubljana



CONCLUSION

SGA value less than 21 and serum albumin less than 30 g/l are good predictors of death in malnourished hemodialysis patients. This assessment tool is beneficial for hemodialysis patients who are at an increased risk of malnutrition-associated mortality. Early diagnosis, nutritional intervention and therapy of basic illness are very important for improving nutritional status and survival in malnourished dialysis pts.

