

Introduction

→ Chronic kidney disease (CKD) is an important global public health problem with a increase in its prevalence.

→ The diet is a modifiable risk factor that may modulate CKD incidence or progression. Therefore, the investigation of food consumption of this population is relevant.

Objective

We aimed to describe the consumption of healthy and unhealthy food items in a population comprised by Brazilian individuals that self-declared with CKD.

Methods

- Cross-sectional survey including a sample representative of the Brazilian population aged ≥ 18 years, integrating The 2013 National Health Survey.
- Among the 60,202 individuals interviewed in the National Health Survey, 839 (1.4%; 95%CI 1.3; 1.6) self-reported a medical history of CKD, 17 underwent kidney transplantation and were excluded. Therefore, 822 individuals were included in this study.

→ Three groups were built based on the treatment of CKD.

Non-Dialysis Group	Dialysis Group	Untreated Group
Individuals were not on dialysis (n=480)	Individuals were on dialysis (n=48)	Individuals who declared not to be under treatment (n=249)

→ Food consumption:

Healthy food items	
Regular consumption (≥ 5 days/week)	Beans
	Fruit and/or juice
	Vegetables
Weekly intake (≥ 1 day/week)	Fish
Unhealthy food items	
Regular consumption (≥ 5 days/week)	Sweet sugar beverages (SSB)
	Sweets
Consumption (yes or not)	Excess salt
	Meat or chicken with excess fat

Results

Table 1: Main characteristics of the participants (n=822)

Sociodemographic Variables	n	%
Sex		
Male	339	44.9
Female	500	55.1
Age (in years)		
18-39	210	21.4
40-59	346	43.4
≥ 60	283	35.2
Anthropometric measurements		
Body weight (kg)	71.3	(69.7;73.0)
Height (m)	1.62	(1.61;1.63)
Body mass index (kg/m ²)	27.1	(26.5;27.6)
CKD Treatment		
Non-Dialysis dependent		
Drug treatment	391	48.3
Others	89	8.6
Dialysis dependent		
Hemodialysis	41	5.2
Peritoneal dialysis	7	0.7
Untreated	294	35.3

Number and prevalence (%) or Mean and 95% confidence intervals (95%CI), as appropriate

Table 2: Prevalence (%) and confidence interval of 95% (95%CI) of health and unhealthy eating markers in individuals self-declared with chronic kidney disease based on treatment self-reported.

Food items	Total (n 822) % (95%CI)	Non-Dialysis Group (n 480) % (95%CI)	Dialysis Group (n 48) % (95%CI)	Untreated Group (n 294) % (95%CI)
Healthy				
Regular consumption of beans	66 (61-71)	69 (62-74)	35 (19-56)	67 (58-74)
Regular consumption of fruit/juice	66 (61-71)	66 (59-73)	56 (34-76)	67 (59-75)
Regular consumption of vegetables	74 (69-78)	71 (65-77)	69 (49-84)	79 (71-85)
Week intake of fish	57 (51-63)	56 (48-63)	44 (24-66)	61 (51-69)
Unhealthy				
Regular consumption of SSB	18 (14-23)	15 (11-21)	18 (5-44)	23 (16-32)
Regular consumption of sweets	20 (16-24)	16 (12-22)	21 (9-44)	24 (17-33)
Consumption of meat/chicken with excess fat	33 (28-39)	29 (23-37)	34 (15-60)	41 (33-50)
Consumption of excess salt	14 (11-18)	14 (9-19)	3 (1-12)	18 (12-25)

%: Prevalence; 95%CI: 95% confidence intervals; SSB: Sweet sugar beverages
Superscript with different letters indicate statistical differences between the groups.

Conclusion

- More than half of the CKD Brazilian individuals report to regularly consume healthy foods and about 20% unhealthy foods.
- In addition, the treatment modality did not seem to exert a big influence on the food pattern of healthy and unhealthy foods.

References

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