MO908 **UNCORRECT NUTRITIONAL MANAGEMENT AND LOW QUALITY OF LIFE IN HEMODIALIZED PATIENTS: MULTICENTRIC STUDY**

Ersilia Satta[1], Carmine Romano[2], Tersa Della Corte[3], Carmelo Alfarone[3], Guido Gembillo[4], Sandro Gentile[5]

[1]Nefrocenter research srl, and Nyx Sturtup, Via xxIV May Cava dei Tirreni, Naples , Italy, [2]Nefrocenter research srl, and Nyx Sturtup, Naples, Italy, [3]Nefrocenter research srl, and Nyx Sturtup, Via xxIV May Cava dei Tirreni, Naples, Italy, [4]Unit of Nephrology and Dialysis, Department of Clinical and Experimental Medicine, Department of Clinical and Experimental Medicine, Messina, Italy and [5]Department of Internal Medicine, University Campania L Vanvitelli, Naples, Italy

BACKGROUND AND AIMS: In patients with kidney impairment, the progression to end-stage renal diseases (ESRD) can lead to a gradual loss of independence with worsening quality of life. Proper nutritional management and daily exercise can help patients live with their condition in a more propositive way.

METHOD: We performed a multicentric study on the habits of 222 hemodialyzed patients, belonging to 4 different dialysis centers. Through self-administered questionnaires, we collected information about patients attitudes and behavior that affect their daily activities and self-care.

RESULTS: Through the use of the Council for Nutritional Appetite Questionnaire, we assessed that 60,81% of patients had a risk of weight loss of 5% in the next six months (Table 1 Baseline Characteristics). The Malnutrition Inflammation Score indicated that 39,63% had a mild malnutrition and 12,16% a severe malnutrition; the serum albumin was between 3-5 and 3,9 g/dL in 42,79% of patients, 3,0 – 3,4 g/dL in 18,01% of patients, <3 g/dL in 3,15% of the whole cohort. For the bioimpedance analysis (BIA) the Body Cells Mass Index (BCMI) values were indicative in 60% of patients of a normal nutritional status (Figure 1), parameters that remained superimposable in the pre and post-dialysis BIA. The ECM/BCM ratio indicated in pre-dialysis that 27% of patients present a state of dehydration and, on the contrary, 73% an edematous state, vice-versa in the post-dialysis the dehydration status rises to 48% and the edematous state falls to 52% (Figure 2). For the BIA a phase angle of less than 4 ° was found in 18% of patients, a critical value linked to a higher mortality risk. 56% of patients showed a value between 4 ° -5 ° while 26% values between 6 ° and 10 °.
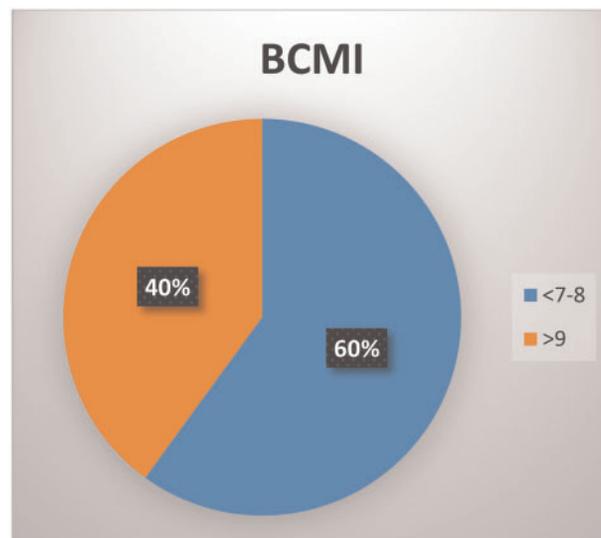
MO908 Figure 1: Body Cell Mass Index (BCMI) bioimpedentiometry of the total patients
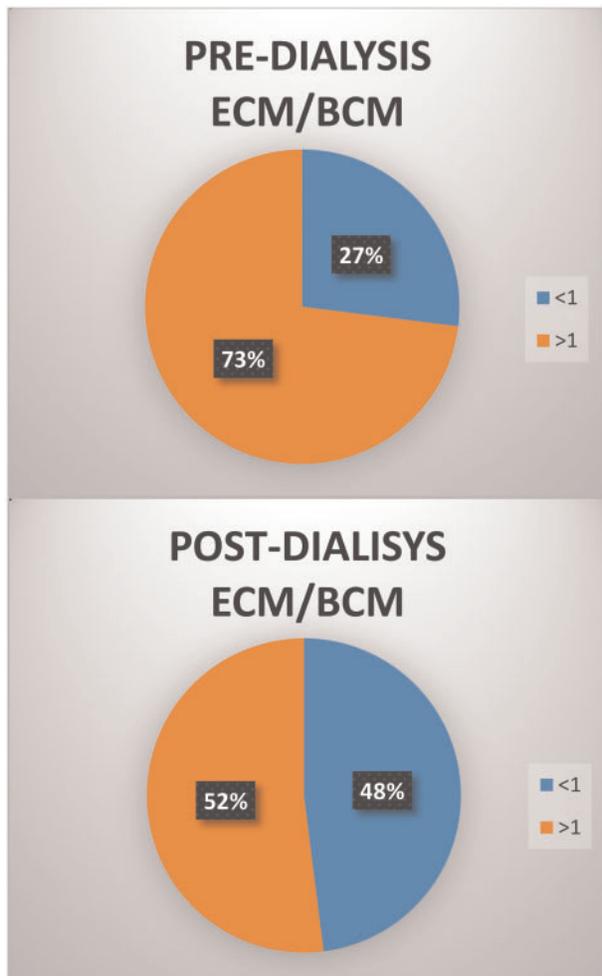
MO908 Figure 2:Bioimpedentiometry ratio between Extra Cellular Mass and Body Cell Mass Index (ECM / BCM) of the total number of patients in the pre-dialysis and post-dialysis times (30 minutes from the end of dialysis).

CONCLUSION: In conclusion, the data from this study show that inappetence and single alterations indicative of risk of malnutrition are frequent in Hemodialysis patients, but a clear diagnosis of malnutrition is relatively rare. A large percentage of patients are overweight, with increased abdominal adiposity but with reduced cell mass and with a protein intake lower than recommended levels. The results underline that malnutrition risk leading to a lower quality of life are still major problems in Hemodialysis patients. Bioimpedance analysis and PhA analysis represents a useful tool in the clinical management of hemodialized patients.