Patients receiving dialysis have poor nutritional status for many different reasons, leading to serious complications and increased mortality.

Prior to dialysis, nutrient intake was limited in order to prevent damage to renal function and improve metabolic abnormalities, the amount of some nutrients lost during dialysis should be increased while receiving dialysis. However, poor appetite often causes a decrease in nutrient intake and muscle weakness resulting in poor nutritional status. Therefore, in order to prevent unnecessary wastes and water accumulation and to prevent and manage complications, it is important not only to emphasize the control of detailed nutrient intake, but also to prevent malnutrition while maintaining good nutrition status. It is important to improve the quality of life.

To do this, I will explain the main principles of nutrition education that doctors should know and the contents of nutrition education that patients can more easily and easily practice.

First, Because the protein is lost during the dialysis session, the dose is increased compared to before dialysis. Foods such as meat, fish, and tofu have a high content of essential amino acids and high biological value protein content, which helps to reduce waste from dialysis. In addition, in order to reduce the amount of waste from the dialysis, it is recommended to educate the patients to eat various kinds of protein source and to divide the proper amount into meals.

Second, Even during the dialysis, sodium intake should be reduced as before. If patients do not limit sodium, it can lead to interstitial edema, blood pressure, and weight gain. It is better to use a recipe enriched the taste and flavor of the food instead of the seasoning with plenty of sodium. In the case of eating out, there are many foods with a high sodium content, so ask cook to reduce the salt or add the dish with water or tea.

Third, Control the potassium intake. Hemodialysis does not easily reduce blood potassium levels. In particular, if patients do not dialyzed on the day, unless potassium intake is limited, the potassium concentration may rise rapidly within a short period of time, leading to sensory abnormalities, arrhythmia, and cardiac arrest. To reduce potassium intake, avoid foods with high potassium content. For vegetables, peel, soak in water or boil, and eat rice instead of whole grain. There are many differences depending on the cooking method, but there is no big difference in the water temperature or agitation while soaking, they will lose as much vitamins and minerals inefficiently.

Fourth, Reduce phosphorus intake. As phosphorus is less lost while cooking, the choice of food type is more important. Foods a lot of phosphorus include dairy products, grains, potatoes, egg yolks, intestine of meats, nuts, and chocolate.
So far, I have been talking about the main principles of nutrition education for dialysis patients. To improve patient happiness and quality of life, it is advisable to adjust nutrient intake for individuals according to their health and dialysis status. It is important to improve compliance of nutrition education, tell them how to eat!