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Nutritional Approach to Attenuate the Progression of Pediatric CKD

Rukshana Shroff
University College London, United Kingdom

The nutritional management of children with chronic kidney disease is of prime importance in meeting the challenge of maintaining normal growth and development in this population. In this talk I will integrate the Pediatric Renal Nutrition Taskforce clinical practice recommendations for children with CKD stages 2-5 and on dialysis, and addresses nutritional assessment, energy and protein requirements, delivery of the nutritional prescription and necessary dietary modifications in the case of abnormal serum levels of calcium, phosphate and potassium. I will also discuss the particular nutritional needs of infants with CKD for whom dietary recommendations for energy and protein, based on body weight, are higher compared with children over one year of age in order to support both linear and brain growth, which are normally maximal in the first six months of life. Attention to nutrition during infancy is important given that growth is predominantly nutrition dependent in the infantile phase and the growth of infants is acutely impaired by disruption to their nutritional intake, particularly during the first six months. Inadequate nutritional intake can result in the failure to achieve full adult height potential and an increased risk for abnormal neurodevelopment. Physicians, nurses and dietitians must work closely to ensure that the child with CKD receives the best possible nutritional management to optimize their growth and development.