Shaky foundations: the evidence base supporting dietetic interventions in chronic kidney disease

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Results
- 12 controlled trials with 1906 participants were included

Figure 1: Flow diagram of included studies

Figure 2: Risk of bias summary across all studies

Background
- Evidence based guidelines for dietary interventions in chronic kidney disease (CKD) focus on single nutrients and malnutrition
- Few recommendations exist for food based content and when or how interventions are delivered

Aim
- To review the efficacy and implementation of nutrition assessment and dietetic interventions delivered to patients with CKD

Methods
- Systematic review Jan 2010–Nov 2019 of MEDLINE, PSYCNINFO, CINAHL, EMBASE and the Cochrane Central Register of Controlled Trials
- Randomised and non-randomised trials > 6 months follow up, of whole diet or food groups interventions designed/delivered by dietitians, for adults with CKD
- Intentional weight loss and single nutrient studies excluded as covered by other reviews
- PROSPERO registration CRD42019151455
- 2 authors independently assessed and extracted data

Outcome Findings
- Nutritional Status: No studies
- Quality of Life: 3 studies, no change with any intervention
- Patient Experience: Telehealth was an acceptable alternative to face to face appointments
- Renal risk factors: Increased fruit and vegetables slows kidney function decline & systolic BP
- Clinical Outcomes: ↓ risk of combined CVD & renal outcomes with group based cooking and exercise

Classic RCT design for dietetic interventions is limited by risk of bias and few measure when/how care is provided. Innovative trial design is needed to develop evidence for whole diets effects.