INTRODUCTION

- Current evidence-based practice guidelines for maintenance haemodialysis patients recommend biannual assessments of nutritional status and nutrient modification to manage hyperkalaemia, hyperphosphataemia, uraemia, metabolic acidosis, and malnutrition (a predictor of mortality in this population).
- A long-term investigation into Body Mass Index (BMI) and nutritional status post implementation of these guidelines has not been undertaken.

AIM: To determine if following evidence-based practice recommendations was associated with positive outcomes for BMI and nutritional status in maintenance haemodialysis patients over the last 15 years.

METHOD

- Data was obtained from the Royal Brisbane and Women’s Hospital maintenance haemodialysis inpatient database between 2004 to 2019.

RESULTS

- Cohort of 664 patients (median of 3 [1-6] observations).
- Missing data: BMI 2.5%, nutritional status 3.8%, serum potassium/phosphate 13%, dietary advice 17.5%.
- BMI significantly increased by of 5kg/m² (median 24.4kg/m² [21.6-28kg/m²] to 29.5kg/m² [24.4-35.4kg/m²]) (p <0.001).

CONCLUSION

- Completeness of data totaled 74.2% when compared to patient numbers provided by ANZDATA.
- Malnutrition decreased to less than 10% ($\chi^2 12.3$, df=4, p=0.015).
- Serum potassium and phosphate remained stable.
- Dietary advice for healthy lifestyle decreased, whilst nutrition support remained stable ($\chi^2 221.8$, df=12, p<0.001).

Whilst trends in data showed improvements in nutritional status in this cohort, obesity prevalence doubled, prompting redirection of dietetic care to weight management and reconsideration of evidence-based practice guidelines for future practice.