

Nutritional Therapy in Uremic Encephalopathy Patients due to Acute on Chronic Kidney Disease

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Uremic encephalopathy is an uncommon metabolic disorder syndrome, which is characterized by reversible neurological symptoms of acute or subacute episodes. It generally occurs in patients with acute kidney injury or severe chronic kidney disease, which may result from multiple metabolic derangements. The aim of nutritional therapy in this patients was to fulfill macro and micronutrients, reduce inflammation, improve the immune system and nutritional status. We reported a 68 years old woman, admitted to hospital with loss of consciousness and was diagnosed with uremic encephalopathy due to acute on chronic kidney disease with severe malnutrition, anemia (10,7 g/dL), leukocytosis (12800 /ml), decreased kidney function (225/10,09 mg/dL), immune system depletion (Total Lymphocyte Count/TLC 908,8 /μL), hypoalbuminemia (3,0 g/dL), hypernatremia (151 mmol/L), and severe hypokalemia (3,3 mmol/L). Nutritional therapy were given with total energy 1300 kcal and increased gradually, protein 1-1,2 g/kgIBW/day, carbohydrates 50-55% and fat 26,5-34,6%. Suplementation were vitamin B complex, zinc, curcuma, and snake head fish extract high content protein albumin (Pujimin®). After 12 days, there are clinical and metabolic improvement in leukocyte (12800 to 5900 /ml), ureum/creatinine (225/10,09 to 35/0,49 mg/dL), TLC (908,8 to 1551,7/μL), albumin (3,0 to 3,1 g/dL), sodium (151 to 140 mmol/L), and potassium (3,3 to 4,5 mmol/L).

Biography

Andi Syurma Sari Ismail has completed her MD at the age 24 years from School of Medicine Universitas Muslim Indonesia, Makassar, Indonesia. She is a third year Clinical Nutrition Resident at Department of Nutrition, School of Medicine Universitas Hasanuddin, Makassar, Indonesia.

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