

## Case Review of an Underweight End Stage Renal Disease Patient Presented with Hyperkalaemia for Dietary Management by Registered Dietitian via TeleHealth Consultation

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### Introduction:

People suffering from End Stage Renal Disease (ESRD) would require to have dietary modification to minimize complications. Complications like hyperkalaemia, hyperphosphatemia and hypertension may compromise the dietary variety and appetite of patients, leading to increased risk of underweight. Under COVID-19 pandemic, foods supply in Hong Kong was greatly impacted, with delayed follow up treatments with health professionals may pose physical and psychological stress to patients. This case review aims to demonstrate the needs of TeleHealth Medical Nutrition Therapy (MNT) provided by Registered Dietitian for renal patients with multiple complications to improve health outcomes during the 5th pandemic wave.

### Methods:

A 40 y.o. female with history of hearing loss, ESRD, insulin-dependent T2DM, hyperlipidemia, hypertension with ventricular hypertrophy, presented with hyperkalaemia and underweight (BMI = 17.0kg/m<sup>2</sup>) was referred. TeleHealth (Zoom consultation) was arranged with dietitian in view of her urgent need under COVID-19 pandemic. Patient attended the session with her father as carer. Anthropometric and biochemical measurements were collected by patient and medical team. Nutritional assessment were conducted at initial consultation, with dietary pattern and nutritional adequacy analysed by dietitian.

### Results:

Nutrition diagnosis were irregular meal pattern, inadequate energy intake, inappropriate intake of carbohydrates and potassium, related to over restriction of seasoning/fruit and vegetables/variety of meals, with lack of previous nutritional education, corresponding to T2DM diet management and high potassium foods. Dietary advice (Calorie Counted with DM plan, moderate protein and fat diet with even distribution of carbohydrates among regular meals) was given to patient and carer by dietitian. Education on carbohydrate counting, high potassium foods and seasoning usage were focused for complication management. SMBG were encouraged for monitoring prior follow up.

### Conclusions:

Patients with complicated diseases experience barriers in seeking appropriate and timely professional advice during COVID, which may compromise disease prognosis. Dietetic MNT via TeleHealth plays an important role in the management of chronic diseases for better overall health outcomes.

**Keywords:** TeleHealth, Dietary Management, Dietitian

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