

min/1.73m²) compared to participants in the lowest tertile (median cfPWV 6.8 m/s, IQR 6.1-7.3). After a median follow-up of 10 years, baseline cfPWV was associated with an increased risk of AF (unadjusted standardized hazard ratio [sHR] 1.68, 95% CI 1.56-1.80 per standard deviation increase in cfPWV), which decreased but remained significant after multivariable adjustment (adjusted sHR 1.60, 95% CI 1.35-1.90). There was significant effect modification by race and diabetes.

Conclusions: In adults with CKD, higher LAsT was associated with an increased risk of new-onset AF among those without AF at baseline. Our findings suggest that cfPWV may be a useful indicator of heightened risk of incident AF among individuals with CKD.

I have potential conflict of interest to disclose.

WCN24-919

EVALUATION OF NUTRITIONAL STATUS, MALNUTRITION RISK AND THE ASSOCIATED FACTORS AMONG CHRONIC KIDNEY DISEASE PATIENTS UNDERGOING HEMODIALYSIS AT THE HEMODIALYSIS UNIT AT TEACHING HOSPITAL, JAFFNA



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Introduction: Malnutrition is a complex and common problem among the patients undergoing haemodialysis that increases morbidity and mortality. Subjective Global Assessment-Dialysis Malnutrition Score

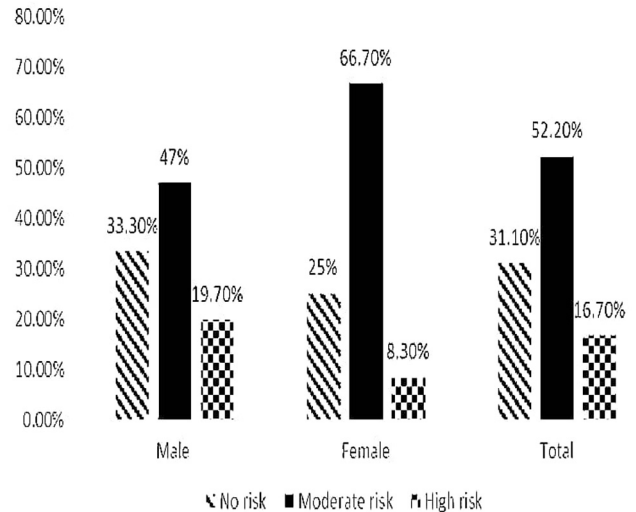
(SGA-DMS) is recommended by the NKF-KDOQI (National Kidney Foundation-Kidney Disease Outcomes Quality Initiative) to assess the nutritional status in haemodialysis patients. The current study aimed to evaluate the nutritional status, malnutrition risk and associated factors contributing to malnutrition, further estimate serum albumin level and examine its contribution towards malnutrition risk among patients undergoing haemodialysis at Teaching Hospital Jaffna, Sri Lanka.

Methods: A descriptive cross-sectional study was carried among Chronic Kidney Disease (CKD) patients who underwent Haemodialysis at Teaching Hospital Jaffna, Sri Lanka. An interviewer administered pre-tested questionnaire was used to obtain the data related to socio-demographic, lifestyle, medical history, haemodialysis frequency, side effects, dietary habits and functional status. The anthropometric indices and laboratory investigations including serum Albumin were measured to evaluate nutritional status. Biochemical data was obtained from patients' previous medical reports. The Subjective Global Assessment- Dialysis Malnutrition Score (SGA-DMS) was utilized to screen malnutrition risk. Chi-square test, Kruskal Wallis test and Pearson correlation coefficient test were used to analyse the data.

Results: A total of 90 patients, consisting 66 males, 24 females having mean age of 49(±14.74) years were selected to this study. In the current study, 25 (27.8%) patients were underweight. Based on SGADMS, 47 (52.2%) patients including 31 males and 16 females had moderate risk of malnutrition while 15 (16.7%) consisting 13 males and 2 females had severe risk of malnutrition. Furthermore, risk of malnutrition was significantly associated with age (p=0.015), area of living (p=0.009), walking duration (p<0.001), comorbidities like Ischemic Heart Disease (p=0.047) and Anaemia (p<0.001), Duration

of haemodialysis (p=0.011), side effects of haemodialysis such as vomiting

(p=0.02) and itching (p=0.032), dietary habits such as number of total meals consumed per day (p<0.001), appetite changes (p<0.001), skipping meals(p<0.001) and functional impairments like difficulty with ambulation (p=0.011) and difficulty with activity (p=0.001). Biochemical data such as Albumin level (r =-0.52, p<0.01) and phosphorous level (r = -0.209, p<0.01) showed significant inverse relationship with malnutrition risk.



Conclusions: Malnutrition risk is highly prevalent among Chronic Kidney Disease patients undergoing haemodialysis at haemodialysis unit, Teaching Hospital, Jaffna. 68.9% of the studied population had a risk towards malnutrition. Therefore, nutritional status of haemodialysis patients' needs more attention by nutrition consultants and nutrition counselling, frequent education and periodic nutritional assessment.

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USE OF URINALYSIS BY NEPHROLOGISTS IN AFRICA: CURRENT PRACTICES AND PERSPECTIVES



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Introduction:

Methods:

Results: The survey participants consisted primarily of males (73.8%), predominantly nephrologists from Nigeria (37.7%). In general, the majority of respondents frequently request urinalysis, particularly for chronic kidney disease (86.1%). Surprisingly, a considerable proportion (29.5%) of the respondents lacked confidence in interpreting urinalysis findings, despite the fact that the majority (33.6%) expressed high confidence. However, only 9% of respondents rarely incorporate urinalysis with other diagnostic techniques. The primary obstacles to the effective utilization of urinalysis among the participants were insufficient expertise (60.7%) and the lengthy time required for interpretation (59%).