

INTRODUCTION

- Long-term management strategies to preserve graft function in post-renal transplant patients have largely remained stagnant
- Whole-food plant-based dietary counseling has been shown to reduce the incidence of comorbidities (diabetes, dyslipidemia, and hypertension) that post-transplant patients are at increased risk for developing
- It is not yet standard-of-care to offer post-transplant patients long-term dietary counseling
- Whole-food plant-based dietary counseling is a cost-effective and safe intervention that can be widely distributed

OBJECTIVES

To examine if three months of whole-food plant-based dietary counseling in post-renal transplant patients can reduce the incidence of comorbidities thus improving graft & patient outcome

METHODS

- Renal transplant patients at least 18 years of age, post-transplant 2-4 months with eGFR \geq 20 mL/min
- Participants were randomized to receive either standard-of-care dietary counseling (control) or additional whole-food plant-based dietary counseling for 3 months (intervention)
- The intervention consisted of weekly live web-based classes led by dietitians that promoted a whole-food plant-based diet
- Baseline and outcome dietary habits were collected using the Automated Self-Administered 24-hour (ASA24®) Dietary Assessment Tool
- Dietary habits were analyzed in accordance with USDA's "My Plate" Dietary Recommendations

RESULTS

- A total of six subjects were included in this study (two in the control group, four in the intervention group)
- T-test analysis was performed to analyze the ability of participants to reduce Added Sugar, Sodium, and Saturated Fats in their diet across the two groups (Table 1)

A Pilot Study of Dietary Counseling in Kidney Transplant Recipients

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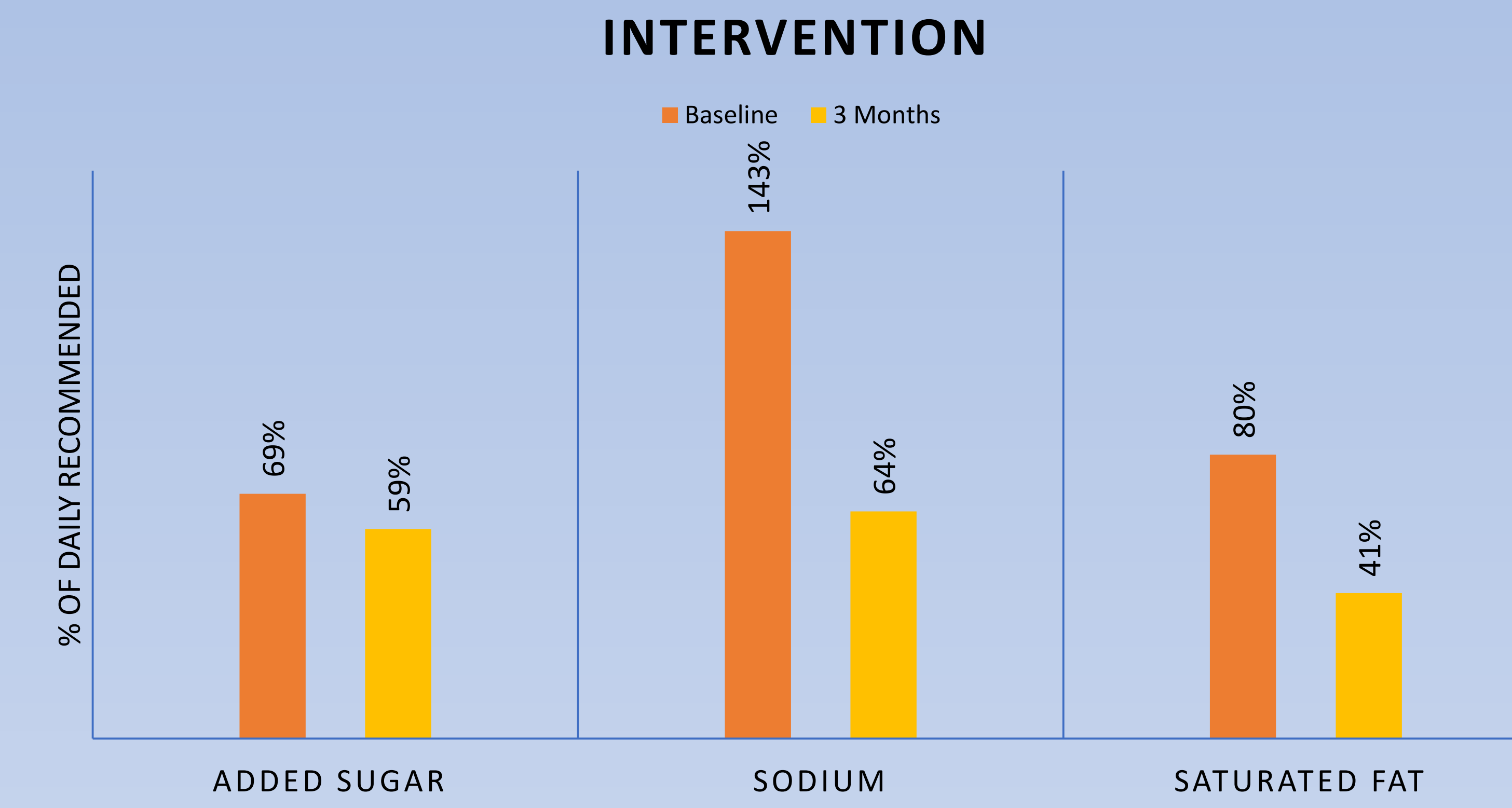
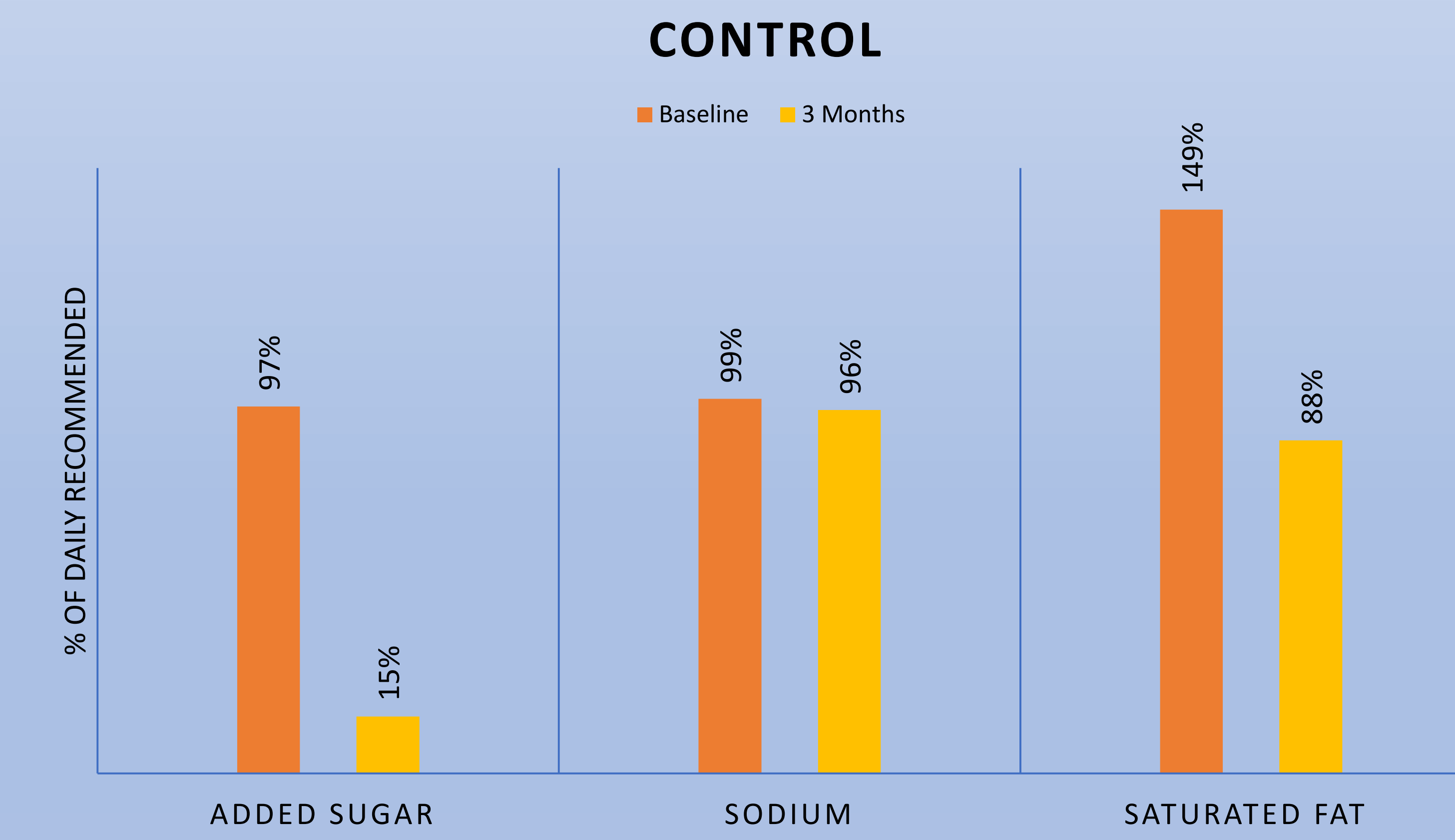


Table 1. T-test Analysis

VARIABLE	T-VALUE	P-VALUE
Added Sugar	1.25	0.28
Sodium	-1.86	0.14
Saturated Fat	0.7	0.52

CONCLUSIONS

Preliminary results indicate no significant difference in dietary habits between the control and intervention groups

LIMITATIONS & FUTURE DIRECTIONS

- Limitations of this study include the short timeline, small sample size, high participant drop out rate, and poor participant adherence to dietary recall
- This study is ongoing and currently enrolling additional participants with plans to analyze participant dietary patterns with six months and one year of whole-food plant-based dietary counseling