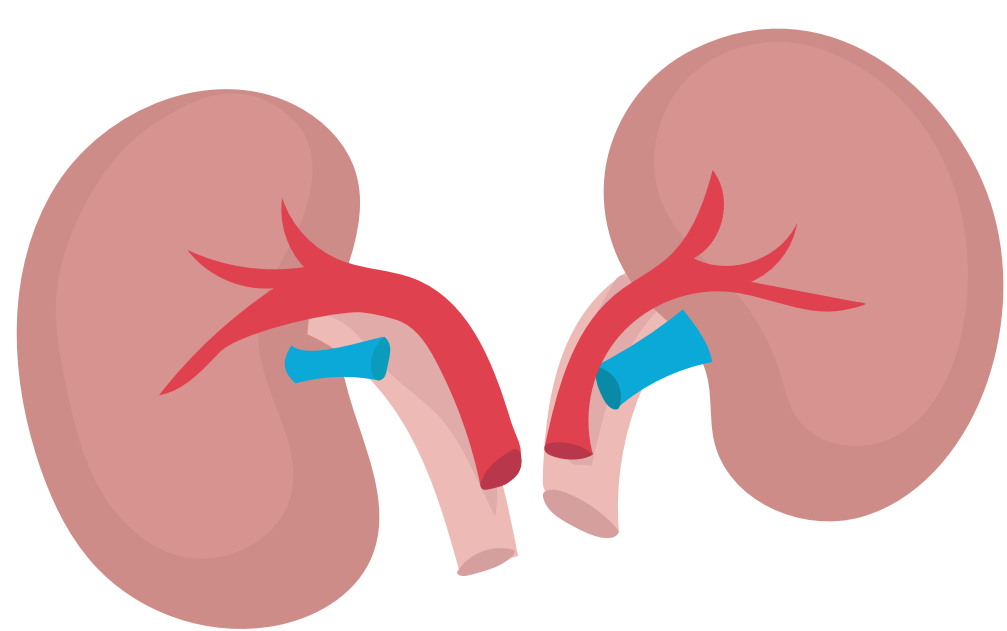


Audit of People Living with Obesity Attending a Chronic Kidney Disease Dietitian Clinic

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01 Introduction

- Obesity (BMI $\geq 30\text{kg/m}^2$) in Ireland has doubled over the last 30 years, affecting 21% of adults in Ireland in 2024. Among those living with Chronic Kidney Disease (CKD) the prevalence is higher at 42.4%.
- There are currently no CKD-specific nutritional guidelines for weight management.
- Dietitians play a key role in providing renal specific diet advice, supporting patients with weight management and helping patients that commence pharmacotherapy for obesity with the side effects of treatment.
- This audit explores the prevalence of obesity and use of pharmacotherapy to manage obesity in patients with CKD to inform dietetic practice, identify education needs, and guide future service development.^(1,2)

02 Objective

- Over a 6 month period:
- Identify the number of patients living with obesity attending the dietitian clinic.
 - Identify the number of patients on pharmacological treatments for obesity.

03 Methodology

- A retrospective audit of patients attending the CKD Dietetic Clinic at Beaumont Hospital (Nov 2024–Apr 2025) was conducted.
- Data on Age, BMI, Gender, cause of renal failure, relevant co-morbidities, and pharmacotherapy use for weight management was collected on eMED (national renal database) and previous dietitian notes.
- Descriptive analysis in Excel assessed obesity prevalence (BMI $\geq 30\text{ kg/m}^2$) and pharmacological treatment use.

04 Findings

- Total Participants n=34 (n =18 male, n=16 female) Age range: 27 to 86 years old
- 47%** of patients who attended were living with obesity.
- 14.7%** of patients were prescribed pharmacological treatment.
- 60%** of had been on pharmacotherapy for greater than 6 months before a dietetic referral was sent.
- All patients on pharmacological treatment reported poor oral intake, reduced appetite, nausea and fatigue.

Table 1: The Prevalence of Obesity

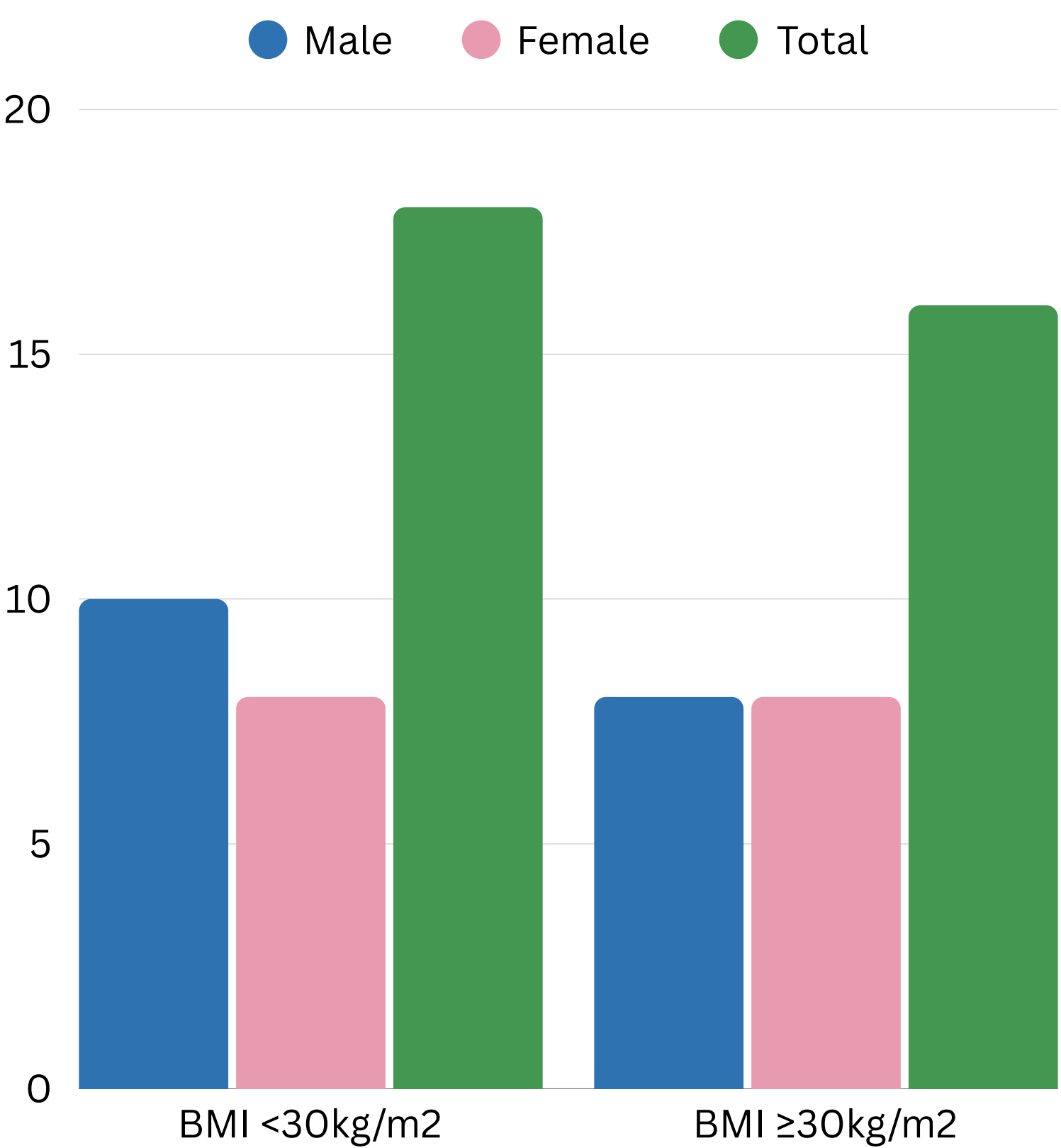
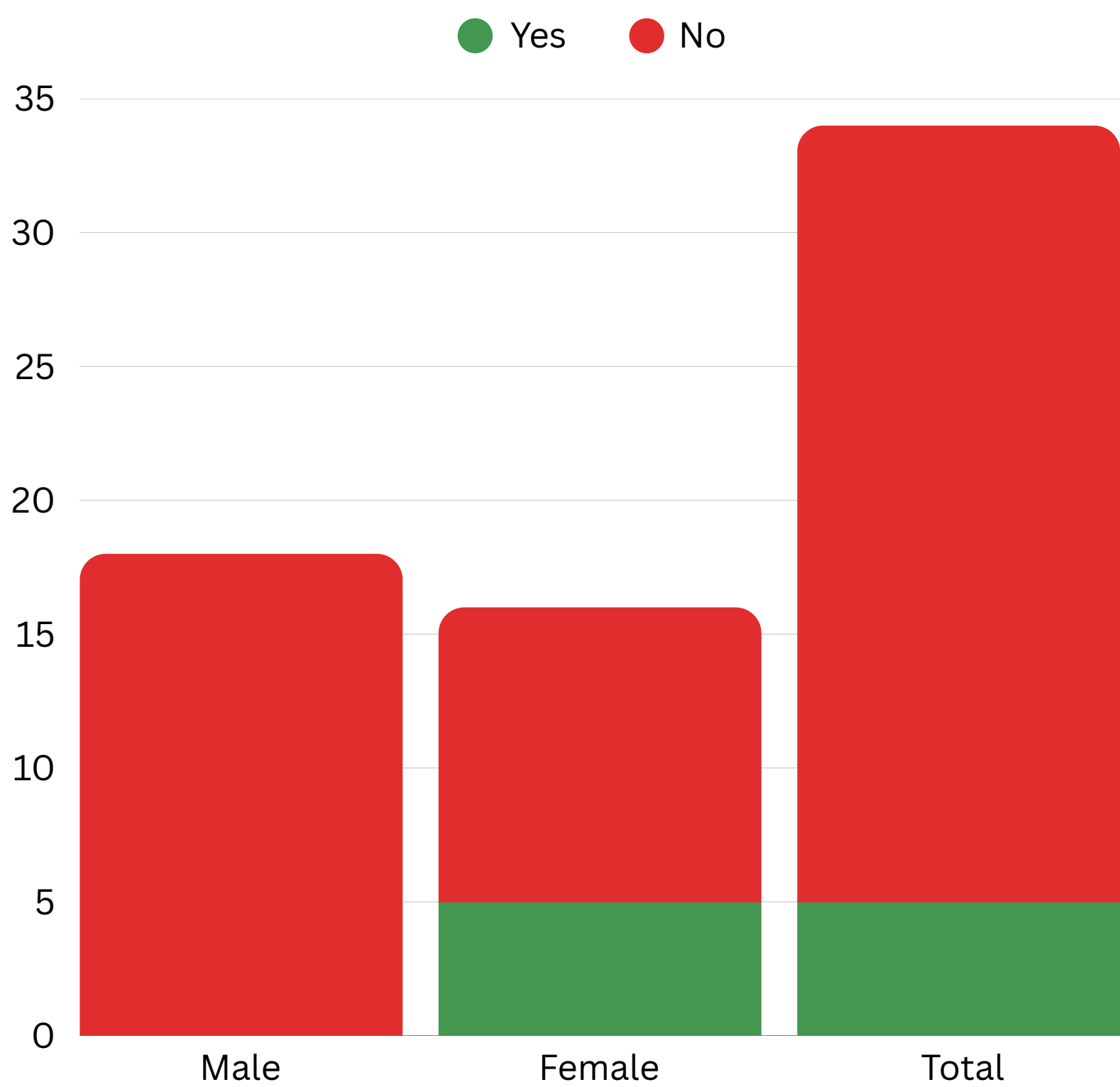


Table 2: Use of Pharmacological Treatment for Obesity



05 Conclusion

- There is high prevalence of patients living with obesity attending the CKD clinic at 47%, this figure is slightly higher to documented prevalence rates in other studies at 42.4%⁽²⁾.
- The time between patients commencing pharmacotherapy and a dietetic referral being sent varied greatly.
- Majority of patients commenced pharmacotherapy without prior or concurrent dietetic support and all of these patients reported poor oral intake.

06 Recommendations

- Adequate training should be provided to dietitians for obesity management.
- All CKD patients who commence pharmacotherapy for obesity should be referred to the dietitian for nutritional support and symptom management to optimise dietary quality.
- Future Research:
 - Investigate Nutritional Quality of the diet of patients on pharmacotherapy .
 - Examine the prevalence of patients whose BMI is a barrier to transplant listing
 - The prevalence of patients living with obesity on pharmacotherapy known to CKD services not referred to dietetics.

References:

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2. Bellizzi V, Annunziata G, Albanese A, D'Alessandro C, Garofalo C, Foletto M, et al. Approaches to patients with obesity and CKD: focus on nutrition and surgery. Clin Kidney J. 2024;17(Suppl 2):51-64.