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Prevalence of refeeding syndrome among children with severe acute malnutrition

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Statement of the Problem: Refeeding syndrome is a complication of the initial feeding of a malnourished patient and is caused by electrolyte shift. It occurs mostly in the first 48-72 hours and this is also the time when most deaths in malnutrition occurs. There appears to be a paucity of data on the prevalence of refeeding syndrome, notably in Africa. This study helped bridge that gap and identified some of the associated factors of refeeding syndrome and the outcomes of patients diagnosed with it.

Methodology and Theoretical Orientation: In a non-experimental cross-sectional research model 160 children were consecutively recruited from Kenyatta National hospital. Baseline electrolytes were measured at admission and repeated after 48 hours of feeding with the standard therapeutic feeds. Comparisons were made and once criteria for refeeding syndrome were met, data was analyzed for possible associations. Researchers identify several associations but we narrowed down on 5 which were oedema, HIV infection, dehydration, other feeds not prescribed and initiation of feeding with calorically dense feeds.

Findings: Prevalence rate of 21% was found. Statistically significant associated factor was HIV infection (P=0.027). Outcomes with treatment included recovery (67%), persistence (11%), undetermined (20%) and death (3%)
Conclusions and Significance: Refeeding syndrome remains a real threat to the care of malnourished patients. Careful electrolyte and clinical monitoring before, during and after feeding is recommended. We may need to reconsider the feeding of the HIV positive malnourished child

Biography

Lilian Kerubo is a paediatric resident at University of Nairobi in Kenya. She has a passion of finding simple, natural remedies to most common paediatric ailments.

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