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Nutrition therapy for burst abdomen patient with hypoalbuminemia

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Burst abdomen or abdominal wound dehiscence is a serious postoperative complication with increased morbidity and mortality of the patient. Adequate carbohydrate, protein and fat intake are needed for wound healing process. Lack of nutrition would negatively affect wound healing process by inhibiting fibroblast proliferation, collagen synthesis and Epithelialization. 19 years-old man was admitted to the hospital with diagnosis of burst abdomen. The chief complaint was low food intake for 3 weeks due to loss of appetite and difficulty in swallowing. On physical examination there were anemic conjunctiva, loss of subcutaneous fat and muscle wasting. On abdominal examination, there was opened operative wound, 20×10 cm, in midline, left and right quadrant of the abdomen with yellowish liquid and pus secretion. The patient was diagnosed with severe protein energy malnutrition based on subjective global assessment, with anemia (10.3 g/dL), immune depletion (TLC 808/uL) and hypoalbuminemia (3.1 g/dL). Nutrition therapies given to this patient were 2000 kcal energy. Earlier on therapy we gave calories by parenteral nutrition combined with full liquid diet oral nutrition. When the calories intake had reached the target, we gave extra 500 kcal for weight gain management. After 27 days therapy, the wound closed, Hb increased from 10.3 g/dL to 11.7 gr/dL, albumin increased from 3.1 g/dL to 3.6 gr/dL and TLC increased from 808/uL to 1560/uL. Optimal nutrition therapy would accelerate wound healing process and increase albumin level in burst abdomen patient.

Biography

Diana Kawi Jaya is currently working in Clinical Nutrition Specialist Program, Faculty of Medicine at Hasanuddin University, Indonesia.

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