



Renal Nutrition and Metabolism

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Message from the Guest Editor

Medical literature offers strong evidence that dietary habits are associated with the development and possibly the progression of chronic kidney disease (CKD). Therefore, the guidelines of many scientific societies suggest prescribing a low-protein diet to avoid the metabolic consequences of advanced CKD and to slow its progression to end-stage renal disease.

There are still some uncertainties regarding the stage of CKD at which starting to restrict protein consumption and whether it is worth-prescribing a progressive restriction that parallels the reduction of the glomerular filtration rate. Another source of confusion derives from the numerous areas of overlap between the current definitions of sarcopenia, malnutrition, and protein-energy wasting syndrome among CKD patients. There are a number of unanswered issues in the field of dietary prescription in renal transplanted patients. In fact, it would be very relevant to have an accurate estimation of their nutritional status as well as to explore which nutritional intervention could help to maintain an optimal nutritional status and possibly to prevent or delay the metabolic complications of immunosuppressive therapy.





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