

Peritoneal Dialysis Diet

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If you have any questions about your diet, please do not hesitate to contact the Dietitian on the telephone number above.

What is kidney disease?

Kidney disease is a condition in which your kidneys cannot perform their normal functions. This causes a build-up of fluid and waste products in your body. Haemodialysis is one of the treatment options for people with kidney failure.

What is peritoneal dialysis?

Peritoneal dialysis involves having dialysis fluid drained in to your abdomen. The thin layer of skin which surrounds your organs (known as the peritoneum) acts like a filter and allows waste products to be removed from your blood.

You will have a peritoneal catheter placed and you or your carer will often undergo training on how to do this type of dialysis by the Home Therapy Nursing Team.

Some patients will be on automated peritoneal dialysis (APD) overnight using a machine or you may be on continuous ambulatory peritoneal dialysis (CAPD) during the day.

Why is the diet important?

Eating the right foods and following the advice given in this diet sheet will help to limit the build-up of waste products in your blood.

Dietary and fluid restrictions are individual to each person and depend on your remaining kidney function, other medical conditions, your eating patterns and blood results. Your Dietitian will advise on you on your individual dietary needs.

What are the main aims of the diet?

1. Try to **avoid** foods high in phosphate
2. Take your phosphate binders correctly
3. Keep within your fluid allowance and cut down on salt
4. Eat regular balanced meals and make sure that your protein intake is adequate
5. To eat enough fibre
6. To keep to a healthy weight
7. Potassium restrictions are not normally required when you are on peritoneal dialysis because daily dialysis does not allow potassium to build up.

Some patients may require higher potassium diet if their blood potassium level drops. Your Dietitian can discuss this with you.

8. If you have diabetes then good diabetes control is important.

Some dietary terms you may need to know

Protein

Protein is an essential part of a healthy, well balanced diet. It is needed for growth and repair of all body tissues.

When on peritoneal dialysis you need more protein and therefore it is important that you eat enough. This is particularly important if you have been unwell or have suffered from peritonitis (infection of peritoneal membrane). Your Dietitian will advise you on the amount of protein you need.

Calories

Enough calories (energy) are needed to help maintain your ideal body weight and to ensure the protein you eat is used for growth and repair.

Some peritoneal dialysis bags contain glucose (sugar) which can affect your weight and diabetes control. Your Dietitian can discuss this with you.

Phosphate

High blood levels of phosphate can lead to thinning of your bones, joint pain and can damage your blood vessels. You may be on a phosphate binder and be asked to follow a low phosphate diet.

Fibre

Fibre is essential within your diet for keeping your bowels regular. This is important to ensure that dialysis fluid is drained adequately. If you are on automated peritoneal dialysis (APD), the machine may alarm if fluid is not draining well.

Fluid

Water is removed by dialysis and when you pass urine. If you drink more than is being removed you will become fluid overloaded.

Drinking too much will show as a rapid increase in weight. You will be advised on how much fluid is right for you.

If you have diabetes, high blood sugars can make you thirstier, so, it is important to have good diabetes control.

Salt

Too much salt in your diet can increase your blood pressure. It can also make you thirsty, which makes it more difficult for you to keep to your fluid allowance.

What is protein?

Protein is an essential part of a healthy, well balanced diet. It is needed for growth and repair of all body tissues. When on peritoneal dialysis you need more protein as some is lost in the dialysis fluid so your requirements are slightly increased. It is therefore important that you eat enough.

How can I make sure I'm getting enough protein within my diet?

It is recommended that you include at least two protein rich foods in your diet each day. Eating protein rich foods at every meal can make it easier for you to eat all the protein you need.

For example:

Breakfast	cereal with milk/yoghurt/eggs on toast
Lunch	sandwich with meat/chicken/fish/cheese
Evening meal	meat/chicken/fish with potatoes/rice/pasta and vegetables

How much should I eat at each meal?

Below are some suggested portion sizes to make sure you eat enough protein.

Meat	3-4oz per portion, i.e. chicken breast size
Fish	2-3oz per portion, i.e. cod fillet
Eggs	2 per portion, i.e. cooked as an omelette
Cheese	2oz, i.e. 1 matchbox size
Yoghurt	1 pot of yoghurt or other milky pudding
Milk	½ pint per day

Animal proteins, such as meat, fish, cheese, eggs, milk and yoghurts are the richest source of protein. If you are a vegetarian or vegan protein can also be found in nuts, pulses (beans, lentils), tofu and quorn.

It should be noted that all foods that are high in protein are also high in phosphate. Please ensure that you take your phosphate binders with your meals.

What is phosphate?

Phosphate is a mineral that is found in your food. Your body needs phosphate to keep your bones strong and healthy. It is represented by the chemical symbol PO_4 .

When the kidneys are not working properly they are unable to get rid of the excess phosphate out of your body via your urine.

Dialysis removes only a small amount of phosphate, so you will need to follow a low phosphate diet, keep to phosphate food allowances and take your phosphate binders (if you are prescribed these).

Where is phosphate found?

Phosphate is found in lots of protein foods e.g. meat, fish, cheese, offal, milk and eggs.

What is the ideal level of phosphate to have in the blood?

The ideal range of phosphate is between _____ and _____ mmol/L.

Too much phosphate in the blood is called **hyperphosphataemia**.

What are the symptoms of a high phosphate?

Some people may experience some or all of these:

- Itchy skin
- Bone/joint pain
- Red eyes

Often, a high phosphate level causes no symptoms at all and the only way of checking is by looking at your monthly blood phosphate levels. Your Doctor, Nurse or Dietitian can inform you of your phosphate levels.

What happens if I have a high phosphate over time?

- **Weakened bones** - A high phosphate level causes the bones to lose calcium. This makes the bones weak and brittle and increases the risk of bone breakages.
- **Hardening of blood vessels** - This calcium released from the bones can then build up in the blood vessels. This causes hardening (calcification) of blood vessels which can lead to **heart disease, circulation problems, fistula problems, and an increased risk of strokes or heart attacks**.
- **Hardened blood vessels may not be suitable for kidney transplant operations so it is very important to keep your phosphate levels controlled.**

What are phosphate binders?

These are tablets that help lower phosphate levels. They bind with the phosphate in food when it is in your stomach. This prevents the phosphate from entering your blood stream, which helps to keep your blood phosphate levels within the normal range.

Phosphate binders only work if taken with foods containing phosphate. Phosphate binders **should** be taken with meals or snacks which include meat, fish, eggs, cheese, milk or pulses.

Phosphate binders **do not** need to be taken with meals or snacks that do not contain protein, such as toast, jam or salad sandwiches, biscuits or fruit.

You should still aim to take the total number prescribed each day. Your Doctor or Dietitian can discuss how best to take your binders with you.

The table below shows some of the commonly used phosphate binders here at Aintree. You may be prescribed a binder which is not on the list below.

Phosphate binder	How to take
Calcichew, Adcal (calcium carbonate)	Chew tablets and take immediately before a meal
Phosex (calcium acetate)	Swallow tablets immediately before a meal (do not chew)
Renagel (sevelamer hydrochloride)	Swallow tablets immediately before or during a meal (do not chew)
Renvela (sevelamer carbonate) tablets	Swallow tablets immediately before or during a meal (do not chew)
Renvela (sevelamer carbonate) powder	Mix 1 sachet with 60ml water/diluted squash and take immediately before or during a meal
Fosrenol (lanthanum carbonate)	Chew tablets and take either mid-meal or immediately after a meal.
Velphoro	Chew tablets and take either mid or at the end of a meal

Important points

- Remember to keep a supply of phosphate binders with you when eating away from home.
- Always take the exact dose you have been prescribed.
- Phosphate binders should not be taken without food.
- If you are on iron tablets take these two hours apart from your phosphate binders.
- **If you are having difficulty taking your binders, please contact your doctor, dietitian, pharmacist or home therapy nurse to discuss suitable alternatives.**

Phosphate food allowances:

Dairy foods (milk, cheese, eggs) are a good source of protein which is important in order to keep you healthy on dialysis. Some dairy foods are high in phosphate, so must only be eaten in the quantities advised below.

Milk: ½ pint (280ml) of milk per day of full fat, semi skimmed or skimmed milk

Or

¾ pint (430ml) of soya or rice milk can be taken as this is lower in potassium and phosphate

Eggs: _____ per week

Hard Cheese: (e.g. Edam, Cheddar, Gouda, Emmental) _____ oz (_____ g) per week

Or

Soft cheeses are lower in phosphate compared to the hard cheeses, so you may want to choose these instead.

Soft Cheese: (e.g. Cottage cheese, cream cheese, goats cheese, quark, feta)

_____ oz (_____ g) per week

_____ **items from the following list per week:**

- 1 small pot of yoghurt/fromage frais
- 1 small bowl of custard
- 1 small bowl of rice pudding
- 2 scoops of plain ice cream

The below items are very high in phosphate and ideally should be avoided:

- Offal (e.g. Liver, kidney, sweetbreads, heart)
- Sardines
- Mackerel
- Pilchards
- Lobster
- Crab

Alternatively, if you really like these foods, limit to a maximum of once a month.
It is very important that you take your phosphate binders with these foods.

Salt

Too much salt in your diet can cause an increase in

- Thirst
- high blood pressure
- a build-up of fluid in your body
- increased risk of stroke

Try to eat less salt by:

- ✓ Instead of adding salt to your food you could try other flavourings like pepper, garlic, lemon, ginger, chilli, herbs and spices.
- ✓ Fresh cuts of meat are better from delicatessen counters “off the bone”
- ✓ Look for foods tinned in oil or fresh spring water instead of brine, e.g. tuna.
- ✓ Have fresh or frozen vegetables or if buying canned varieties look for ones marked “no added salt”.
- ✓ Cottage cheese tends to be lower in salt than hard cheese.
- ✓ Choosing “low salt” or “reduced salt” foods can help. Try and look at food labels to find out which products contain less salt. (see below)
- ✗ Use a pinch of salt in cooking but try not to add any at the table. To start with food may taste bland, however, it does not take long for your taste buds to lose the taste for salt.
- ✗ Avoid too many convenience foods such as dried packet or tinned soups, frozen ready meals, dehydrated meals, e.g. pasta, noodle or rice packet meals, and manufactured products, e.g. meat pies, beef burgers and fish in sauce.
- ✗ Meat, poultry and fish that are tinned, smoked, cured, pickled or salted, such as bacon, sausages, ham, meat or fish pastes and pates, corned beef and luncheon meat, have a high salt content.
- ✗ Watch salty snacks such as crisps, salted nuts and salted crackers. And use sauces sparingly, e.g. soy sauce, tomato sauce, brown sauce.
- ✗ Remember foods tinned in brine means they are tinned in salt water.
- ✗ Try not to eat too much cheese.
- ✗ Salt substitutes such as Ruthmol, Selora, Losalt, Pansalt and Biosalt are **not suitable** as they are high in potassium.

Food Labels Explained

As a guide to the salt content of foods:

A lot of salt - 1.5g salt per 100g of product or more

A little salt - 0.3g salt per 100g of product or less

How much fluid can I have in a day?

This depends on your urine output which may change over time. Everyone is different. Some people still have some kidney function left and pass good amounts of urine, so can drink more.

You may not pass any urine at all or pass only a very small amount. In this case you would need to be careful about how much you drink.

Your fluid allowance is **750mls plus equivalent of previous days urine output** (unless otherwise indicated by your doctor).

Occasionally you may find it useful to measure your urine output over a 24 hour period. This is called a 24 hour urine collection. This will give you an idea as to how much you can drink. Ask your Doctor or Home Therapy Nursing staff if you would like to do this.

Example: Someone who passes 300ml of urine a day can drink $750\text{ml} + 300\text{ml} = \text{total } 1050\text{ml}$ fluid a day. If you are unsure of your fluid allowance, please ask your Doctor, Nurse or Dietitian.

Problems associated with fluid overload include:

- Swelling of ankles, feet, face (oedema)
- Shortness of breath/difficulty breathing
- High blood pressure
- Extra strain on the heart
- Collections of fluid around the lungs, which can cause chest infections/pneumonia

If you have diabetes then good diabetes control is important. If your blood sugars run too high this can make you thirstier and harder to keep to your fluid allowance.

A high salt intake can also cause thirst and make it difficult to restrict your fluid intake. Salt also leads to water retention in the body.

What is my target or dry weight?

Your target weight is your estimated 'dry' weight. This is the weight you are without holding any excess fluid. The Doctor or Nurse usually assesses your target weight.

As a means of monitoring the amount of fluid in your body it is useful to weigh yourself each day to check that you are not more than 2kg over your target or 'dry' weight.

If you are more than 2kg over your target or 'dry' weight then you may have had too much to drink and may have to reduce your fluid intake.

Your target weight may be adjusted over time e.g. if you are on a diet or have an illness your target weight will go down, or if you eat more than your body needs your target weight will go up as you gain 'flesh' weight.

What counts towards fluid?

- All drinks throughout the day, including the fluid to take your tablets.
- Milk from your daily allowance should also be counted.
- Some foods e.g. milky puddings, jelly, porridge, ice lollies, ice cream, gravy and soup all contribute towards your fluid intake.

Handy Hospital Measures	Handy Home Measures
Glass = 120ml	Average cup = 200ml Average mug = 300mls
Soup bowl = 120ml	Average soup portion = 200mls
Milk	Pint = 568ml ½ pint = 285ml
Plastic feeding cup = 200ml	One ice cube = 20mls
Plastic tea cup = 150ml	Can of fizzy drink = 330mls
Plastic coffee cup = 170ml	One tablespoon = 15mls One dessertspoon = 10mls One teaspoon = 5mls
Plastic cup (vending machine type) = 150mls	Milk on cereal = 100mls Average milky pudding = 100mls

Tips to help you keep to a fluid restriction

- ✓ Spread your fluid allowance throughout the day.
- ✓ To help quench your thirst without having a drink suck ice cubes, boiled sweets, slice of lemon/lime or use chewing gum.
- ✓ Use smaller glasses and cups for your drinks.
- ✓ Drink only when you are thirsty and not to be sociable.
- ✓ Sip drinks rather than gulp them.
- ✓ Brush your teeth regularly and use mouthwash to freshen your mouth.
- ✓ Try freezing grapes or segments of Satsuma, tangerines, pineapple, lemon and lime wedges
- ✓ Try measuring out your fluid allowance for the day in a measuring jug to keep track of your fluid intake.
- ✗ Avoid salty foods that may make you thirsty e.g. bacon, crisps and processed foods.
- ✗ Try not to drink at meal times, save it for in-between your meals.

Remember - alcohol or spicy food can make you thirstier.

Weight

Will the dialysis affect my weight?

Some of your peritoneal dialysis solutions will contain glucose, a type of sugar. You may be on stronger, high glucose peritoneal dialysis bags if you are fluid overloaded as these can help remove more fluid.

High glucose dialysis bags can increase your blood sugar level if you have diabetes. The glucose also provides extra calories which can contribute to unwanted weight gain.

It is often best that you avoid becoming fluid overloaded as this means you won't then need to have the strong glucose dialysis bags.

To prevent weight gain, helpful hints to reduce sugar and fat intake are listed below:

- Try artificial sweetener instead of sugar (e.g. Canderel, Hermesetes, Sweetex).
- Choose low calorie/no added sugar/sugar-free drinks instead of ordinary varieties.
- Try reduced sugar jams and marmalades.
- Choose low sugar/sugar free varieties of puddings (e.g. sugar-free jelly, homemade puddings using sweeteners).
- Use low fat dairy products (e.g. skimmed or semi-skimmed milk).
- Use butter or margarine sparingly. Try low fat spreads as an alternative.
- Choose lean cuts of meat and trim off any visible fat before cooking.
- Grill, steam, poach, bake, boil or microwave instead of frying or roasting with fat.
- Avoid high fat foods such as cakes, pastry, cream, mayonnaise, chips and crisps.

What if I have a poor appetite or I am underweight?

The above advice should not be followed if you have a poor appetite or are losing weight. Please contact your dietitian, doctor or nurse for further advice if you are concerned.

Preventing constipation

Why is constipation a problem?

Constipation can affect how well you dialyse; if you are constipated the dialysis fluid may not be drained fully resulting in a poor clearance of waste products. When you are on peritoneal dialysis it is important to open your bowels at least once a day and the stools need to be soft.

How can I prevent constipation?

There are 4 main factors which can affect bowel movements. These are:

- 1) **Fibre in food**-too much or not enough can cause irregular bowel movements
- 2) **Water**-fluid helps to soften stools. This can be difficult if you are on a fluid restriction. Your Dietitian will be able to help you with this
- 3) **Exercise**-physical activity helps to keep your bowels regular. Regular exercise is important, just 30 minutes of walking a day can help
- 4) **Medications**-you will usually be prescribed laxatives, such as Senna and Docusate to ensure that your bowels are opening regularly

How can I increase my fibre intake?

The following foods are rich in fibre and should be included regularly in your diet:

- Wholemeal, granary or high fibre white bread
- High fibre breakfast cereals (e.g. Weetabix, Shreddies, Shredded Wheat)
- Wholemeal pasta
- Brown rice
- Wholegrain biscuits and crackers (e.g. Digestives, Hobnobs, Ryvita)
- Fruit (fresh, frozen, tinned or stewed) and vegetables (fresh or frozen)

Some of the symptoms of constipation include:

- Opening your bowels less frequently
- Feeling of incomplete emptying after bowel movements
- Straining to open bowels
- Rectal pain when opening bowels
- Dry, hard and lumpy stools
- Abnormally hard or small
- Stomach ache and cramps
- Feeling bloated
- Feeling nauseous
- Loss of appetite

If you are difficulty opening your bowels please speak to your Doctor, Dietitian or Home Therapies Nurses

Foods to avoid in the following food groups

*Please note if you have diabetes then not all of the foods in these groups will be suitable for you. Sugar free or reduced sugar varieties are available however for many of the foods and drinks outlined.

Food Group	Avoid X	Suitable alternatives ✓
Cereals If you have diabetes, avoid sugary cereals	Ready Brek All Bran, Wheat bran, Branflakes, Muesli Cereals containing chocolate, cocoa, nuts. Cereal bars containing nuts/bran e.g. Alpen bars, granola bars.	Porridge oats Weetabix, Shredded Wheat, Shreddies Cornflakes, Special K, Rice Krispies, Ricles, Frosties, Crunchy nut cornflakes – small bowl Cereal bars without nuts e.g. Special K, Rice Crispie Squares, Nutrigrain, Yoghurt Breaks
Breads	Scones Bread containing a lot of seeds and nuts Malt loaf	White/brown/wholemeal/ granary bread, naan bread Pancakes, croissants, crumpets pitta bread, rye bread, bagels, wheaten/soda bread, chapattis, tortilla wraps, breadsticks, melba toast
Cakes and puddings (in moderation you have diabetes or are trying to lose weight)	Malt bread, chocolate cake and biscuits, date and walnut loaf, egg custard, Bakewell tart, cakes made with large amounts of baking powder, e.g. scones, rock buns. Angel Delight Bread and butter pudding Oatcakes Marzipan	Plain/jam sponge, Madeira, cherry cake, cream horn, doughnut, apple slice, Danish pastry, lemon meringue pie, meringue, plain biscuits, shortbread. Some chocolate coated biscuits are lower in phosphate, but must only be eaten in small quantities . E.g. Jaffa cakes, bourbons once or twice a week.
Other savoury foods	Poppadoms Pot noodle Twiglets, Oatcakes Nuts and seeds Biscuits containing nuts and/or chocolate Bombay Mix Twiglets Nut roast	Yorkshire puddings, Dumplings Pastry Sago, tapioca, semolina, flours, Taco shells Pasta Rice Plain couscous (no dried fruit) Plain fresh/dried noodles Unsalted rice cakes Corn crisps (eg. Wotsits, Monster Munch, Doritos, Wheat Crunchies, potato crisps. Plain popcorn, Pretzels (unsalted), water biscuits, unsalted crackers, melba toast, Ryvita: 2 slices a day. (some of these foods are high in salt so limit these)

Food Group	Avoid X	Suitable alternatives ✓
Dairy	<p>Cheeses: Processed cheeses, e.g. Primula, Dairylea, cheese strings, cheese slices</p> <p>Milks: Evaporated, condensed milk and dried milk powder. See phosphate allowances for more information</p>	<p>Spreads: Butter, margarine Creams: double cream, single cream, whipping cream, clotted cream, crème fraiche</p> <p>See phosphate allowances for details of amounts of dairy foods you can eat.</p>
Meat and meat products	<p>Pigeon, Game, e.g. goose, pheasant Veal White and black pudding Shish and Doner kebab meat</p> <p>Offal (liver, heart, sweetbreads, tripe, haggis) are high in phosphate. If you eat these, limit to one item a month.</p>	<p>Lamb, beef, pork, chicken, turkey, duck, venison.</p> <p>Limit ham to once or twice a week. Try to use less processed meats and choose off deli counter.</p> <p>Processed meats are salty and can also be high in phosphate (some preservatives contain phosphate). Some also contain potassium in the form of salt replacers, eg. Potassium chloride. It is best to use fresh meat off the bone or deli meat if possible.</p> <p>Limit processed meats eg. Luncheon meat, corned beef, tongue, spam, sausage rolls to 1-2 of these items a week.</p>
Meat alternatives	No restriction.	Quorn/Soya mince, Tofu, veggieburgers
Fish	<p>Avoid: Anchovies, whitebait, Smoked 'yellow' fish and fish tinned fish in brine. Paté, fish paste Fishcakes Fish roe and taramasalata</p> <p>High phosphate fish – limit to once a month only kippers, hoki, pilchards (sardines), crab, mackerel, herring</p>	<p>Lower phosphate fish include: Cod, haddock, plaice, skate shrimps, crabsticks, whiting, squid/calamari Mussels and cockles are salty.</p> <p>Medium phosphate fish (limit to 1-2 of the below items a week) Sole, tuna, trout, squid, fish fingers Jellied eel, halibut, salmon (fresh/tinned) Turbot</p>

Food Group	Avoid X	Suitable alternatives ✓
Beans and lentils (eg. Chickpeas, baked beans, red lentils, refried beans)	Beans and lentils are a good source of protein and fibre and can be eaten as part of your main meal.	
Drinks Choose reduced sugar/diet drinks if you have diabetes or watching your weight Remember your fluid allowance	Cocoa Malted drinks, e.g. Horlicks, Ovaltine and Bournvita Drinking chocolate, Milkshakes, Lassi, Complan, Build-Up drinks Fresh fruit juices (except for cranberry juice), Hi Juice cordial, tomato/other vegetable juices Soya/black bean drinks	1-2 cups of coffee per day Camp coffee (low in potassium, but high in sugar, so avoid if you have diabetes) 1 small glass of cola a day (higher in phosphate than other fizzy drinks) All types of tea (including fruit, peppermint and herbal teas) Cordial and squash Fizzy drinks soda, tonic, mineral water. Limit Ribena to 1-2 glasses or 1 small carton a day Cranberry juice to 1 small 150ml glass a day
Alcohol (Remember some medicines do not mix with alcohol. Ask your doctor or pharmacist if you are not sure. Do not drink alcohol if your Doctor has advised you not to.)	Government guidelines on alcohol recommend: Men: 3-4 units/day maximum 21 units per week with 2-3 alcohol free days a week, Women: 2-3 units/day maximum 14 units per week with 2-3 alcohol free days a week.	Spirits, sherry, sparkling wine, e.g. Champagne, Cava, Lambrusco Red wine, beer, bitter, lager, cider, port, stout – these are higher in potassium but if your potassium is normal you can have these in small quantities. Spirits tend to be lower in potassium. Your Dietitian can discuss this with you. Remember your fluid allowance and alcohol guidelines.

Food Group	Avoid X	Suitable alternatives ✓
Confectionary (if you have diabetes, avoid these foods)	Chocolate, fudge Marzipan. Nut brittle. Asian sweets containing condensed milk.	Jam, honey, golden/maple syrup, marmalade, lemon curd, sweets, e.g. boiled sweets, mints, marshmallows, chewing gum, Turkish Delight, fruit pastilles, jellies, wine gums. cough sweets
Sauces and miscellaneous	Salt substitutes, e.g. Losalt, Selora Bovril, Marmite, Oxo Pot Noodles Gravy mixes Packet soups Potash Satay sauce Soy sauce/fish sauce – high in salt, avoid/limit if possible Many processed foods can contain potassium chloride (KCl), read labels to check if this is the case and avoid. Your dietitian can help you with this.	Bottled sauces, e.g. tomato ketchup, BBQ sauce – use sparingly Garlic Mayonnaise, salad cream Bisto Gravy Browning, Gravy powders – choose reduced salt varieties if possible Herbs, vinegar, spices, pepper (as long as they do not contain salt) Mustard, horseradish, chilli sauce, curry powder, mint sauce, apple sauce, cranberry sauce, coconut milk in sauces Homemade white sauce/parsley sauce, tomato sauce made from tinned tomatoes
Spreads and Dips	Nutella/chocolate spreads Peanut butter Paté Tahini paste Taramasalata Yeast extract (Marmite, Vegemite)	Tomato salsa Sour cream Hummus Crème Fraiche Mango chutney/other chutneys Lime pickle/other Indian pickles Tzatziki Guacamole

- **Additional information:** Star fruit should be avoided by people with kidney problems. This has been shown to cause neurological problems when eaten by people with a reduce kidney function.

Useful websites:

Kidney Patient Guide Dietary Information

<http://www.kidneypatientguide.org.uk/site/diet.php>

Edinburgh Renal Unit Haemodialysis Dietary Information

<http://renux.dmed.ed.ac.uk/EdREN/EdRENINFObits/dietHD.html>

Lawrence Keogh's rediscovering foods and flavours recipes:

<http://www.kidneyresearchuk.org/file/Cookbook.pdf>

Information on alcohol and unit measurements:

www.drinkaware.co.uk



If you require a special edition of this leaflet

This leaflet is available in large print, Braille, on audio tape or disk and in other languages on request. Please contact:

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