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116 - ADHERENCE TO A PLANETARY HEALTH DIET AND RISK OF CHRONIC KIDNEY DISEASE: A LONGITUDINAL COHORT STUDY FROM THE UK BIOBANK

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Resumen

Background/Objectives: To explore the association between a Planetary Health Diet index (PHDI) and the risk of chronic kidney disease (CKD).

Methods: Data were analyzed from 98,374 middle-aged adults from the UK Biobank cohort without CKD and were followed-up from 13th July 2011 to 8th November 2021. Using at least two 24-hour dietary assessments, we calculated the PHDI score, ranging from 0 to 130 points (highest adherence) based on 14 food groups. CKD cases were obtained from primary care, hospital, and death records. We used multivariable Cox models to estimate hazard ratios (HR), and their 95% confidence intervals (95%CI) to analyze the study associations.

Results: Over a median 9.41-year follow-up, 2,635 participants (2.7%) developed CKD. Comparing the highest to the lowest adherence quintile of the PHDI, the fully-adjusted HR [95%CI] for CKD risk was 0.74 [0.65 to 0.85]. Results remained robust in sensitivity analyses. The major contributors to the lower CKD risk were high consumption of vegetables (HR per 2-points increment 0.97; CI 95% [0.94 to 0.99]), fruits (0.97 [0.95 to 0.99]), and whole grains (0.97 [0.96 to 0.99]), and low consumption of starchy vegetables (0.98 [0.95 to 1.00]), poultry (0.98 [0.95 to 1.00]), and added sugars and fruit juices (0.93 [0.88 to 0.98]).

Conclusions/Recommendations: In this cohort of middle-aged and older British adults, greater adherence to the PHDI was associated with a lower CKD risk. Promoting this environmentally sustainable dietary pattern may also help reduce the burden of CKD.

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