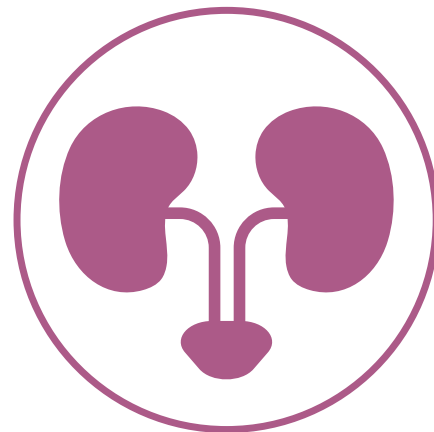




肾脏和泌尿系统疾病

猫慢性肾病 (CKD)



10 岁以上的猫中约有三分之一被诊断为慢性肾病^{1,2}。在猫中, 尽管存在与品种相关的 CKD 病因, 例如波斯猫常见的多囊肾病, 但病因通常是特发性的³。

根据国际肾脏病学会 (IRIS) 制定的指南, 可基于临床检查和实验室检查对猫的 CKD 进行“分期”, 并结合医疗和治疗性饮食进行管理。

CKD 患猫的营养管理有四个总体目标: 维持充足的营养; 减轻 CKD 的临床后果, 包括尿毒症体征; 解决因肾功能障碍导致的体内稳态变化; 减缓疾病进展并延长寿命⁴。虽然这种疾病具有渐进性, 但个体化的医疗和营养管理可以帮助许多 CKD 患猫存活多年⁵。

重要信息

- 营养状况的连续评估以及为患宠定制的营养计划对于护理至关重要⁶。
 - 评估肌肉质量尤为重要, 因为肌酐在肌肉质量下降的患宠中可能会产生误导性偏低的结果⁷。
 - 瘦体重的流失与衰老和 CKD 所致的死亡率增加有关^{5,7}。
- 确保摄入足够的热量。如果能量需求得不到满足, 身体组织就会发生分解代谢, 导致瘦体重流失, 并增加 CKD 患猫的发病和死亡风险⁸。
 - 避免对患猫进行不必要的饮食改变, 以降低因厌食症而导致拒绝特定饮食的风险。需要改变饮食时, 请在猫感觉良好的情况下逐步进行⁶。
- 关键营养因素包括磷、蛋白质、钾、Omega-3 脂肪酸和碱化缓冲液。对于中度至重度 CKD 患猫, 治疗性肾脏饮食比成年猫维持期饮食更有利于临床结果 (生存期更长, 尿毒症危象更少)^{4,9-12}。
 - 在 CKD 和高磷血症患猫中, 磷的调节作用被破坏, 并伴随甲状旁腺激素 (PTH) 或成纤维细胞生长因子 23 (FGF23) 的升高, 进一步加剧了现有肾脏疾病带来的持续损伤。根据 IRIS 分期, 通过限制饮食中的磷摄入量和使用磷酸盐结合剂来管理血清磷酸盐水平⁴。

您知道吗?

虽然对于人类 CKD 患者, 通常会限制饮食中的钠摄入量, 但猫的相关证据表明这样做不仅没有必要, 而且过度限制可能有害^{2,10}。

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重要信息 (续)

- 猫需要高蛋白质含量的饮食, 老年猫的需求量则更高。目的是避免蛋白质摄入不足进一步加剧瘦体重流失, 同时也要避免过量摄入。⁶
 - 根据现有证据, 对于 CKD 患猫而言, 限制蛋白质摄入本身并不必要。¹⁰
 - 在 CKD 早期阶段维持较高的蛋白质水平可能有助于保持瘦体重。¹³⁻¹⁵
 - 后期阶段的适度蛋白质摄入限制可能有助于减少含氮废物的积累。⁴
- 维持充足的钾对正常肾功能至关重要, 低钾会导致 CKD 或使 CKD 恶化。⁶
 - 大多数治疗性肾脏饮食均会补充钾, 但应定期监测 CKD 患猫的血钾水平。¹⁶⁻¹⁹
- 通常建议为 CKD 患猫补充鱼油中的 Omega-3 脂肪酸。^{10,11,20}

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