INTRODUCTION: Vegetarian diets are gaining popularity worldwide and data on the characterization of vegetarian individuals in Portugal is currently unavailable.

OBJECTIVES: to compare sociodemographic, lifestyle and anthropometric characteristics among vegetarian and non-vegetarian populations.

METHODOLOGY: 464 healthy adults following an omnivorous (OMNI), lacto-ovovegetarian (LOV) or vegan (VEG) dietary pattern for at least 1 year were recruited in this cross-sectional study. Weight, height, waist circumference (WC), body composition (eg. visceral fat (VF), muscle mass (MM), total body water (TBW)), blood pressure (BP) and handgrip strength (HGS) were measured. Participants completed a sociodemographic and lifestyle questionnaire.

RESULTS: 422 individuals (72% females) were included, of whom 58% were OMNI, 25% were LOV and 17% were VEG. Global median (IQR) age was 34(26-44) years, with LOV and VEG being younger compared to OMNI, p=0.004. Males by dietary patterns were distributed as: OMNI(64%)>VEG(20%)>LOV(16%), while distribution of females followed a different trend: OMNI(56%)>LOV(29%)>VEG (16%) (p=0.026). Education, household monthly income, smoking status, physical activity, HGS or BP were not different between groups. Among VEG, the proportion using nutritional supplements was the highest (86%), followed by LOV (54%) and OMNI (29%) (p=0.001). BMI was adequate in all groups, being the lowest in VEG group (median (IQR) BMI of 22.4 (20.4-25.6)kg/m2, p=0.024). WC and VF were the lowest in LOV group (median (IQR) WC in LOV of 79.3 (71.9-86.7)cm, p=0.001; median (IQR) VF in LOV of 3.0 (1.5-5.0), p=0.012). OMNI individuals tended to have higher MM (median (IQR) in kg: 45.5 (40.5-55.0), 43.7 (40.3-48.3) and 43.0 (39.3-53.4) for OMNI, LOV and VEG, respectively, p=0.077). TBW was adequate in all groups, being the highest in VEG group (median (IQR) of 53.1 (50.6-57.0)%, p=0.032).

CONCLUSIONS: Characteristics differed between dietary patterns, with lower values of BMI, WC, VF and MM and higher TBW in the LOV or VEG groups.

PO52. NUTRITION IN TRANSGENDER'S HEALTH: AN EXPLORATORY NINE CASE STUDY

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INTRODUCTION: Considering the potential effects of cross-sex hormonal therapy on the nutritional status of transgender individuals, and the lack of widely available data on nutritional status and nutrition guidelines, it becomes crucial to study their food habits and nutritional status to provide adequate nutrition care during the transition process.

OBJECTIVES: To study the nutritional status of transgender individuals in the adult age group (18 to 65 years old) residing in Portugal.

METHODOLOGY: An exploratory nine case study report was conducted. A food frequency questionnaire was used to assess the usual dietary habits of the sample. Anthropometric parameters (weight, height, waist and gluteal circumferences) were measured, and body mass index (BMI), waist-to-hip ratio, waist-to-height ratio, body roundness index (BRI) and body shape index (BSI) were calculated. The Estimated Energy Requirements (EER) and their mean values obtained using different gender transition approaches were compared. The nutritional intake was compared to the IAN-AF 2017 results for the adult Portuguese population.

RESULTS: Nine transgender individuals participated in the study. A high percentage of a high BMI, indicating overweight status (66.7%), increased to very high risk of metabolic complications (33.3%), round body (out of healthy zone) according to the BRI classification (33.3%), and a high BSI classification (22.2%) were identified.

A high intake of both sodium and lipid/total fat and a low intake of vitamins D and E were observed. Hormonal therapy users showed a higher percentage of overweight/obesity than non-users (44.4% vs 22.2%). The different EER approaches showed a mean difference of 59 Kcal (range -833 to 673). The nutrient intake results compared with the general Portuguese population showed differences but without statistical significance.

CONCLUSIONS: These results show that transgender individuals need a comprehensive nutritional status assessment and a tailored nutrition care process.

PO53. NUTRITIONAL RISK IN HEMODIALYSIS PATIENTS: IS IT INFLUENCED BY THE FUNCTIONAL STATUS?

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INTRODUCTION: Malnutrition and functional status impairment are common conditions in hemodialysis (HD) patients.

OBJECTIVES: Evaluate if the functional status influences the nutritional risk in HD patients.

METHODOLOGY: Observational cross-sectional study of a cohort of 236 HD. We assessed the nutritional risk through Malnutrition Screening Tool (MST) and Patient Generated – Subjective Global Assessment Short Form (PG-SGA SF). Functional status was obtained through Barthel Index (BI). Patients with MST ≥ 2 points were classified at risk of malnutrition. Through PG-SGA SF, patients were classified as low (0-3 points), medium (4-8 points) and high risk of malnutrition (≥ 9 points). Spearman correlation and linear regression between nutritional risk assessment tools and the BI were performed. The multivariate model was adjusted to age, gender, dialysis adequacy, dialysis vintage. All statistical tests were performed using SPSS 22.0 software.

RESULTS: Mean age was 69.6±14.0 years and median HD vintage of 7.1 (2.0-10.0) years. MST classified 52.1% of the patients at risk of malnutrition, whereas with the PG-SGA SF, 39.4% and 14.8% were at medium and high risk of malnutrition, respectively. According to the BI, 49.6% of our population was considered independent, 22.9% had mild dependence, 14.4% moderate, 9.3% severe and 3.8% total dependence.

A negative correlation was found between MST and BI scores (r=-0.208; p=0.001) and between PG-SGA SF, and the functional status (r=-0.5; p<0.001). The dependence level was a predictor of higher nutritional risk both measured with the MST [β=-0.205; CI 95%: -0.010-(-0.002)] and PG-SGA SF [β=-0.412; CI 95%: -0.076-(-0.042)]. After adjustment the p-value remained statistically significant (MST: p=0.006; PG-SGA SF: p<0,001).

CONCLUSIONS: More than a half of our patients were at nutritional risk and a half were considered with any grade of dependence. The functional status correlates with patient´s nutritional status as HD patients with higher dependence levels are at higher risk of malnutrition.

PO54. OBESITY AND ABDOMINAL FAT IN ADULTS WITH ACHONDROPLASIA

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