Abstract

Although existing for a number of years, the popularity of high-protein diets has become increasingly higher due to the epidemic proportions obesity has reached worldwide. Even with their widespread use, valid concerns still exist regarding their effects on kidney health. The use of a high-protein diet has been linked with glomerular hyperfiltration and hyperemia, accelerated decline in chronic kidney disease, increased proteinuria, diuresis, natriuresis and kaliuresis with associated blood pressure changes, increased risk for nephrolithiasis, and various metabolic alterations. Limitations regarding studies in these fields include lack of a universally accepted definition for high-protein diets, the lack of long-term human studies, which forces one to rely on short-term circumstantial studies, and the lack of studies regarding the effects of high-protein diets on obese individuals. Furthermore, it is likely the short-term impact of high-protein diets on renal function differ from that of chronic consumption. The theoretical risks of this type of diet must be discussed with whom is going to start said diet, even though there are no clear renal-related contraindications in individuals with healthy kidney function. On the other hand, high-protein diets may seriously damage the kidney of a chronic kidney disease patient and should be avoided if possible. Thus, and since chronic kidney disease is a silent disease, all individuals, before initiating such a diet, should undergo screening serum creatinine measurement and urinary dipstick test for proteinuria.

Key Words: Diet; High-protein; Kidney function; Proteinuria; Glomerular Filtration Rate; Renal risk.