



APD Hotline 1800 812 942

Website: [www.daa.asn.au](http://www.daa.asn.au)

**ACCREDITED PRACTISING DIETITIANS**

**YOUR PROFESSIONAL NUTRITION AND DIETETIC PARTNERS**

Accredited Practising Dietitians (APDs) can advise your patients on the specific nutritional management of chronic health conditions. They translate scientific information into individualised and practical dietary advice to assist patients to manage their condition. Nutritional management should be reviewed by an APD periodically.

Improving patient outcomes through medical nutrition therapy		
Diagnosis/condition	Indication for referral	Benefits of Accredited Practising Dietitian involvement
<b>All</b>	Diagnosis Change in clinical markers or medication Undesirable change in body weight	Better understanding of dietary management Improved dietary intake Improved clinical outcome
<b>Anaemia</b>	New diagnosis Poor dietary intake Symptoms persisting	Improved nutritional status Improved blood biochemistry
<b>Asthma</b>	Chronic corticosteroid use Undesirable weight change	Improved body weight (BMI*)
<b>Cancer</b>	Loss of appetite Poor dietary intake Taste changes associated with treatment Undesirable weight change	Improved nutritional status Improved body weight (BMI*)
<b>Chronic fatigue syndrome</b>	Food intolerance Poor dietary intake Undesirable weight change	Improved nutritional status Improved body weight (BMI*)
<b>Chronic Obstructive Pulmonary Disease</b>	Poor appetite Poor dietary intake Undesirable weight change BMI* < 20	Improved nutritional status Improved body weight (BMI*)
<b>Coeliac disease</b>	New diagnosis Poor understanding of nutritional management Abdominal pain Diarrhoea Undesirable weight change	Treatment of symptoms Improved nutritional status Normal or improved bowel habits Improved body weight (BMI*)
<b>Congestive Cardiac Failure</b>	Poor appetite Fluid retention BMI* <20 or >25	Improved cardiac function Improved body weight (BMI*)
<b>Constipation</b>	Recurring	Normal or improved bowel habits
<b>Coronary Heart Disease</b>	New diagnosis Poor understanding of nutritional a management	Improved cardiac function Reduced risk of infarction
<b>Depression</b>	Poor appetite Inadequate dietary intake Binge eating Emotional eating Undesirable weight change	Improved nutritional status Improved body weight (BMI*)
<b>Diabetes</b>	New diagnosis Unstable BGLs Elevated HbA1c Poor understanding of nutritional management Changes to medication prescribed Undesirable weight change	Improved BGL control Improved HbA1c levels Reduced risk of complications Improved body weight (BMI*)
<b>Diarrhoea</b>	Recurring	Normal or improved bowel habits
<b>Disability – physical or mental</b>	BMI* <20 or >25 Poor dietary intake Difficulty chewing, swallowing or feeding self Undesirable weight change	Improved nutritional status Improved body weight (BMI*)
<b>Diverticulosis / Diverticulitis</b>	New diagnosis Abdominal pain Constipation	Normal or improved bowel habits Minimised abdominal discomfort
<b>Eating disorders</b>	Poor dietary intake including restrictive dieting Bingeing Purging, laxative abuse or excessive exercise Weight change or overly concerned with weight	Improved nutritional status Improved body weight (BMI*) Improved body image and self esteem Improved eating behaviour <i>Should only be implemented with psychological counselling &amp; support</i>

\*BODY MASS INDEX (BMI) = WEIGHT (KG)/HEIGHT<sup>2</sup> (M)

Diagnosis/condition	Indication for referral	Benefits of Accredited Practising Dietitian involvement
<b>Food allergy or intolerance</b>	New diagnosis or suspected intolerance Poor understanding of nutritional management Undesirable weight change	Dietary therapy essential to management Management of symptoms Improved nutritional status
<b>Gastro-oesophageal reflux</b>	New diagnosis	Minimised discomfort
<b>HIV positive</b>	Loss of appetite Poor dietary intake Undesirable weight change	Improved nutritional status Improved body weight (BMI*)
<b>Hyperlipidaemia/dyslipidaemia</b>	Prior to or in combination with statin therapy Elevated TC, LDL-C, TG Low HDL-C Poor understanding of nutritional management	Improved blood lipid levels Improved body weight (BMI*)
<b>Hypertension</b>	Elevated systolic and or diastolic blood pressure BMI*>25	Normal or improved blood pressure Improved body weight (BMI*)
<b>Inflammatory bowel disease (Crohn's disease, ulcerative colitis)</b>	New diagnosis Weight loss Poor understanding of nutritional management	Normal or improved bowel habits Minimised abdominal discomfort Improved nutritional status Improved body weight (BMI*)
<b>Insulin resistance or Impaired Glucose Tolerance</b>	BMI*>25 Elevated insulin levels Symptomatic hypoglycaemia	Improved insulin levels Reduced risk of developing diabetes Improved body weight (BMI*)
<b>Irritable bowel syndrome</b>	Abdominal pain Constipation Diarrhoea Nausea Bloating	Normal or improved bowel habits Minimised abdominal discomfort
<b>Liver Disease</b>	Poor appetite Ascites Encephalopathy Undesirable weight change	Improved nutritional status Improved body weight (BMI*)
<b>Metabolic Syndrome</b>	Elevated BGLs Elevated blood pressure Elevated lipids BMI*>25	Improved BGLs Improved blood pressure Improved blood lipid levels Improved body weight (BMI*)
<b>Multiple sclerosis/Motor neurone disease</b>	Swallowing difficulties Constipation Poor dietary intake Difficulty feeding self Undesirable weight change	Improved nutritional status Improved bowel habits Improved body weight (BMI*)
<b>Obesity</b>	BMI* > 30 and medical complication Child or adolescent	Weight loss Understanding of nutritional needs Support and motivation to make dietary changes Improved medical condition
<b>Osteoporosis</b>	New diagnosis	Reduce disease progression
<b>Parkinson's disease</b>	Swallowing difficulties Constipation Prescription of levodopa Poor dietary intake Difficulty feeding self Undesirable weight change	Improved nutritional status Improved bowel habits Maximise effect of levodopa Improved body weight (BMI*)
<b>Polycystic Ovary Syndrome</b>	BMI*>25 Elevated insulin levels	Improved body weight (BMI*) Improved insulin levels
<b>Renal Disease</b>	Elevated urea, creatinine, potassium, phosphate Poor appetite Fluid retention Undesirable weight change	Normal or improved biochemistry Improved nutritional status Improved body weight (BMI*)
<b>Schizophrenia</b>	Weight gain Prescription of clozapine or olanzapine Elevated BGLs, insulin or lipid levels	Improved body weight (BMI*) Improved BGLs, insulin and lipid levels Reduced risk of heart disease and diabetes

\*BODY MASS INDEX (BMI) = WEIGHT (KG)/HEIGHT<sup>2</sup> (M)