

ABSTRACT

BACKGROUND: Studies which were realized in the Czech Republic and also abroad found that hepatitis C is spreading among injection drug users. Literature wrote how would a person with HCV should eat in addition to development and pharmacotherapy of this disease. Literature recommends which food stuff is good for HCV person, how to prepare meal. Foreign studies have shown that nutrition counseling is good for whole process of treatment for addicted people.

AIMS: The main aim of this research was to find if therapeutic communities for drug users had a special menu for clients with HCV. It was important to know how to enable the special boarding, which processes and food stuff were used. Subsequently menus of each community were evaluated in terms of supply energy, proteins, carbohydrates, fat and fiber.

METHODS: The process of obtaining the data was conducted via email and telephone communications with each of the therapeutic community. The base of the research was one week menu from each community. Menus were evaluated in terms of nutritional composition. Food stuff were finally entered into the program Kalorické tabulky, which assessed the amount of the basic nutrients in the meals.

RESULTS: Special menu for people with HCV had only 3 communities. The other communities tried to include the dietary advices and preparation of meals for those clients to the menu. Not all communities met the daily energy intake. Meals included lot of fat in many communities. Intake of fruit and vegetable was missed very often. Each of the community didn't fry the meal.

CONCLUSIONS: Each of the therapeutic community tried to use a dietitian recommendation for people with hepatitis C. Communities also use food stuff, which weren't contrary to recommendation for people with HCV. It would be good that the results of this study will be developed in other research, for example in client's satisfaction with the meals in therapeutic communities. It would also be good to map out the current food intake of clients who do not need any special diet. The results could be useful for staff of therapeutic communities to be more involved in serving and preparing meals as well as experts from the field of nutrition (dietitians, nutritional therapists). They might focus more on the population of drug users in general and more educate them and work with them.

KEY WORDS

Virus hepatitis C, therapeutic community, diet, drug user