



# Hyperkalaemic periodic paralysis – dietary advice: information for families

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Hyperkalaemic periodic paralysis causes attacks of muscle weakness when the levels of potassium in the blood increase. As well as taking medications, the frequency and severity of attacks can be helped by making adjustments to what your child eats. This information sheet from Great Ormond Street Hospital (GOSH) explains how you can review your child's diet and introduce swaps to reduce their potassium levels.

We usually suggest starting a food diary to keep track of what your child eats and when and whether they have any attacks of weakness. This can be a helpful way of working out which foods are raising your child's potassium levels. This will not work for every child but can be helpful for many.

You can then discuss your child's food diary with the specialist nurse to see where changes could be made. It is important to ensure that you do not cut out potassium completely as it is important for the body to function normally. Too little is as harmful as too much. Always discuss any dietary changes with the specialist team and if needed with a dietitian.

Potassium is found in many foods and drinks including fruits, vegetables, potatoes, milk and some snack foods. You do not need to avoid all high potassium foods – it may be sufficient to just reduce your child's intake of these foods, look at lower alternative sources of potassium or just eat them in moderation.

## Foods high in potassium and lower swaps

**Potassium rich fruits:** apricots, bananas, dates, grapefruit juice, kiwi, oranges, fresh pears, prunes, avocados, cantaloupes, dried figs, honeydew melons and nectarines.

**Lower potassium swaps:** blueberries, cranberries, lemons, peach juice, papaya juice, pear juice and canned pears.

**Potassium rich vegetables:** asparagus, butter beans, potatoes, okra, sweet potatoes, tomatoes, spinach, pumpkin, greens and Brussels sprouts.

**Lower potassium swaps:** bean sprouts, alfalfa sprouts, wax beans, raw cabbage, peppers, cucumber, watercress, water chestnuts and green beans, boiled potatoes (maximum 150g a day).

**Potassium rich starchy foods:** high-fibre low-glycaemic index carbohydrates can be high in potassium. Try whole grain breads as an alternative.

**Lower potassium starchy foods:** pasta, rice, wholegrain bread, couscous.

Protein foods (meat, fish and chicken) also contain potassium so may need to be eaten in moderation.

Dairy foods and alternatives such as cream cheese, crème fraiche, rice or oat milk are all low in potassium so can be eaten freely.

Chocolate and liquorice sweets also contain fairly high amounts of potassium and we recommend they be kept as treats.

## Portion sizes

One portion of fruit (80g) or vegetables is approximately one child's handful or two to three tablespoons.

Portion sizes for proteins (meat, fish and chicken) should ideally be the size of your child's palm.

A portion of cheese is around a small matchbox-sized piece.

## Further information and support

This list is not exhaustive; if you need further information please speak to your specialist nurse or local dietitian.

Please contact the Clinical Nurse Specialist in the Dubowitz Neuromuscular Centre at GOSH. Call 020 7405 9200 ext 1195 or email [nmchan@gosh.nhs.uk](mailto:nmchan@gosh.nhs.uk).

Muscular Dystrophy UK is the main organisation offering support and advice to anyone affected by a neuromuscular disorder. Call their helpline on 0800 652 6352 or visit their website at [www.musculardystrophyuk.org](http://www.musculardystrophyuk.org)