Comprehensive education course for Asian diabetes educators

Nutrition therapy in diabetes

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Example



46 years old woman, T2D for 1y, oral anti-diabetic drugs Ht 161 cm / Bwt 76 kg

Parameters	Values	Parameters	Values	
Glucose (FBS)	128 mg/dL	Glucose (PP2)	252 mg/dL个	
Total Cholesterol	179 mg/dL	HDL- Cholesterol	52 mg/dL	
Albumin	4.6 g/dL	TG	321 mg/dL 个个	
HbA1c	7.9%	γ-GTP	42 U/L	

High PP2 glc & TG... Why?



Doctor, Because I wanted to loose my weight and my friend told me that potato is good for diabetes, I ate only two meals a day with potatoes a lot.



Example



What is the problem?

- 1. Too much Carbs!
- 2. Low basic knowledge of nutrition/food
- 3. Unbalanced meal pattern

Needs Nutrition therapy!



Objective

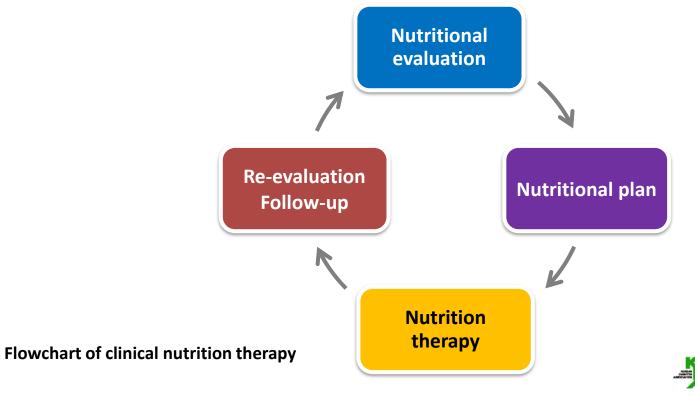
- Understand the clinical nutrition in diabetes
- Practice individualized clinical nutrition
- Evaluation of caloric requirement
- Meal planning
 - Principles of diet therapy
 - Food exchange table
 - hand portion method
 - The plate model



Clinical nutrition

Clinical nutrition

: A comprehensive service provided by clinical nutritionist to treat diseases or injuries



- Diabetic clinical nutrition
- : Assistance provided to help diabetic patient correct his/her behavior pattern and improve overall management of diabetes, including nutritional status.

- What diabetic patients must know
- : Educating diabetes and diet therapy
 - Individualized meal plan that best fits the lifestyle and diabetes management.



Objective of diabetic clinical nutrition

Maintain blood glucose, serum lipid, blood pressure within normal limit

- Provide adequate calories :
 - Adult- Attain and maintain ideal body weight
 - Children/adolescent- Normal growth and development
 - Pregnancy, breastfeeding, critical care patients, etc. –
 provide adequate calorie and nutrition
- Preventing and treating acute/chronic complications of diabetes
- Promoting health by choosing healthy food and exercising regularly
- Fulfilling each individual's nutritional requirement while also considering lifestyle preferences



Practicing *individualized*clinical nutrition



Practicing individualized clinical nutrition

- Health status (blood labs, complications, drug, etc.)
- Socio-economic status
- Body measurements (BMI, WHR)
- Diet problem (teeth)
- Diet evaluation (Habit, history)

Evaluation

start

Followup

Evaluating effects of nutritional management: modify diet plan if necessary

Individualized target setting based on nutrional evaluation and therapy goal

Target setting

Education

Using diet planner to construct and educate appropriate diet plan



Diet evaluation

Methods

- Diet record
- Learn normal diet through interview
- Self-record:
 (2 weekdays, 1 weekend)
 Date, time, location,
 food name, ingredient,
 amount, supplements,

Content

- Diet pattern everyday/special day (regularity, binge eating, etc.)
- Amount, frequency
- Diet balanced?
- Eating out, snack, alcohol
- Depending on folk medicine?
- Socio-economic status
- Problems in eating (teeth, etc.)



exercise

Helps plan, target, and reinforce diet therapy



Example of diet record

Oct. 4th, 2018

Туре	Time (place)	Food	Ingredient	Amount (about)	Blood glucose
Breakfast 8:00 (Home)		Barley rice	Barley	1/3 bowl	
*	`	Roast seaweed	Seaweed Sesame oil	½ plate ⅓ teaspoon	
		Kimchi	Cabbage kimchi	½ plate	
		Coffee	Coffee Sugar Powder milk	5g 10g(fat:2g)	
Snack	10:30 (Home)	Milk	Low fat Milk	200mL	
Lunch	13:00 (Work)	White rice	White rice	1 bowl	
			Cabbage- miso soup	Cabbage	½ plate
		Fried noodle Kimchi	Noodle, Beef Spinach Sesame oil Cabbage kimchi	½ bowl ¼ plate ½ plate 1 teaspoon ½ plate	230 (2 hours after meal)
Snack				•	olk medicine
Dinner	19:00 (Chinese restaurant)	Noodle with black sauce	Noodle Onion Pork Oil	• E	eer horn) xercise Other
		Pickle	Radish	½ plate	
		Kimchi	Cabbage kimchi	½ plate	
Night snack					Korean Diabetes Asso

Determining caloric requirement



Calculation of caloric requirement

- Calculation based on ideal body weight
- Modified according to activity level, age, weight change, etc.
- Consider normal caloric intake
- Long·short-term target weight based on individual's appropriate weight rather than ideal body weight.
- Consider normal growth/development for children and adolescents



Ideal body weight / Evaluating obesity

Ideal body weight

Appropriate weight to maintain health in everyday life

- Men = Height (m) × Height (m) × 22
- Women = Height (m) × Height (m) × 21

Obesity (BMI)

Current weight (kg)

Height (m) × Height(m)



BMI(kg/m²)	Classification		
< 18.5	Underweight		
18.5~22.9	Normal		
23~24.9	Overweight		
≥ 25	Obese		



Determining caloric requirements in adult

Daily requirement (kcal/day) = IBW (kg) × coefficient for activity level

IBW=ideal body weight

Obesity / Activity level	Caloric requirement		
Obese / Low physical activity	IBW × 25~30 (kcal/day)		
Normal / Average physical activity	IBW \times 30^{-35} (kcal/day)		
Low body weight / Intense physical activity	IBW × 35~40 (kcal/day)		

Ex) IBW 60kg, average physical activity and exercise. Requirement?

 $60 \text{kg} \times 30 \sim 35 = 1800 \sim 2100 \text{ kcal/day}$



Diet planning



3 Major Principles of diet therapy







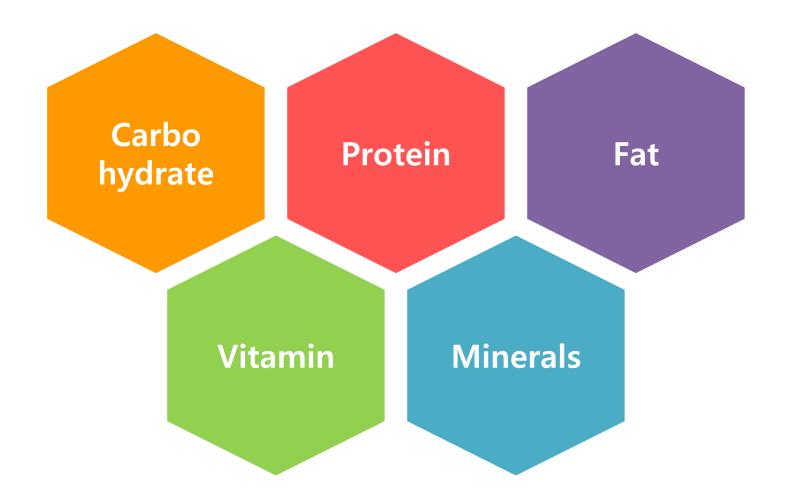


Good diet habit (brief)

- Regularly eat right amount of food at regular interval.
- Beware of simple sugars (sugar, honey, etc.).
- Consume enough dietary fiber.
- Consume adequate amount of fat; restrict cholesterol.
- Avoid salt intake.
- It is recommended to avoid alcohol.
 - Diabetic diet is healthy diet! Families participate together.



Nutrients





Nutrients to blood glucose



Fat



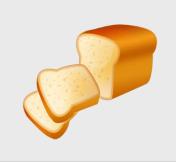
Minimal



Protein



Minimal



Carbohydrate



100% turns into Blood glucose



How can we know amount of carbs?

- 1. Look at the label
- 2. Search on internets
- 3. Use 'Food Exchange Table'



Nutrition Facts Serving Size 4 cookies (30g) Servings Per Container 4
Amount Per Serving
Calories 220 Calories from Fat 110
% Daily Value*
Total Fat 12g 18%
Saturated Fat 6g 30%
Trans Fat 0.5g
Cholesterol 10mg 2%
Sodium 70mg 4%
Total Carbohydrates 25g 8%
Dietary Fiber 1g 4%
Sugars 20g
Protein 3g
Vitamin A 0% • Vitamin C 8%
Calcium 2% • Iron 4%





Diet planning using

- Local food guides
- Food exchange table
- The hand portion method
- The plate model



Simple diabetes meal planning

ADA 2018

A simple and effective approach to glycemia and weight management emphasizing portion control and healthy food choices may be considered for those with type 2 diabetes who are not taking insulin, who have limited health literacy or numeracy, or who are older and prone to hypoglycemia.

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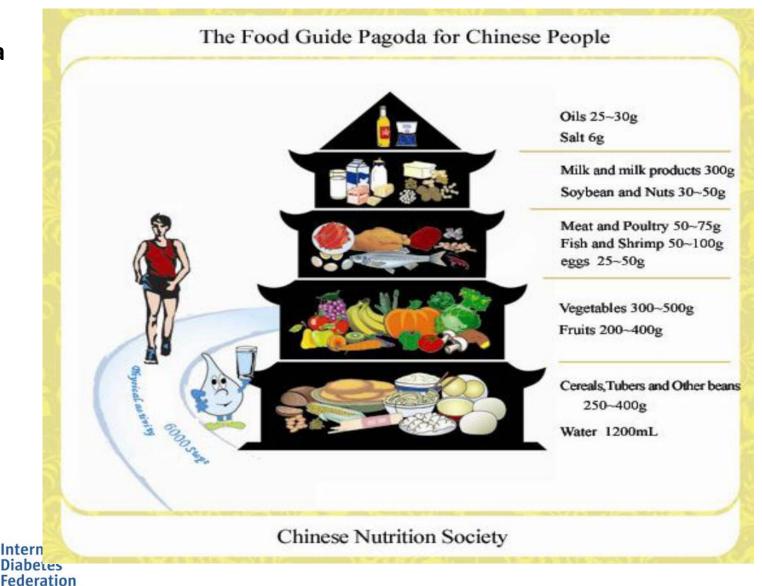


Food Balance Wheels

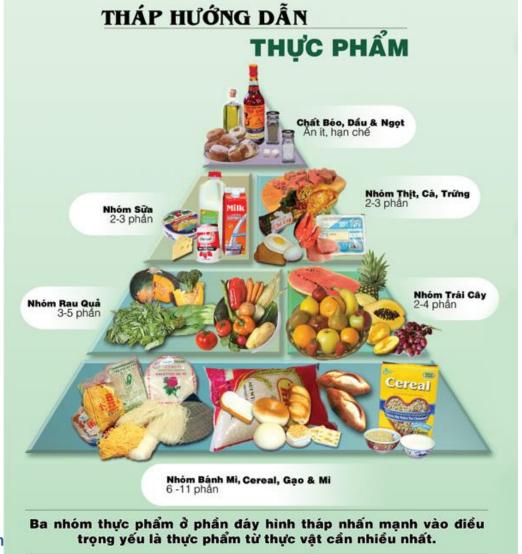
Korea



China

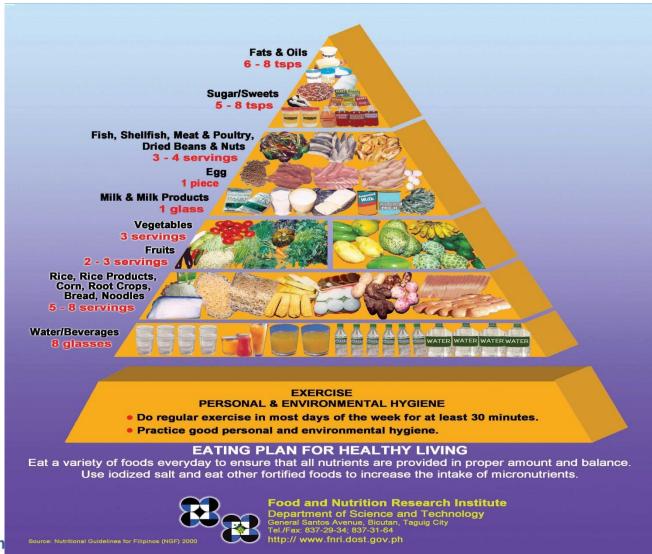


Vietnam





Philippine





Food exchanges

- Similar food types placed in same exchange groups
- Within groups, a single food based on weight, measure, size has the same carbohydrate or kcal value as another

Food from different groups cannot be interchanged ex)

1 exchange unit





≠



1/3 bowl of Rice (70g)

1 slice of Bread (35g)

1½ tsp of Butter



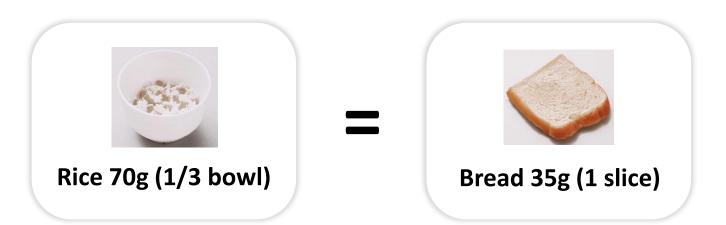
Food exchange table

- Groups everyday food with similar nutritional components into 6 food groups
- Grains, Fish and meat, Vegetable, Fat, Milk, Fruits
- Nutritional component of each food group

		Calories (kcal)	Carbohydrate (g)	Protein (g)	Fat (g)
	Grain	100	23	2	-
Fish	Low-fat	50	-	8	2
and meat	Mid-fat	75	-	8	5
meat	High-fat	100	-	8	8
Ve	getables	20	3	2	-
	Fats	45	-	-	5
Milk	Whole	125	10	6	7
	Low-fat	80	10	6	2
	Fruits	50	12	-	-

8 Units/day

Grain (Carbohydrate 23g, Protein 2g, 100kcal)















Rice cake 50g (3 pieces)

70g (1/2 piece)

Potato 140g (1 piece)

Corn 70g (1/2 piece) Cracker 20g (5 pieces) Grain powder 30g (1/4 cup)

If possible, pick multigrain rice and wheat breads than white rice/bread



5 Units/day

Fish and Meat (carbohydrate 8g, fat 2~8g, 50~100kcal)

Lowfat











Chicken meat 40g (1 piece)

Pork loin 40g (1 piece)

Stingray 50g (1 small piece)

Anchovies 15g (¼ cup diced)

Pollack 15g (½ piece)

Midfat











Beef sirloin 40g (1 piece)

Mackeral 50g (1 small piece)

Hairtail 50g (1 small piece)

Black bean 20g (2 large spoon)

Tofu 80g (1/5 block)

Highfat











Chicken with skin 40g (1 drumstick)

Bacon 40g

Tuna can 50g (1/3 cup)

Fried tofu 30g (5 pieces)

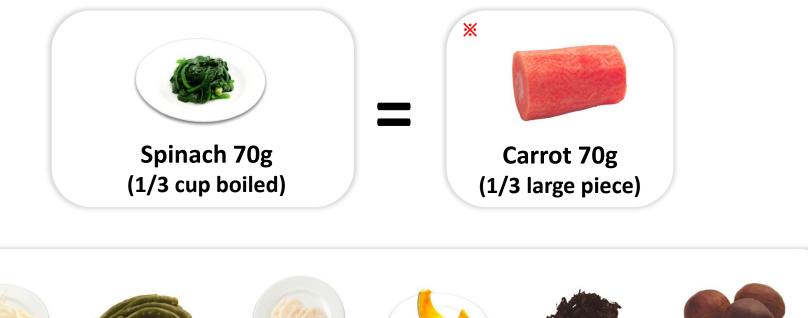
Cheese 30g (1.5 piece)

• Foods in high-fat group also contain large amount of fat and cholesterol.

Beware when planning diet.

7 Units/day

Vegetables (Carbohydrate 3g, Protein 2g, 20kcal)



* Bellflower root 40g

Fresh chili 70g (7~8 pieces)

Lotus root 40g

*Pumpkin 40g (1/10 piece)

Seaweed (raw) 70g

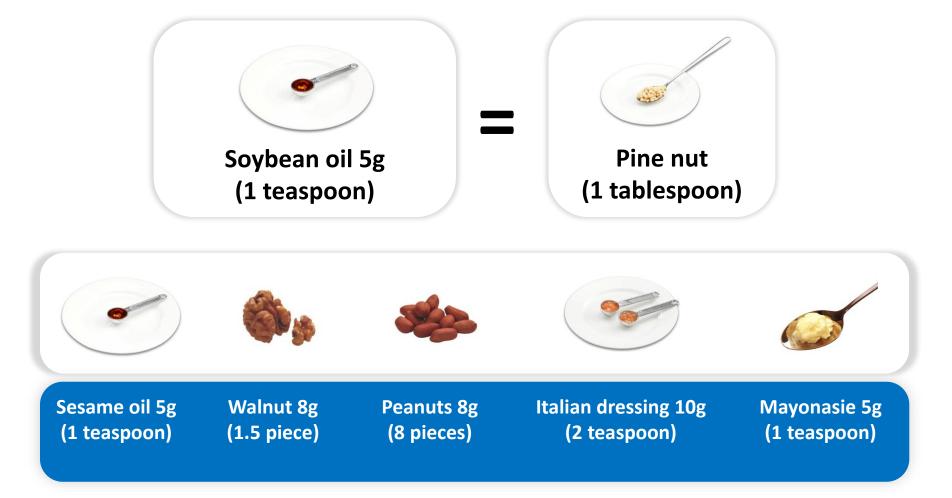
Mushroom 50g (3 large pieces)

Eat raw or marinated instead of juicing to increase dietary fiber



4 Units/day

Fat (fat 5g, 45kcal)



- Avoid deep-fries: use in stir-fry or vegetable marination
- Nuts should be limited to 1-2 units/day for calorie control



1 Unit Milk

(Whole milk: Carbohydrate 10g, Protein 6g, Fat 7g, 125kcal) (Low-fat milk: Carbohydrate 10g, Protein 6g, Fat 2g, 80kcal)



Whole milk 200cc(1 cup)



Soy milk 200cc(1 cup)



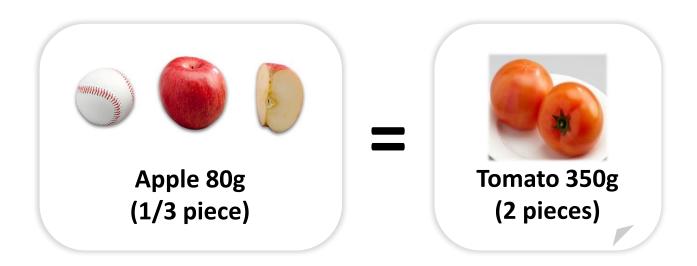
Low-fat milk 200cc(1 cup)

Low-fat milk contains less saturated fat and choleterstol compared to normal milk



2 Units/day

Fruits (Carbohydrate 12g, 50kcal)













Banana 50g (1/2 piece)

Strawberry 150g (7 pieces) Watermelon 150g (1 slice) Tangerine 120g (2 pieces)

Persimmon 50g (1/3 pieces)

• Fruit juices have low dietary fiber. Eat fresh fruits.



Food distribution per meal

- Keeping meal time and amount in regular interval crucial for maintaing steady blood glucose
- Meal frequency and snacks based on everyday lifestyle
- Example of distributing exchange units in 1800kcal meals

Food group		Units	Morning	Snack	Lunch	Snack	Dinner	Snack
Gra		8	2		3		3	
Meat and	Low-fat	2			1		1	
fish	High-fat	3	1		1		1	
Veget		7	2		3		2	
Fa		4	1		1.5		1.5	
Milk		2		1				1
Fruit		2				1		1

• Adjust according to drugs, hypoglycemic time, gestational diabetes, and blood glucose level ______ মাইড়াম

Meal planning using 'Carbohydrate counting'

- Focus on consumed carbohydrates that determined blood glucose, rather than total calories.
- Emphasis on total amount of carb, not the type.

Basic carb. counting

Distribute regular amount of carbohydrate into meals and snacks at same time very day to maintain steady carbohydrate intake

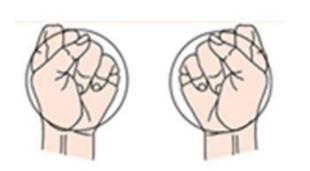
Advanced carb. counting

Multiple insulin injection or using insulin pump

- Not easy to apply to other culture..
 - → need to develop own 'Food Exchange Table'



Handy portion method



Carbohydrates (starch and fruit)

- : choose an amount equivalent to the size of two fists.
- : For fruit use one fist



Protein

: choose an amount equivalent to the size of the palm of your hand and the thickness of your little finger



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Handy portion method





Vegetables

:choose as much as you can hold in both hands.

These should be low CHO vegetables – green or yellow beans, cabbage or lettuce.

Fat

:limit fat to an amount the size of the tip of your thumb.

Drink no more than 250 ml of low-fat milk with a meal

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Plate model

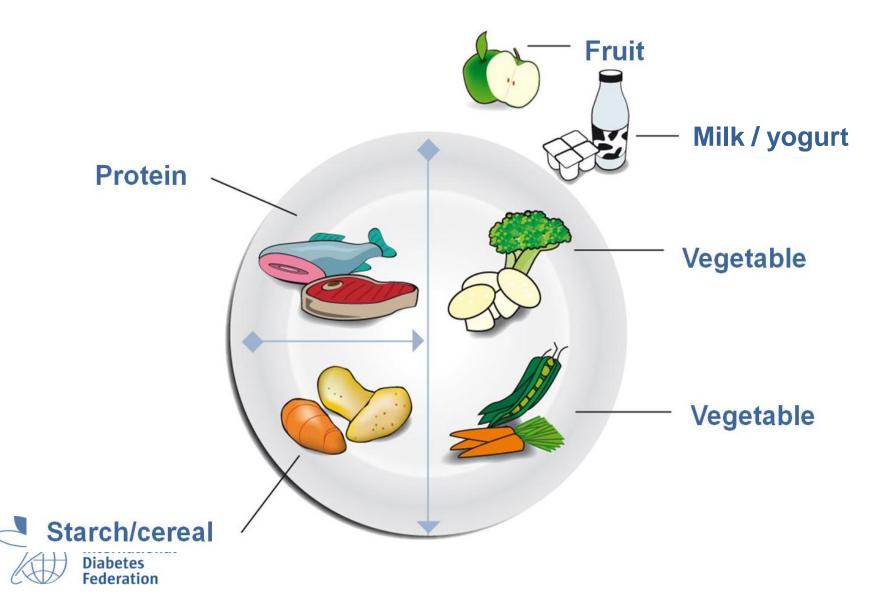


Plate model

Useful as a basic teaching tool for people who

- Have recently been diagnosed
- Want a simple plan or find it difficult to implement other advanced plans
- Have difficulty reading or dealing with numbers
- Learn better by visualising
- Eat out frequently
- Want to reduce the amount of proteins or carbohydrates they ingest

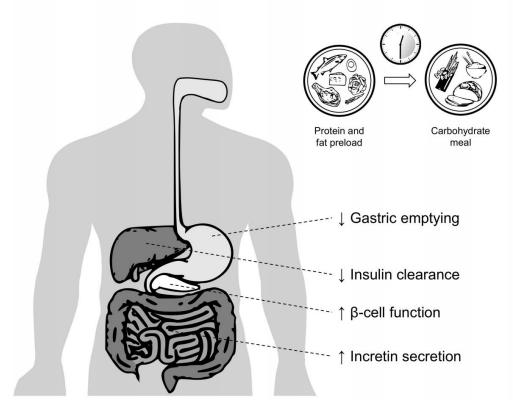


Nutrient Sequence

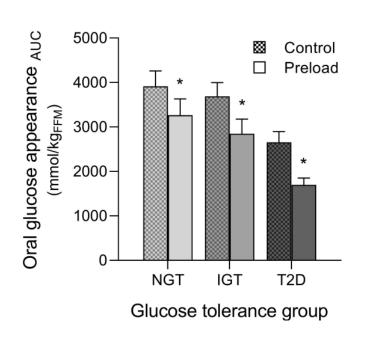
50g parmesan cheese + 50g egg + 300ml water → 30min → main meal



A Schematic representation of glucose-lowering mechanisms



C Oral glucose absorption



Diabetologia. 2015;58(11):2503-12, Front. Endocrinol. 2019;10:144