

Promoting Healthful Eating Patterns Among Patients With Diabetes

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There is a quote attributed to Hippocrates that reads, “Let food be thy medicine, thy medicine shall be thy food.” It is easy to recognize the significance of this advice when working with patients with diabetes. Nutrition therapy has been recognized as a crucial component of diabetes management since the discovery of the disease.

General goals of diabetes nutrition therapy are to achieve and sustain blood glucose and blood pressure as near to normal as possible, as well as a lipid profile that decreases the risk for cardiovascular disease; to prevent chronic complications; to address individual nutrition needs; and to maintain the pleasure of eating.¹ Although it is recommended that a registered dietitian (RD) experienced in diabetes medical nutrition therapy (MNT) take the lead role in providing nutrition care for individuals with diabetes,¹ all health care professionals who see patients with diabetes play a contributing role in promoting healthful eating.

For busy clinicians, messages about healthful eating and physical activity often go unsaid because of the short duration of time actually spent face to face with patients. Health care professionals encountering patients with diabetes throughout their course of care can make a difference by reinforcing positive messages about healthful food choices and physical activity and sharing the belief that it is possible to make changes. These brief messages may be more important than clinicians realize.

Controversy surrounded the recent revelation from celebrity

chef Paula Deen that she had been diagnosed with type 2 diabetes 3 years ago without making it public. Because she is famous for her fat-laden, high-calorie recipes, backlash quickly ensued from fans, health care professionals, the media, and even other celebrity chefs.

Although many were disappointed that Deen has not used her celebrity status to serve as a role model by promoting positive lifestyle changes for people with diabetes, there was also some good news for diabetes health care professionals. First, the fact that there was a backlash at all suggests that the public is aware of the need for healthful eating patterns. Second, consumers may not be as dependent on celebrities for health messages as might be expected.

A recent nutrition trends survey conducted by the Academy of Nutrition and Dietetics among adults ≥ 18 years of age (17.4% of respondents were ≥ 65 years of age) found that the public's most popular source of nutrition information is television, followed by magazines and, increasingly, the Internet.² Although the public prefers convenient sources of information, consumers do not necessarily consider such sources to be the most credible. Seventy-one percent of respondents noted that RDs and nutritionists were a “very credible” source of nutrition information, followed by physicians (64%) and nurses (54%). Additionally, 85% of respondents were aware of RDs and, by an almost three-to-one margin, respondents recognized there is a difference between RDs and nutritionists.²

Patients often present to an initial diabetes education or MNT appointment stating, “Just tell me what I can eat.” Unfortunately, although this may be a frequently heard request, patients often express frustration about how difficult it is to actually implement a healthful diabetes eating pattern. Shortly after the initial discussion with patients regarding diabetes meal planning, a common response is, “I know I should eat better; I'm just not doing it.” Patients are generally aware that how they eat can affect their glycemic control and weight, but translating that knowledge into behavior change is often a barrier to success.

There may be fear that favorite foods will be taken away or that they will have to make drastic changes that they are not ready to make. Reinforcing the message to patients that they do not have to change everything and that the goal is to fit diabetes meal planning and physical activity into their own lifestyle in a way that they can achieve may help minimize their apprehension.

The Academy of Nutrition and Dietetics 2011 survey also explored attitudes relating to nutrition and categorized respondents into three groups: “I'm already doing it,” “I know I should,” and “Don't bother me.”² The trend identified from previous surveys to the most recent is that “people are increasingly paying more attention to their nutritional and physical activity needs.” However, “the findings show there is more work to be done, as more than half the people surveyed admittedly say they are not doing all they can to be healthy.” The respondents who were in the “I know I should”

group tended to want more practical tips to eat better and were more likely to use the Internet for nutrition information.²

Internet Resources

Providing easy-to-follow tips and directing patients to credible resources may assist in transitioning patients from the “I know I should” to the “I’m doing it” category. The U.S. Department of Agriculture (USDA) Choose My Plate Web site (www.choosemyplate.gov) offers simple nutrition tips based on the 2010 Dietary Guidelines for Americans. With basic messages such as “Go lean with protein” and “Make half your grains whole,” it helps patients put knowledge into practice by offering how-to examples.³ Tips for increasing physical activity are also included on this Web site. Sponsored by the Dairy Council of California, the Meals Matter Web site (www.mealsmatter.org) helps people identify a method of meal planning that fits into their lifestyle and then provides suggestions for shopping lists, pantry items to keep on hand, and recipes.⁴ Both the American Diabetes Association (ADA) and the Academy of Nutrition and Dietetics offer helpful information related to nutrition and physical activity. My Food Advisor, available through ADA (<http://tracker.diabetes.org>) is a useful resource providing a database of the nutrient and caloric content of foods, as well as recipes, tracking tools, shopping tips, and more.⁵ The homepage for the public section of the Academy of Nutrition and Dietetics Web site (www.eatright.org/public) offers a

tip of the day and a question of the day in addition to recipes, answers to frequently asked questions, and disease management and prevention strategies.⁶ On this Web site, consumers can also find popular diet reviews written by RDs to help them separate fact from fad when exploring meal planning options. These can be found by selecting “Popular Diet Reviews” from the public homepage. The Calorie King Web site (www.calorieking.com) offers Nutrition Facts information for commonly eaten foods, including restaurant menu items.⁷

Magazines

Consumers continue to mention magazines as a more popular source for nutrition information than the Internet.² Fortunately, there are magazines offering credible nutrition information for people with diabetes. Among them are:

- *Diabetes Self-Management* (www.diabetesselfmanagement.com)
- *Diabetes Forecast* (www.forecast.diabetes.org)
- *Diabetic Living* (www.diabeticlivingonline.com)
- *Diabetic Cooking* (www.diabeticcooking.com)

Whether they prefer Web sites, cookbooks, magazines, or smart phone apps, encourage patients to look for resources that are developed or reviewed by RDs for sound nutrition advice.

All health care professionals have a role in promoting healthful eating. By becoming familiar with available resources and sharing information

with patients, health care professionals are able to offer their patients practical, useful information. By sharing positive health messages during encounters with patients with diabetes during their course of care, what you say can make a difference in moving patients from “I know I should” to “I’m already doing it.”

References

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