

Food and Diabetes "The First Steps" Practice Nurse Day

Emma Bone & Natalie Gilbertson Diabetes Dietitians CACS-GNS Diabetes Service



Nutrition recommendations

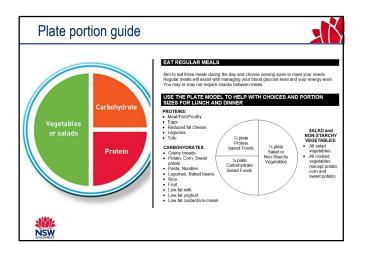
- No "one size fits all" approach
- There are lots of myths about what people with diabetes are allowed/not allowed to eat
- Be mindful of the source of dietary information many fad diets eliminate whole food groups and are nutritionally incomplete (see our Diet Comparison document)
- Adopt an evidence-based approach. The latest guidelines acknowledge a variety of eating styles, including the Mediterranean Diet, the DASH Diet, Vegetarian or Vegan Diets, the Nordic Diet and a moderate carbohydrate intake. [Diabetes UK. (2018). Evidence-Based Nutrition Guidelines for the Prevention and Management of Diabetes].
- Keep it SIMPLE!

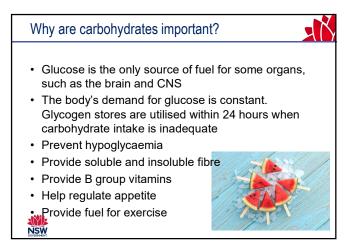
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Simple advice YOU can provide

- Have regular meals, 3 meals +/- snacks
- Choose from our 5 food groups, including vegetables, fruits, wholegrains, meat/alternatives and dairy foods
- Limit saturated fat and trans fat by choosing lean and unprocessed meats and low fat dairy, and include unsaturated fats in moderation
- Limit junk food and takeaway or significantly reduce
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 Limit addition of salt and purchase salt-reduced/no added salt foods
- Limit added sugars from drinks (including juice), Iollies, chocolate, cakes,
- muffins, biscuits, etc
 Increase physical activity as tolerated. Dept of Health guidelines state 2.5-5hours moderate exercise spread across the week + resistance exercise 2x week for 18-64 year olds
- NHMRC Alcohol Consumption Guidelines (2020) state <10 std
- drinks/week, and <4 std drinks/day to reduce risk of harm; less is better.

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Carbohydrate counting

- It is advisable for everyone with diabetes to be aware of carbohydrate in the diet, however not everyone needs to learn how to count carbohydrates
- Try to include a small amount of carbohydrate at each main meal
- The amount of carbohydrate someone needs varies from person to person, and is dependent on many factors including (but not limited to):
 Their post prandial BGL rises
 - Their lifestyle, exercise, work habits
- Whether they're taking hypo-causing medications (Gliclazide or injectable insulin)
- Dietitians are qualified to teach carbohydrate counting and can use exchanges, portions, serves, or grams of carbohydrate
- The type of carbohydrate is important too (i.e. Glycaemic Index)
- Carbohydrate counting is not a specific diet, more a meal planning approach



Mediterranean diet

- Primarily a **plan based diet**, including lots of vegetables, fruit, legumes, wholegrains, beans, nuts, seeds, herbs, spices and **olive oil**
- It is a **holistic approach**, of fresh food, cooking, lifestyle, exercise and social life
- It promotes moderate fish, lean protein and eggs
- One small glass of wine can be consumed once per day



Mediterranean Diet - risks and benefits Referral to an Accredited Practising Dietitian Weight loss · Provides expert dietary advice to help manage Improved glycaemic control including reduced HbA1c diabetes and stay healthy Improved insulin sensitivity, reduced fasting plasma glucose and post prandial glucose Sorts out nutrition fact from fiction Improved cardiovascular risk factors (reduced BP, reduced LDL cholesterol and increased HDL cholesterol) preventing heart disease and · Assesses individual nutritional needs, stroke particularly pertaining to other co-mordibidies Improved non-alcoholic fatty liver, brain function and gut microbiome Reduced risk of dementia and some cancers · Develops personalised eating plans Decreased overall mortality Develops Medical Nutrition Therapy plans There are no risks! <u>Good quality long term evidence into the diet's</u> effectiveness and efficacy, helps with **satiety** and can be **followed on a** long term basis Accredited APD Practising Dietitiar NSW NSW

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