

First line dietary advice for diabetes in Primary Care

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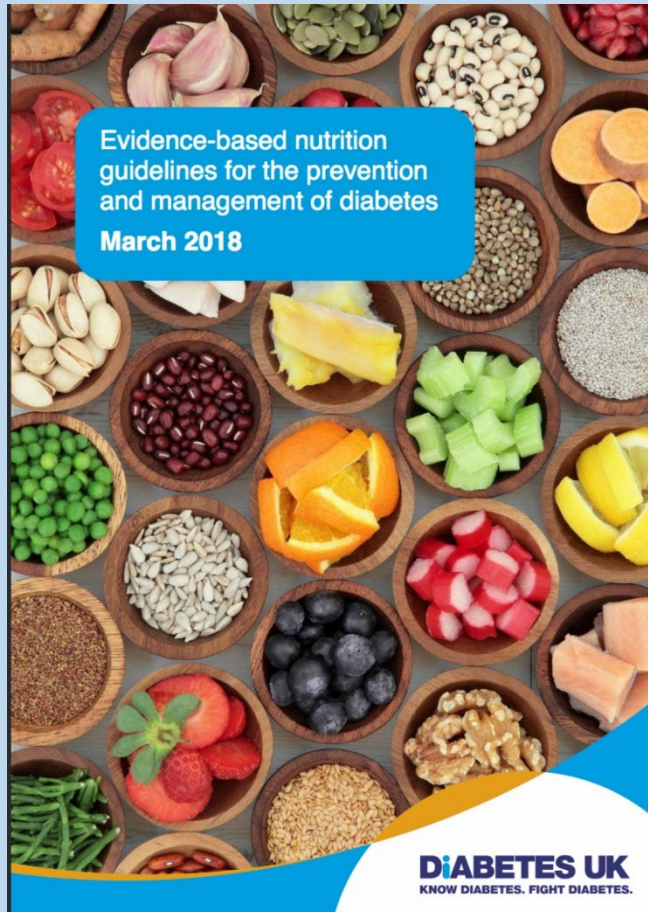
Aims

- Summarise evidence based dietary advice
- Remission
- Address common myths/misinformation
- Discuss onward referrals
- Structured patient education
- Signpost to helpful resources

Which diet?

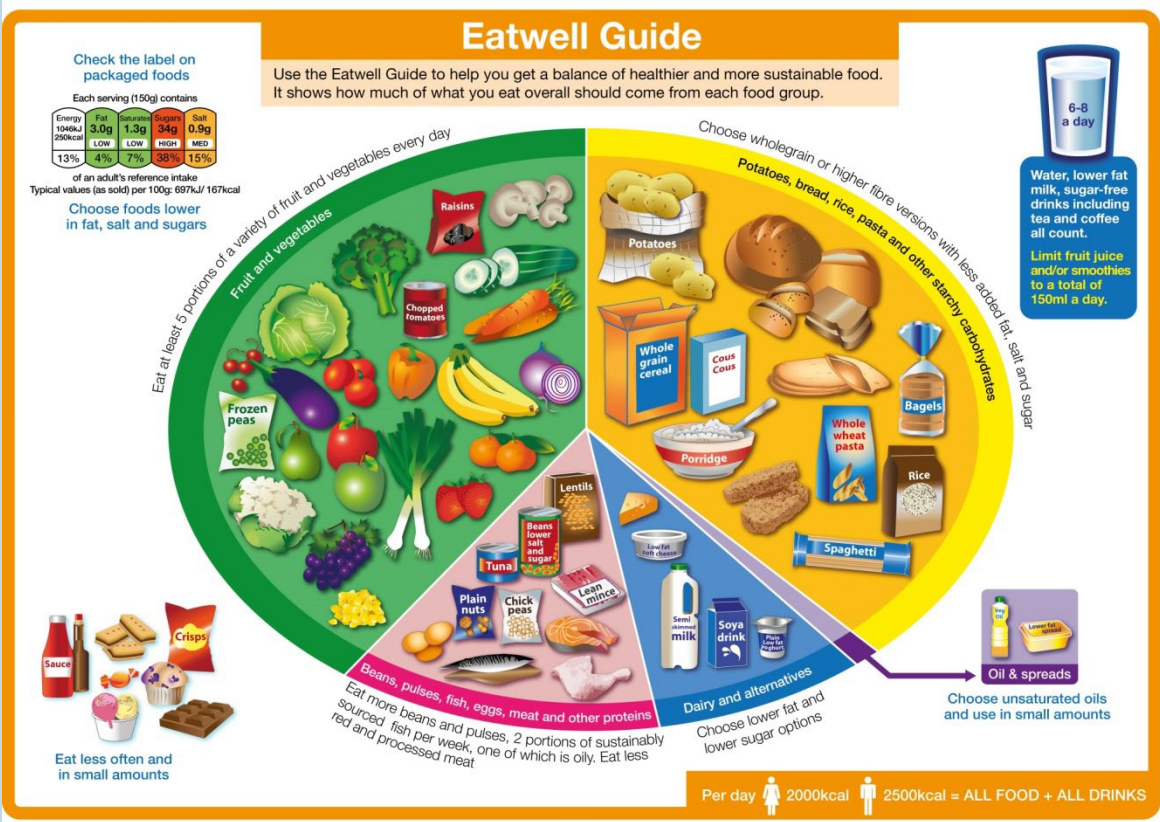
- No one diet is superior over another
- Individual for each patient; depends on patient choice, understanding, previous dieting history and experience
- Common theme with most diets is **total calorie deficit**

Nutrition guidelines



- Improve diet quality
- Mediterranean style diet
- Reduce energy intake
- Reduce total and saturated fat
- Increase fibre
- Increase physical activity

Eatwell Guide



Source: Public Health England in association with the Welsh Government, Food Standards Scotland and the Food Standards Agency in Northern Ireland

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Early weight loss

- 80 – 90 % of people with Type 2 Diabetes are overweight
- Weight loss is the primary nutritional management strategy
- At least 5% weight loss significantly improves HbA1c, total cholesterol, LDL-cholesterol, HDL- cholesterol, triglycerides, blood pressure and insulin sensitivity.

Remission/reversal

- Diabetes Remission can be achieved
- Weight loss of 15Kg as soon as possible after diagnosis
- Motivation required
- The possibility of this option should be discussed and explored

D!RECT Study

Diabetes Remission Clinical Trial

Remission defined as keeping HbA1c below 48mmol/mol(6.5%) without needing Type 2 medication.

TDR of 800Kcal/day, made up of four soups or shakes, 12 weeks
Continued support to gradually reintroduce healthy food

SE Trust pilot based on the D!RECT study, getting similar results

Eligibility criteria

- ✓ age ≥ 18 to ≤ 65 years
- ✓ type 2 diabetes diagnosis in past 0-6 years
- ✓ on ≤ 3 glucose lowering agents but not insulin
- ✓ BMI 27 or higher (adjusted BMI to 25kg/m² for black, Asian minority origin)
- ✓ HbA1c < 87 mmol/mol
- ✓ willingness to continue to attend for annual HbA1c check, retinal and foot screening reviews even if remission achieved
- ✓ has an email account, access to a phone, tablet or computer to access Zoom sessions with camera

Exclusion criteria

- ✗ BMI ≥ 45 kg/m²
- ✗ Current insulin user
- ✗ pregnant or planning pregnancy
- ✗ currently breastfeeding
- ✗ Co-morbidities (cancer, heart attack or stroke in last 6 months, severe heart failure, severe renal failure, active liver disease, IBD, substance/alcohol misuse, eating disorder, binge eating, hospital admission for depression or on antipsychotic drugs)
- ✗ recent weight loss $> 5\%$ body weight
- ✗ previous bariatric surgery
- ✗ GI surgery in the last 6 months

This 12 month programme has 3 phases

Phase 1

Total diet replacement-soups and shakes
for **3 months**
Zoom sessions- weekly/fortnightly

Phase 2

Food reintroduction
6 weeks
Fortnightly sessions on Zoom

Phase 3

Healthy eating and exercise
7 months
Monthly sessions on Zoom

Patients need to be aware of the commitment to the 20 session over the 12 months. They need to be confident with technology and happy to attend group sessions on zoom

How to refer to the pilot

Please ensure the patient meets the above criteria, has an understanding of what is involved and if keen to progress then please make referral to the diabetes type 2 remission program via CCG.

Participants will be asked to monitor weight and blood glucose levels (+/- blood pressure) over 12 months

Carbohydrate

- The type and amount consumed can make a huge difference to blood glucose levels
- Limited evidence to recommend the ideal amount of CHO for a person with diabetes
- Quality and quantity of carbohydrate is important
- Many patients miss the message re impact of starchy foods and glucose levels



How do we respond to questions like these?

People living with diabetes can't eat fruit “bananas are bad”

People living with diabetes should eat 'diabetic' foods

Sugar causes diabetes

People living with diabetes have to follow a special diabetic diet

TM

Desmond

Promote Self-Management

- Refer to **DESMOND** asap
- Diabetes Education and Self-Management for Ongoing and Newly Diagnosed.

“Attending the course is as important as the medication you have been prescribed”

- MOMENTA: weight management

Patient choice: F2F or virtual



MOMENTA Weight Management

The logo for MOMENTA Weight Management features the word "MOMENTA" in a large, blue, cursive script font. Below it, the words "MOMENTA Weight Management" are written in a smaller, blue, sans-serif font. The "MOMENTA" part of the second line is in a bold, uppercase font, while "Weight Management" is in a regular weight.

Refer to a Diabetes Specialist Dietitian

Tailored bespoke advice based on a thorough assessment

Regional access criteria:

- Newly diagnosed diabetes
- Commencing on insulin
- Change to the type of insulin regimen
- Hypoglycaemia – recurrent, erratic, nocturnal, late or hypoglycaemic unawareness if dietary intervention will assist in resolution of the problem
- Hyperglycaemia – deteriorating/recurrent increase in blood glucose levels which are considered a risk factor to the individual
- Stage 3 Chronic Kidney Disease eGFR 30-60mL/min

Signposting

BDA dietary fact sheets:

- Download/print
- Handout

Diabetes UK

- Website
- Support groups
- Wellbeing hubs

Carbs and Cals



BDA The Association of UK Dietitians

Food Fact Sheet

This Food Fact Sheet will look at type 2 diabetes only. We also have a fact sheet on type 1 diabetes.

Type 2 diabetes

Diabetes is a condition where the amount of glucose in your blood is too high. In type 2 diabetes this happens because your pancreas doesn't produce enough of the hormone insulin (that helps glucose enter body cells to be used) and/or the insulin that is produced does not work correctly (insulin resistance).

Importance of good blood glucose control

If you have type 2 diabetes, seeking nutrition and lifestyle support is one of a number of things you could do to help you manage your blood glucose and reduce your risk of developing complications.

Structured diabetes education should be made available to you and you should be able to see a registered dietitian.

Weight management and type 2 diabetes remission

For some people with type 2 diabetes remission may be possible.

If you are living with overweight or obesity, and it is safe to do so, achieving a weight loss of approximately 15kg (33lb), as soon as possible after diagnosis, has been shown to put type 2 diabetes into remission. This does not mean you are 'cured' but it may mean that you will need fewer or no medications for diabetes. Weight loss has also been shown to reduce the risks of cardiovascular heart disease.

Speak with your registered dietitian and healthcare team to discuss the options and find out if this may be suitable for you.

Glucose management

Over the years there have been many suggestions of different dietary patterns that work the best including:

- Diet focusing on the proportion of carbohydrate to fat to protein
- Low carbohydrate diet
- Mediterranean diet
- High-fibre diet
- Low GI diet
- Carbohydrate counting

Overall, it is suggested that following a Mediterranean-style diet or equivalent healthy eating pattern has the most evidence in terms of managing glucose levels and overall heart health. A Mediterranean diet would focus on:

- Reducing salt intake (less than 6g a day)
- Eating two portions of oily fish per week
- Eating more wholegrains, fruit and vegetables, fish, nuts and legumes (pulses)
- Eating less red and processed meats
- Eating less refined carbohydrates and sugar-sweetened beverages
- Replacing saturated fats with unsaturated fats and limiting intake of trans fats
- You can enjoy alcohol, but limit it to less than 14 units per week.

It may be that for personal preference, social, cultural, accessibility or economic reasons this type of diet may not be suitable for you so please speak with your registered dietitian to help you create an individualised diet.

Foods labelled suitable for people with diabetes

Foods labelled 'suitable for people with diabetes' have no special benefits for people with type 1 or type 2 diabetes. Non-nutritive artificial sweeteners are safe and may be recommended as part of your usual healthy, balanced dietary pattern.

1 of 2










Carbs & Cals

Bestselling Book & Award-winning App for Diabetes & Weight Loss

✓ Type 1 Diabetes ✓ Type 2 Diabetes ✓ Weight Loss

BREAD

Bread is a staple of many people's diets. It is an excellent source of carbohydrate and the wholegrain varieties are rich in dietary fibre. Depending on the ingredients used to make bread, it can contain a range of vitamins and minerals, such as B-vitamins, calcium and iron.

Bagel	Ciabatta	Granary Bread
 50g Carbs 235 Cals 86g 9g Prot 2g Fat 0g Sat Fat 3g Fibre	 50g Carbs 278 Cals 100g 10g Prot 1g Fat 1g Sat Fat 3g Fibre	 15g Carbs 75 Cals 33g, medium slice 7g Prot 3g Fat 1g Sat Fat 1g Fibre
Naan	Pitta Bread	White Bread
 30g Carbs 171 Cals 60g, mini 5g Prot 5g Fat 1g Sat Fat 2g Fibre	 50g Carbs 179 Cals 70g 5g Prot 1g Fat 0g Sat Fat 2g Fibre	 15g Carbs 72 Cals 33g, medium slice 3g Prot 1g Fat 0g Sat Fat 1g Fibre
Wholemeal Bap	Chapati (without fat)	Baguette
 24g Carbs 124 Cals 51g 5g Prot 2g Fat 0g Sat Fat 3g Fibre	 39g Carbs 182 Cals 90g 7g Prot 1g Fat 0g Sat Fat 3g Fibre	 48g Carbs 224 Cals 85g 8g Prot 2g Fat 0g Sat Fat 3g Fibre

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Questions?