

# 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	<b>Glucose (PP2)</b>	<b>252 mg/dL ↑</b>
Total Cholesterol	179 mg/dL	HDL-Cholesterol	52 mg/dL
Albumin	4.6 g/dL	<b>TG</b>	<b>321 mg/dL ↑↑</b>
<b>HbA1c</b>	<b>7.9%</b>	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.

## What is the problem?

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



**Needs Nutrition therapy!**

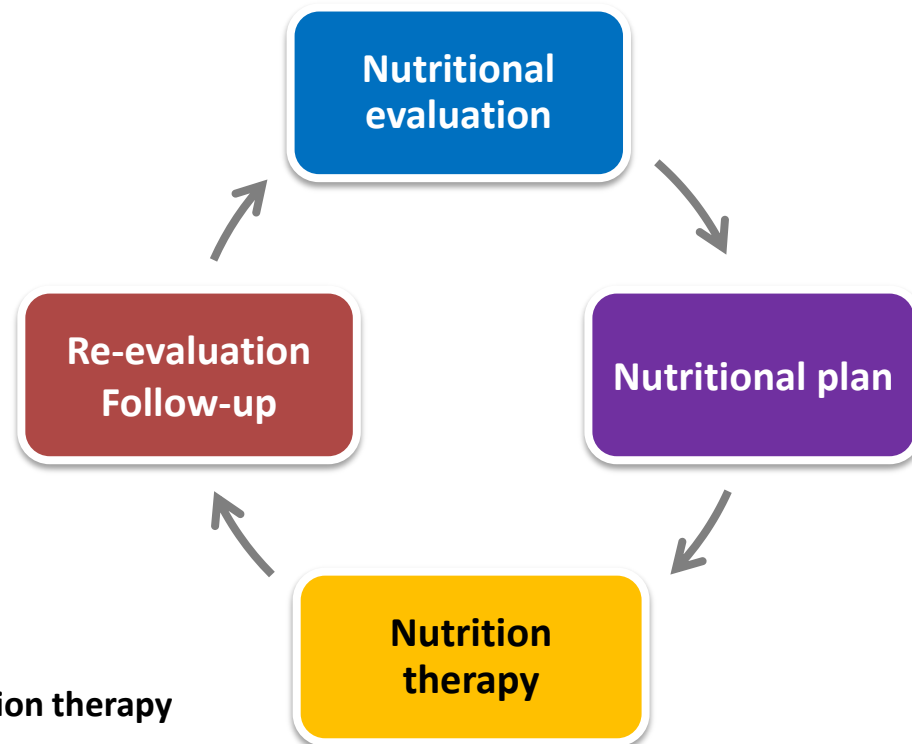
# Objective

- **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



Flowchart of clinical nutrition therapy

- **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**

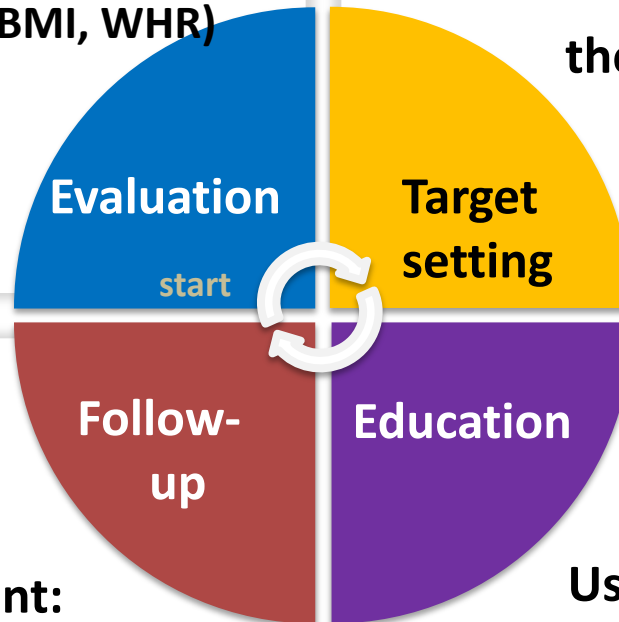
# Practicing *individualized* clinical nutrition



# 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)

**Individualized** target setting based on nutritional evaluation and therapy goal



Evaluating effects of nutritional management: modify diet plan if necessary

Using **diet planner** to construct and educate appropriate diet plan

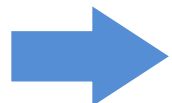
# Diet evaluation

## Methods

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

## 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.)



Helps plan, target, and reinforce diet therapy

# Example of diet record

Oct. 4<sup>th</sup>, 2018

Type	Time (place)	Food	Ingredient	Amount (about...)	Blood glucose
Breakfast	8:00 (Home)	Barley rice	Barley	1/3 bowl	
		Roast seaweed	Seaweed Sesame oil	1/2 plate 1/2 teaspoon	
		Kimchi	Cabbage kimchi	1/2 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	230 (2 hours after meal)
		Cabbage-miso soup	Cabbage	1/2 plate	
		Fried noodle	Noodle, Beef Spinach Sesame oil	1/2 bowl 1/4 plate 1/2 plate 1 teaspoon	
		Kimchi	Cabbage kimchi	1/2 plate	
Snack					<ul style="list-style-type: none"> <li>▪ Folk medicine (Deer horn)</li> <li>▪ Exercise</li> <li>▪ Other</li> </ul>
Dinner	19:00 (Chinese restaurant)	Noodle with black sauce	Noodle Onion Pork Oil	1 portion	
		Pickle	Radish	1/2 plate	
		Kimchi	Cabbage kimchi	1/2 plate	

Night snack

# 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)

$$\frac{\text{Current weight (kg)}}{\text{Height (m)} \times \text{Height (m)}}$$



BMI(kg/m <sup>2</sup> )	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
<b>Obese</b> / Low physical activity	IBW × 25~30 (kcal/day)
<b>Normal</b> / Average physical activity	IBW × <b>30</b> ~35 (kcal/day)
<b>Low body weight</b> / 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



Reader's  
digest

# MAGIC FOODS

for BETTER BLOOD SUGAR



# 3 Major Principles of diet therapy

Regularly



Properly



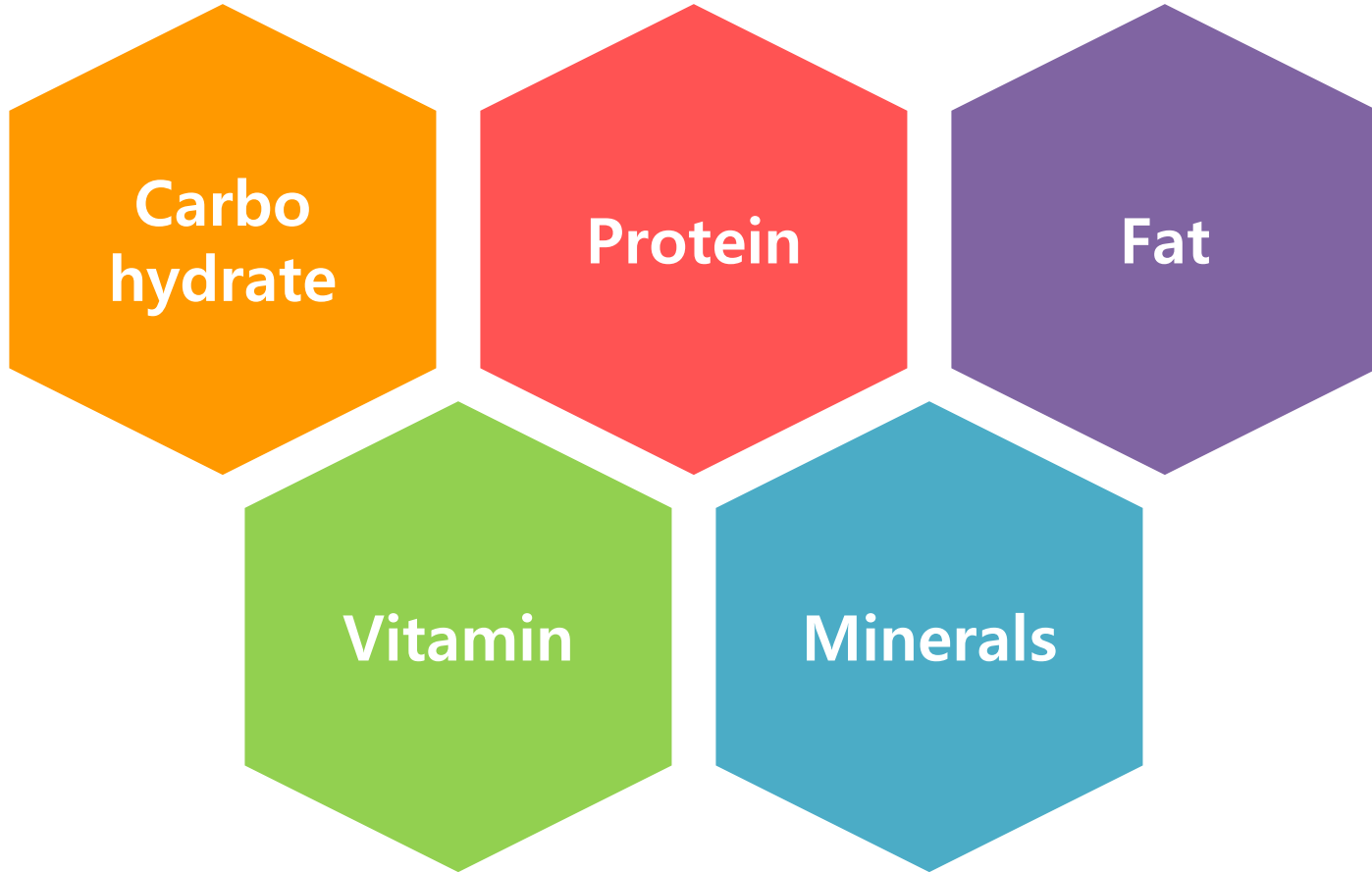
Balanced



## ■ 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



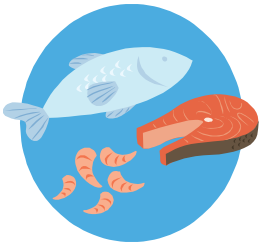
# Nutrients to blood glucose



**Fat**



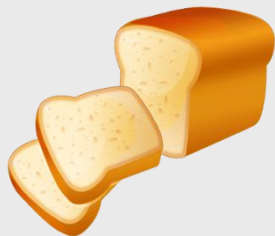
**Minimal**



**Protein**



**Minimal**



**Carbohydrate**



**100% turns into  
Blood glucose**



# How can we know amount of carbs?

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



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



Let's look at the label...

# 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.

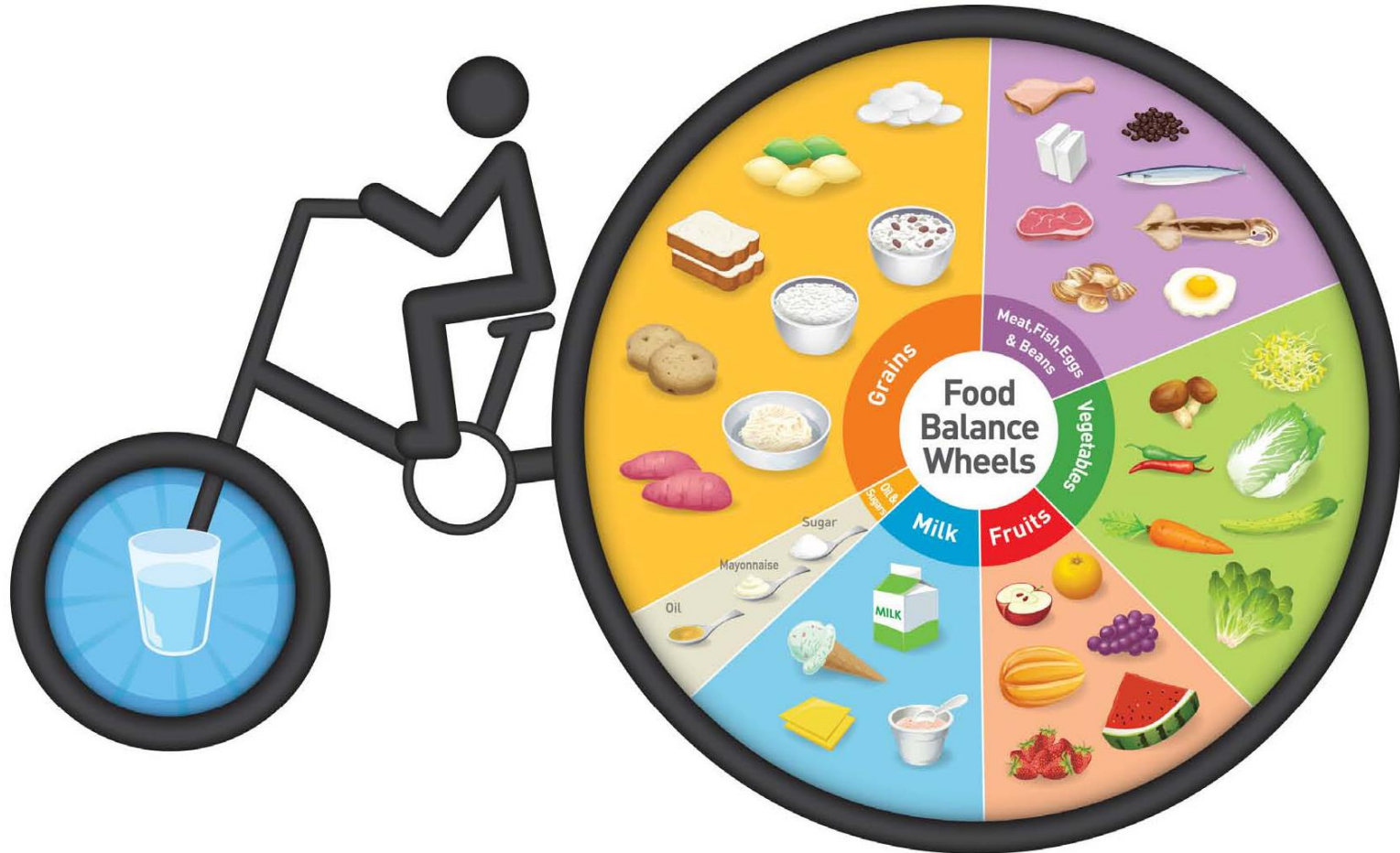
**Grade. B**



# Local food guide

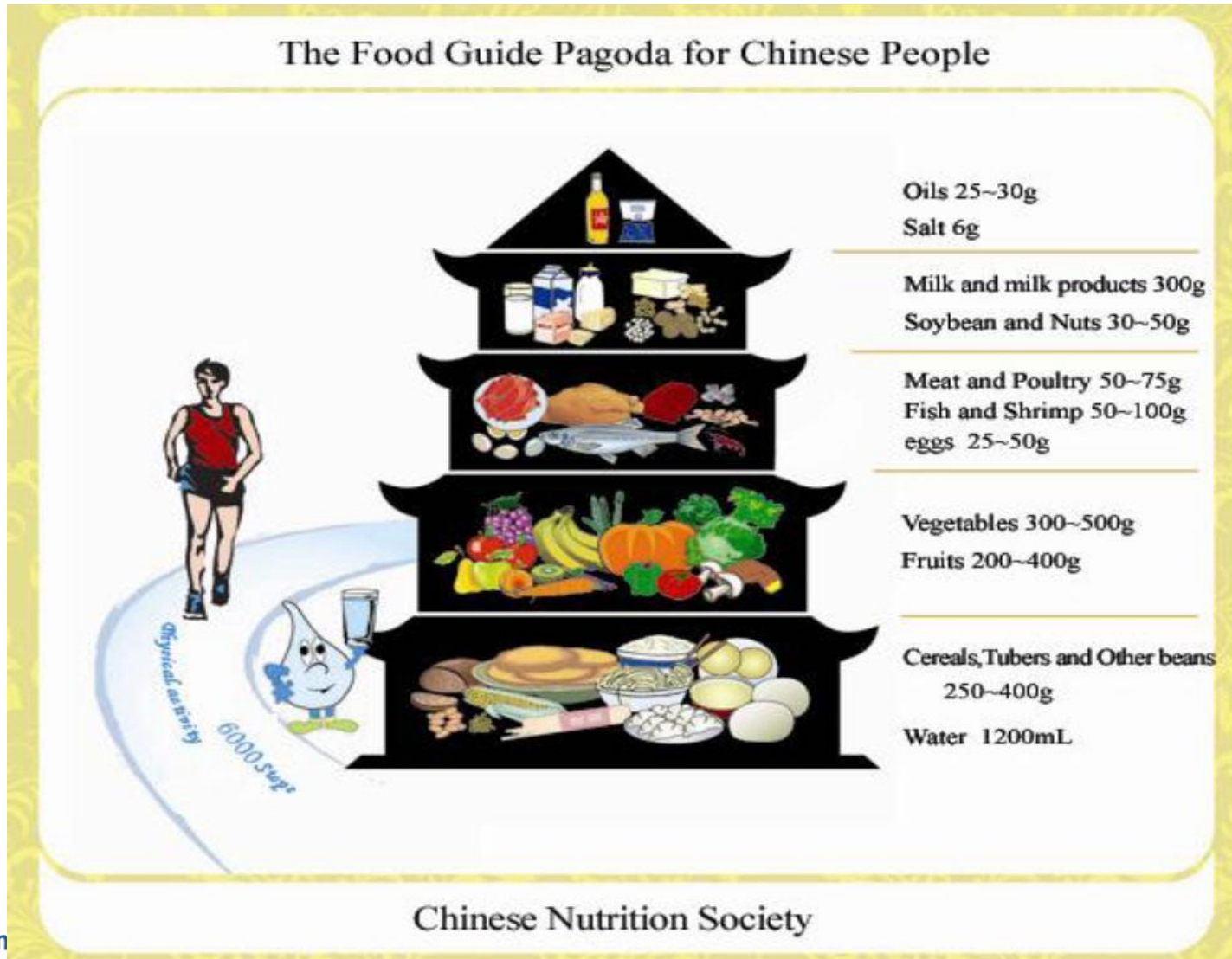
Food Balance Wheels

Korea



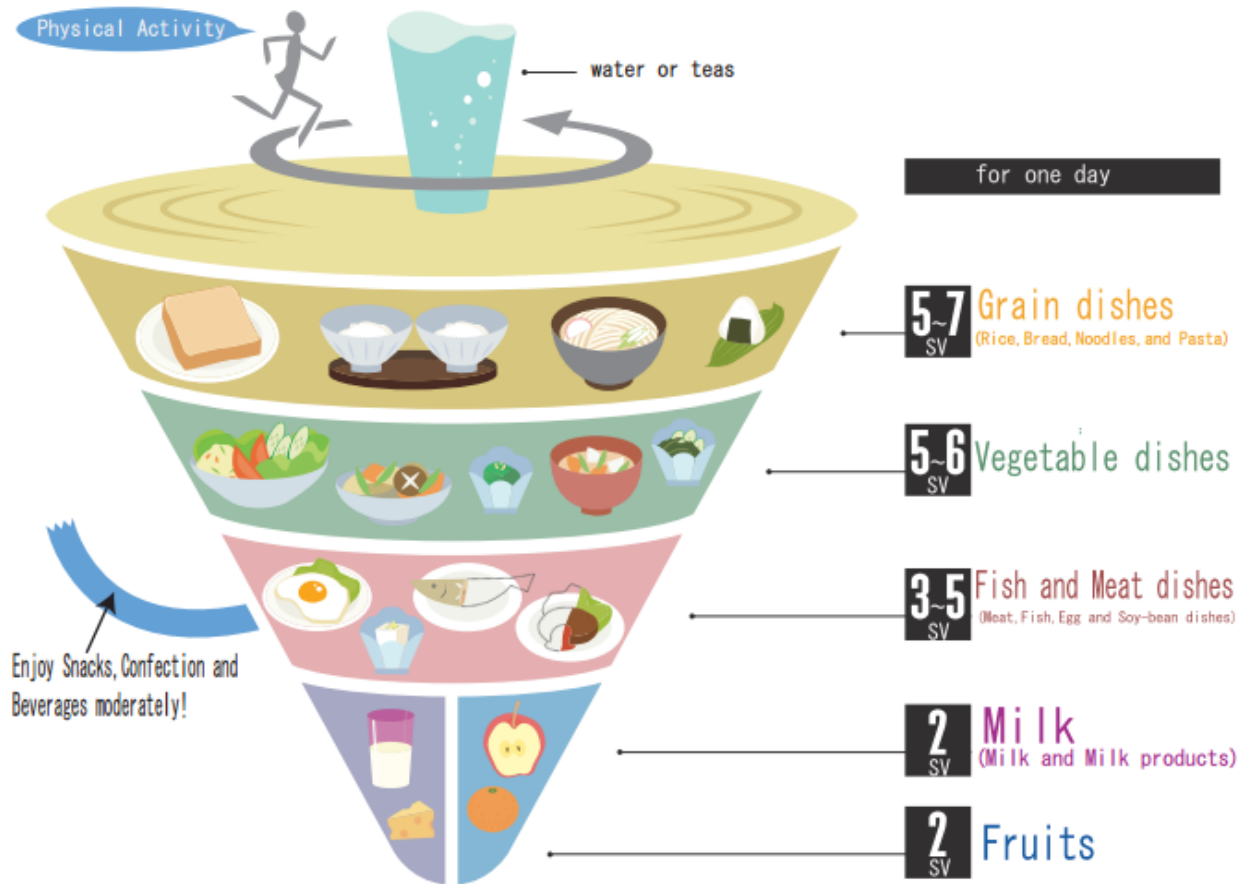
# Local food guide

China



# Local food guide

Japan



※ SV is an abbreviation of "Serving", which is a simply countable number describing the approximated amount of each dish or food served to one person



International  
Diabetes  
Federation

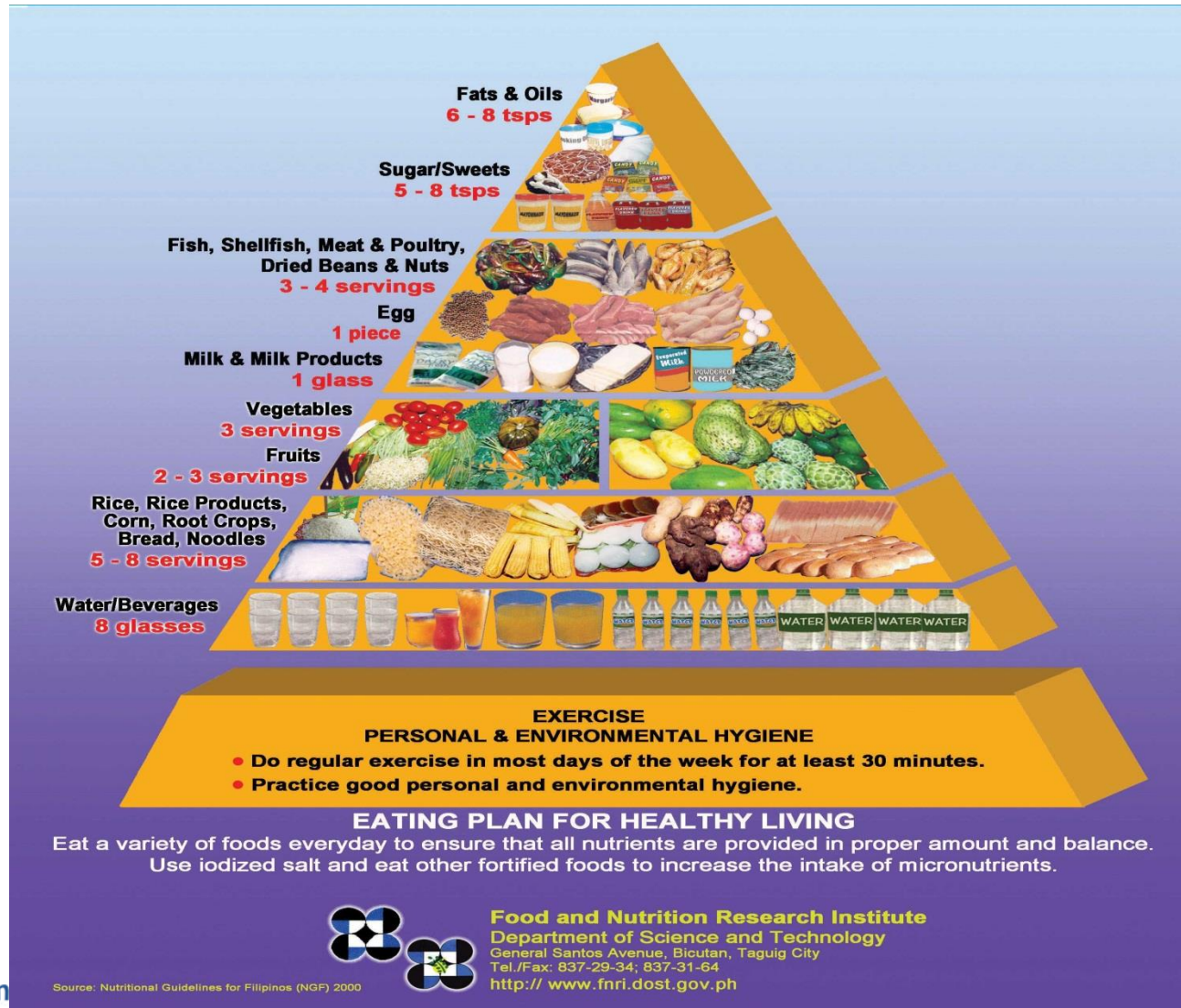
# Local food guide

Vietnam



# Local food guide

## Philippine



# Food exchanges

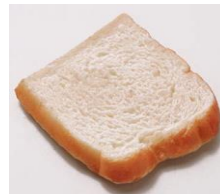
- Similar food types placed in same exchange groups
- Within groups, a single food based on weight, measure, size has the same carbohydrate or kcal value as another
- Food from different groups cannot be interchanged  
ex)

1 exchange  
unit



1/3 bowl of Rice (70g)

=



1 slice of Bread (35g)

≠



1½ tsp of Butter

# Food exchange table

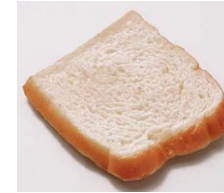
- Groups everyday food with similar nutritional components into 6 food groups
- **Grains, Fish and meat, Vegetable, Fat, Milk, Fruits**
- Nutritional component of each food group

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

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



Rice 70g (1/3 bowl)



Bread 35g (1 slice)



Rice cake 50g  
(3 pieces)



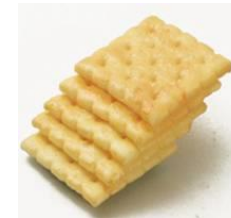
Sweet potato  
70g  
(1/2 piece)



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



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

### Low-fat



Chicken meat  
40g (1 piece)



Pork loin 40g  
(1 piece)



Stingray 50g  
(1 small piece)



Anchovies 15g  
(¼ cup diced)



Pollack 15g  
(½ piece)

### Mid-fat



Beef sirloin 40g  
(1 piece)



Mackerel 50g  
(1 small piece)



Hairtail 50g  
(1 small piece)



Black bean 20g  
(2 large spoon)



Tofu 80g  
(1/5 block)

### High-fat



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.

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

**Spinach 70g**  
(1/3 cup boiled)

**Carrot 70g**  
(1/3 large piece)



- \* 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**

## Fat (fat 5g, 45kcal)



=



Sesame oil 5g  
(1 teaspoon)

Walnut 8g  
(1.5 piece)

Peanuts 8g  
(8 pieces)

Italian dressing 10g  
(2 teaspoon)

Mayonaisse 5g  
(1 teaspoon)

- 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

**2 Units/day**

(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 cholesterol compared to normal milk**

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

# Food distribution per meal

- Keeping meal time and amount in regular interval crucial for maintaining 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
Grain		8	2		3		3	
Meat and fish	Low-fat	2			1		1	
	High-fat	3	1		1		1	
Vegetable		7	2		3		2	
Fat		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

# 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 every 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



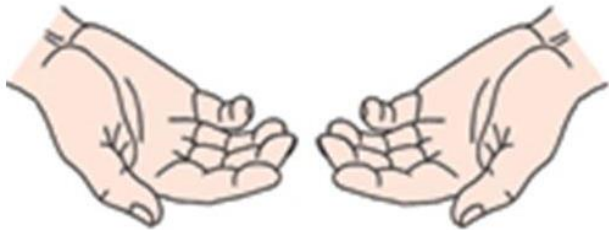
## Protein

: 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.



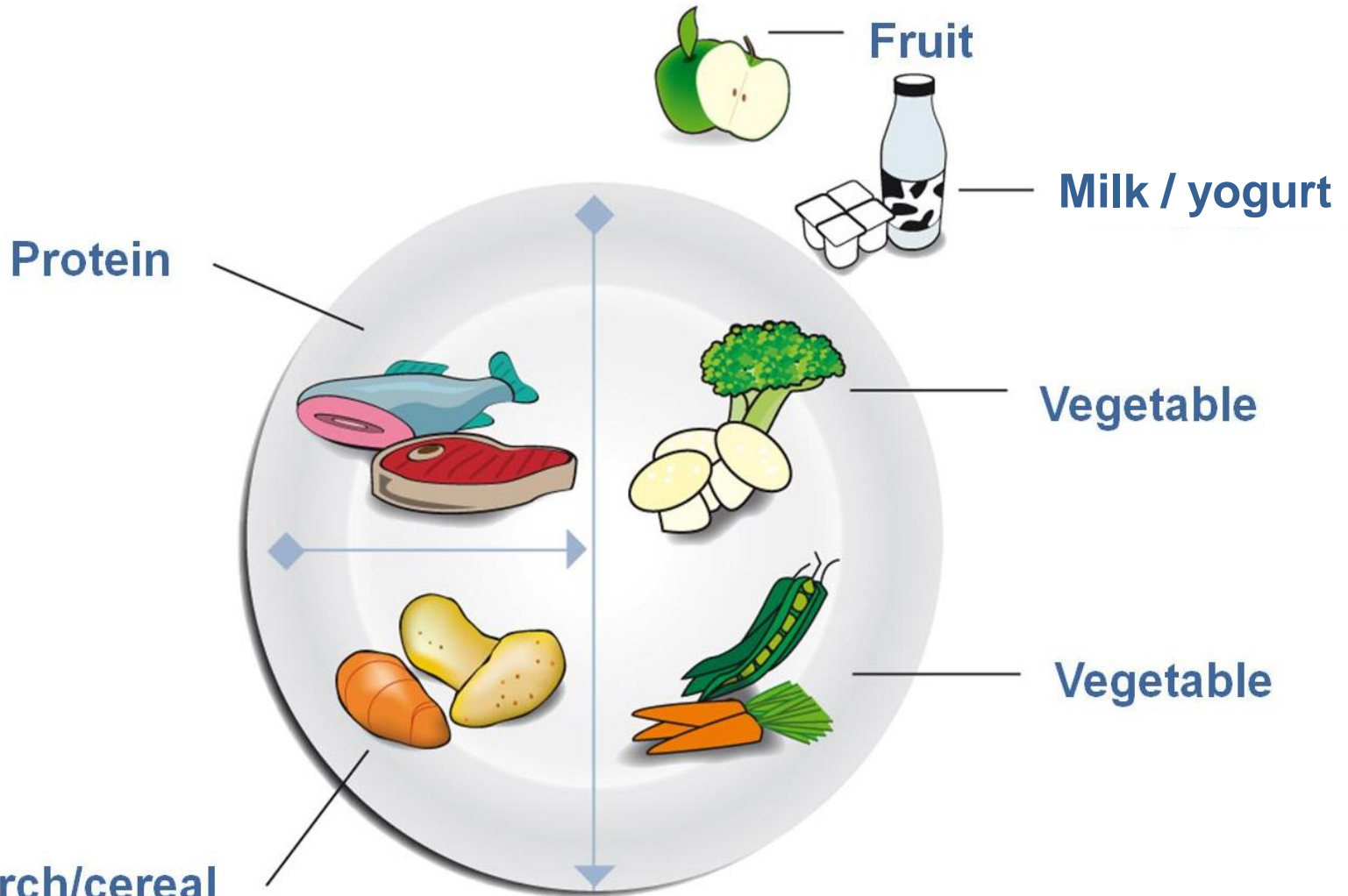
## Fat

: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

# Macronutrients Composition

ADA 2018

There is **no single ideal dietary distribution** of calories among carbohydrates, fats, and proteins for people with diabetes; therefore, macronutrient distribution should be **individualized** while keeping total calorie and metabolic goals in mind. **[Grade E]**

A **variety** of eating patterns are acceptable for the management of type 2 diabetes and prediabetes. **[Grade B]**

	ADA	CDA	KDA
Carbohydrates	Based on Individualized assessment of current eating patterns, preferences, and metabolic goals.	45-60%	50-60%
Protein		15-20% (or 1-1.5g / kg BW)	15-20%
Fat		20-35%	<25%