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Innovations in Diabetes and Cardiovascular Health

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- The following speakers have a relevant financial interest or affiliation with one or more organizations that could be perceived as a real or apparent conflict of interest in the context of the subject of their presentation*:
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Dietary Guidelines

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Learning Objectives



- 1) List and describe the main sources of dietary guidelines in the United States and how they are assembled.
- 2) Describe key recent changes in dietary recommendations.
- 3) Describe an approach to incorporating dietary guidelines into routine dietary counseling in primary care.

Sources of Dietary Guidance



- U.S. Dietary Guidelines
- Professional Associations
 - American Heart Association
 - American Diabetes Association
- Dietary Patterns
 - DASH Diet
 - Mediterranean Diet
- "Other"

The U.S. Dietary Guidelines



- Represent the latest evidence-based healthy eating recommendations
- Updated every 5 years
 - Latest release, 2020-2025
- Establish the foundation for many federal nutrition programs



The Process for the DGA



- Identify the Scientific Questions
- Submission of Nominations for the Advisory Committee
- Appointment of the Advisory Committee
- Review the scientific evidence
 - Includes systematic reviews, food patterns modeling
- Develop the Scientific Advisory Committee Report
 - doi.org/10.52570/DGAC2020
- Develop the Dietary Guidelines for Americans
 - USDA & HHS





- Separate processes for the same goal
- Identify the evidence
- Translate for the public

Make Every Bite Count with the Dietary Guidelines for Americans

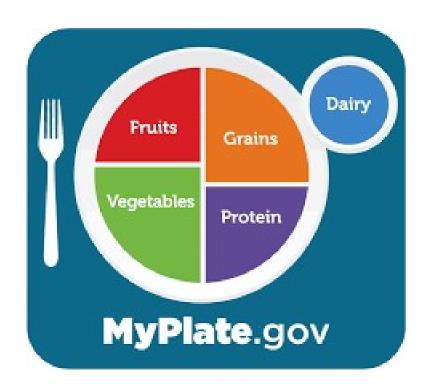


- The four overarching guidelines to help make that happen are:
 - Follow a healthy dietary pattern at every life stage.
 - Customize and enjoy nutrient-dense food and beverage choices to reflect personal preferences, cultural traditions, and budgetary considerations.
 - Focus on meeting food group needs with nutrient-dense foods and beverages and stay within calorie limits.
 - Limit foods and beverages higher in added sugars, saturated fat, and sodium, and limit alcoholic beverages.

Recent Changes in the DGAs



- Recently shifting to focus more on patterns, less on nutrients
- Messages are translated into educational materials (CNPP)
 - Food Guide Pyramid
 - MyPyramid
 - MyPlate
- Latest release addressed differences and guidance by life cycle



Establishing a Path to Lifestyle Behaviors



- Guidelines offer a focus on lifestyle behaviors balanced with pharmacologic therapies
- Patients commonly perceive medications to cover for the lack of behavior change
- Lifestyle behavior change perceived to be something they should do
 - Not a priority until <u>directly</u> addressed by a primary care provider

Translating these Guidelines into Food



- U.S. Preventive Service Task Force recommends moderate to high-intensity lifestyle to facilitate behavior change
 - Medium (31-360 minutes) to high-intensity (>360 minutes) lifestyle interventions
 - Consider your opportunities and limitations
 - Stay in your lane (scope of practice and licensure)
- Lifestyle behavior modification requires the application of guidelines to patients' personal situations
 - Personal adaptations require time
- Recommendations are focused on nutrient intakes and overall food intakes (daily or weekly)
 - Individuals eat food and meals and must translate big picture to fork

Utilize the Team



- Many issues in behavior change are addressing competing demands
 - Referrals to available services
- Referrals for team-based care:
 - Registered Dietitian
 - Mental Health
 - Food assistance or life assistance programs
- Find their why it matters.



Thank you!

Questions/Discussion