The importance of lifestyle choices

Dietitian and regional development officer Sinead Powell talked about how to improve on day-to-day lifestyle choices in order to avoid complications of Type 2 diabetes. Deborah Condon reports

o you understand how much your lifestyle choices play a part in the progression of your diabetes? This was the key question asked by Dietitian and Regional Development Officer with Diabetes Ireland, Sinead Powell, at the recent Health and Wellbeing Exhibition in Limerick.

Ms Powell's talk on food focused on 'what's new, what's true and what you need to do' when you have Type 2 diabetes.

She explained that as a dietitian, her job is to promote healthy eating patterns among people with diabetes in order to delay or prevent complications, improve their targets and help them to achieve weight goals.

"My job is based on the evidence available, which I then translate into practical advice. I address an individual's needs by providing positive messages about choices, preferences, and culture, and backing this up with science, all in a supportive way. But what is *your* job?" she asked the packed room of attendees.

Ms Powell explained that it is essential that people understand the key role *they* play in their condition.

"These are the questions you should

ask yourselves. Do you understand how much your lifestyle choices play a part in your diabetes and how it progresses? What do you want to do about your diabetes? What works and doesn't work for you? Where should you go for help and what questions should you to ask? And how do you get support from your team?" she asked.

She noted that in her experience, a lot of people with Type 2 diabetes do not make the connection between the choices they make and how this affects their glucose and blood pressure, and how this could end up leading to complications.

A lifestyle condition

She explained that Type 2 is a condition of high glucose (sugar) and this glucose gets into the blood from the foods we eat (carbohydrates), and is also released from the liver.

The pancreas produces the hormone insulin and the job of insulin is to keep our glucose levels tightly controlled. If you don't have diabetes, this process works and responds to what ever carbohydrate is consumed. However with Type 2 diabetes, this mechanism doesn't work and instead of glucose going into

the cells, it stays in the blood.

Ms Powell pointed out that Type 2 diabetes is "largely a lifestyle condition" and up to 85% of those with the condition are carrying too much weight.

"We are trying to get people to be a healthier weight so that their glucose levels can get into a better range, and they won't then suffer the complications associated with diabetes," she noted.

If glucose levels are not good over a long period, this causes damage to the body's big and small blood vessels. The big vessels relate to the brain and heart, while the small vessels relate to the eyes, kidneys and feet.

Ms Powell insisted that the prevention of complications is key because while sometimes these can be managed, they cannot be reversed.

She noted that when it comes to diabetes targets, sometimes these change and that is based on the evidence. Currently, the HbA1c target is less than 53mmol/mol. Your HbA1c should be checked twice a year and if it is above this figure, it should be repeated every three months until it is within range.

Blood pressure should be around 130/80 and when it comes to cholesterol, your LDL ('bad' cholesterol) reading

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should be less than 2.5mmol/l and your HDL ('good' cholesterol) reading should be greater than 1mmol/l.

Changes in perception of Type 2

With regard to your kidney function, your eGFR (estimated glomerular filtration rate) should be greater than 60.

Ms Powell said that a lot has changed since she learned about Type 2 diabetes in college 20 years ago. Back then, it was considered a long-term chronic condition that usually occurred when a person was in their 60s, "and you were stuck with it".

"That has completely changed. Now, we see more and more people in their 20s and 30s being diagnosed and this is largely down to lifestyle. However, it is no longer true to describe it as a long-term chronic condition and it is incorrect to say it is progressive, because remission is now possible," she explained.

We can say this as a result of the DiRECT study, which is ongoing research. As part of this, people were put on very low calorie diets – less than 800 calories per day for 12 weeks.

She emphasised that 800 calories is "very little" food and involves total meal replacement. She also pointed out that this is a very tough regime that is not for everybody.

"However, what the study found was that people who lost 5-10kg, irrespective of their starting weight, had a one-inthree chance of remission. While there is no exact definition for remission worldwide, it is widely accepted that it refers to a HbA1c of less than 48mmol and no diabetes medications for six months.

"If people lost 10-15kg (just over two stone), they had a one-in-two chance of remission. While a weight loss of over 15kg led to a nine-in-10 chance of remission, so 15kg seems to be the magic number," Ms Powell said.

Among people who took part in the DiRECT study, 70% were still in remission two years later, but the key to this is the maintenance of the weight loss and the

support you receive to achieve this.

If you put the weight back on, your diabetes will return.

However, Ms Powell pointed out that we do not have the resources in Ireland to put people on an 800 calorie diet, so what can we learn from this study?

"It's not about the foods, so much as your eating behaviours and patterns. For a lot of people, weight loss can be a kick start for them to look at why and how they eat food. How you achieve weight loss depends on how motivated you are," she said.

She believes that if a person is diagnosed with Type 2 diabetes, rather than being put on medication straight away, they should be given six months to see if they can change their diet and lifestyle.

"People do come off medication, but it is a lot harder to do that than to be given the chance to make a difference yourself," she noted.

She pointed out that a 15kg weight loss is "not for most people". However, people should not think, 'well that's that then'. The evidence clearly shows that there are benefits associated with anything from 5% weight loss to 15%.

"You have to figure out what is achievable for you, but try for 5% initially. I'd say everyone has the scope to reduce their weight by 5%," she said.

But how can this be done? Ms Powell made a number of suggestions, including cutting back on calories, reducing portion sizes, following a low GI diet and using the food pyramid as a guide to servings.

When it comes to following specific diets, she insisted that you need to work with your diabetes team because you may need to alter your medications.

She noted that the Mediterranean diet has been consistently shown to have one of the better outcomes for people with Type 2 diabetes in terms of overall health and weight loss. This includes a high intake of fruit, vegetables, legumes and fibre, and a lower intake of red meat,

dairy products and saturated fats.

Options to suit everyone

However, she pointed out that the consensus is that no one diet is more effective than any other in the long-term.

"You have to look into your options and what suits you. What I say to people is, 'will you still enjoy this diet one year later?' It's about making habits that will stick," she insisted.

Ms Powell reminded everyone that treat foods should only be consumed once or twice a week, but acknowledged that this can be difficult, as we are literally bombarded with these foods in every shop and garage forecourt we go into.

She also reminded people that carbohydrates are not just sugars. They are starches and fruits too, so this covers things like cereals, pasta, rice and bread. She encouraged anyone who is unsure about this to attend a CODE, DESMOND or X-PERT education course. Details on these are available from Diabetes Ireland.

Ms Powell said that it is essential that people stop thinking about foods as 'good' or 'bad' and to focus more on changing shopping habits and checking portion sizes.

"For people carrying excess weight, it is usually down to portion size, alcohol, snacks, eating the wrong types of food, eating late at night, or perhaps all of these," she noted.

She also reminded people of the importance of being active for at least 150 minutes per week, which is 30 minutes per day most days.

She finished by asking people whether they are ready to make better lifestyle choices

"I hope you can see that you can change your diabetes narrative. Take back some control. See what help is available, speak to your diabetes team, access your community dietitian. We care about you and don't want you to end up with complications. And remember, well managed diabetes is the leading cause of absolutely nothing!"