Volume 35 ♦ Number 1 ♦ Spring 2021



Diabetes Life Lines

New Dietary Guidelines for Americans, 2020-2025

Most people look back on 2020 in disbelief at how much happened in a single year. 2020 brought more challenges than we could have ever imagined, so as we try to pick up the pieces here at the beginning of 2021, we may look at our eating habits wondering if we're on the right track.

The Dietary Guidelines for Americans come out every 5 years and tell us what the current nutrition advice is for healthy people. The last ones came out in 2015, so it was time for an update in 2020! The Guidelines are used by dietitians and other health professionals to give nutrition advice to healthy people. They also inform U.S. food policies like school nutrition programs and programs that help people buy food, like the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). So while you don't have to read all 164 pages of the guidelines chere's a summary of what they say:

- 1. Follow a healthy diet during every life stage. It's never too late (or too early)! The guidelines give us goals on how much of each food group (vegetables, fruits, grains, dairy, protein) we should eat. They also tell us which nutrients
- 2. It's really important at certain times in our life, like for young children, pregnant women, and older adults.

- 3. Take personal preference, culture, and budget into account. A healthy diet doesn't look the same for every person. We all have different food likes and dislikes. We all come from different backgrounds and have "childhood different favorites" depending on where we grew up and the people who cooked for us. And most of us don't want to spend all of our money on food. So, choosing foods that we like, that are part of our culture, and that fit into our food budget is a key part of following a healthy diet in every life stage.
- 4. Choose foods and drinks high in healthy nutrients and low in Calories to meet food group needs without getting too many Calories. Most Americans (about 74%) are overweight or have obesity. Being overweight or having obesity increases your chances of getting diseases like type 2 diabetes and high blood pressure. It can also make managing these diseases difficult. Choosing foods low in Calories but high in nutrients can help people meet their nutrient needs without gaining weight.

Continued on next page

Inside this issue:

- New Dietary Guidelines for Americans
- Use Your Plate to Plan Meals
- Communicating With Your Healthcare Provider is a Two-Way Street
- Recipe: Berries With Banana Cream



5. Limit foods and drinks high in added sugars, saturated fat, and sodium (salt). Limit alcohol. Added sugars increase the Calories in a food without providing other healthy nutrients. To avoid gaining weight, the guidelines recommend limiting foods high in added sugars, like regular sodas, desserts, and snack foods. Why do we also need to limit saturated fat and sodium? Eating too much saturated fat increases risk for heart disease, the #1 cause of death in the U.S.³ People with diabetes have a higher chance of getting heart disease, so eating less saturated fat is extra important for people with diabetes.⁴ Eating too much sodium also increases risk for high blood pressure, which people with diabetes have a higher chance of getting too.^{1,4}

Remember that the *Dietary Guidelines* are for generally healthy people. So for people with diabetes, there are a few differences to think about to make sure you're managing your diabetes well. The next article talks about these differences and what they mean for you!

References:

- U.S. Department of Agriculture. Dietary
 Guidelines for Americans 2020-2025. Retrieved
 from:
 https://www.dietaryguidelines.gov/sites/default/file
 s/2020 12/Dietary Guidelines for Americans 2020
 - 12/Dietary Guidelines for Americans 2020 2025.pdf
- 2. U.S. Department of Agriculture. Dietary Guidelines for Americans 2015-2020. Retrieved from: https://health.gov/our-work/food-nutrition/previous-dietary-guidelines/2015
- Centers for Disease Control and Prevention.
 Leading Causes of Death. Retrieved from:
 <u>https://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm</u>
- National Institute of Diabetes and Digestive and Kidney Diseases. Diabetes, Heart Disease, and Stroke. Retrieved from: https://www.niddk.nih.gov/healthinformation/diabetes/overview/preventingproblems/heart-disease-stroke

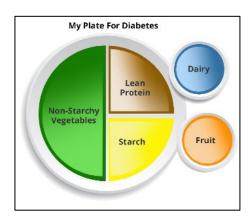
Use Your Plate to Plan Meals

Have you ever heard of MyPlate? If not, you may have heard of the Food Pyramid. MyPlate replaced the Food Pyramid in 2011. MyPlate is a general "rule of thumb" that people can use to follow the *Dietary Guidelines for Americans* when they sit down to eat a meal. You can see in the picture below that MyPlate says to make ½ of your plate fruits and vegetables, ¼ of your plate grains, and ¼ protein, with dairy on the side.



But, remember there are a few differences to think about if you have diabetes. Thankfully, the American Diabetes Association (ADA) created a similar "rule of thumb" for people with diabetes to help guide you when you sit down to eat a meal! You can see in the original diabetes plate below that ½ of your plate is non-starchy vegetables (like leafy greens, broccoli, bell peppers, carrots – see a full list of non-starchy vegetables here: https://www.diabetes.org/healthy-living/recipes-nutrition/eating-well/non-starchy-vegetables), ¼ lean protein, and ¼ starch (starchy vegetables, grains), with fruit and dairy on the side.²

Diabetes Plate #1

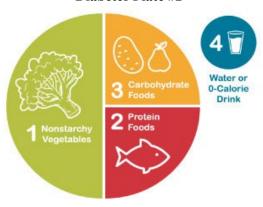


Continued on next page



Why are these plates different? To help people with diabetes better control their blood sugar by decreasing the carbohydrates they eat in a meal.²⁻⁴ This plate should help you eat fewer carbohydrate grams at each meal.²⁻⁴ But this plate still has too much carbohydrate for some people for good blood sugar control. So, the ADA recently came out with an updated diabetes plate method – diabetes plate #2 below.⁴

Diabetes Plate #2



What differences do you see between diabetes plate #1 and diabetes plate #2? That's right - carbohydrates are limited to an even smaller portion of the plate! Non-starchy veggies are still ½ of the plate, and protein foods are still ¼ of the plate. But, ALL carbohydrates sources – starchy vegetables, grains, milk and yogurt, AND fruit – are limited to ¼ of the plate. The drink is also now water or something with 0 Calories, instead of milk. Research showed that people ate an amount of carbohydrates closer to what their dietitian recommended when they used this plate method. For some people, using this plate method might mean eating too few carbohydrates. But for many, it may mean better blood sugar control.

It's important to know these differences as you work to manage your diabetes! Using a plate method can help you follow your meal plan without too much math or counting, which can mean sticking to your goals.² There are a lot of things to think about when figuring out just how much you should limit your carbohydrates, such

as your medications and activity level. Limiting your carbohydrates too much can make your blood sugar drop too low, especially if you are taking insulin or another medicine that lowers your blood sugar. Do not change too much on your own, and make changes slowly! Work with a registered dietitian, doctor, and/or diabetes educator to find what works best for you!

References:

2025.pdf

- U.S. Department of Agriculture. Dietary Guidelines for Americans 2020-2025. Retrieved from: <a href="https://www.dietaryguidelines.gov/sites/default/files/2020-12/Dietary Guidelines for Americans 2020-12/Dietary Guidelines Guidelines for Americans 2020-12/Dietary Guidelines Guidelines Guidelines Guidelines Gui
- Bowen ME, Cavanaugh KL, Wolff K, Davis D, Gregory RP, Shintani A, Eden S, Wallston K, Elasy T, Rothman RL. The diabetes nutrition education study randomized controlled trial: A comparative effectiveness study of approaches to nutrition in diabetes self-management education. Patient Educ Couns. 2016 Aug;99(8):1368-76. doi: 10.1016/j.pec.2016.03.017. Epub 2016 Mar 19. PMID: 27026388; PMCID: PMC4931976.
- 3. Evert AB, Dennison M, Gardner CD, et al. Nutrition Therapy for Adults With Diabetes or Prediabetes: A Consensus Report. *Diabetes Care*. 2019;42(5):731-754. doi:10.2337/dci19-0014
- 4. American Diabetes Association. 5. Facilitating Behavior Change and Well-being to Improve Health Outcomes: *Standards of Medical Care in Diabetes-2020*. Diabetes Care. 2020 Jan;43(Suppl 1):S48-S65. doi: 10.2337/dc20-S005. PMID: 31862748.

Communication With Your Healthcare Provider is a Two-Way Street

Whether you are newly diagnosed with diabetes or have had it for many years, you will find yourself visiting your doctor or other healthcare professionals regularly. This does not have to be as daunting as it sounds. Healthcare professionals have the knowledge to help you control your diabetes. They can be your partner in finding solutions that fit you.

In today's world, many doctors and healthcare professionals are busy and have limited time with each patient. This may make you feel rushed or nervous.

Continued on next page



However, there are ways to effectively communicate with your provider before, during and after your visit to make sure you feel confident in managing your condition.

Before Your Visit

Be clear when making appointments. Explain the reason for your visit to the person booking your appointment. This will help them decide how much time is needed for your visit. For example, you may say, "I'd like to see Dr. Smith within the next week to talk about my medication dosage."

Make a list of your concerns and questions. Note your symptoms, anything that makes the condition better or worse and current medications (including over-the-counter medicine, vitamins, and supplements). Bring your health records. If you are seeing a new provider or multiple providers, having your healthcare records available can make your time with your healthcare professional more useful.

Ask a friend or family member to come with you. They can provide additional support and an extra set of ears during the visit. They may catch something you have missed or ask a question that you did not think of bringing up.



During Your Visit

Be honest. Tell your healthcare provider your main concerns in a straightforward manner early in the visit. Do not hold back anything, even if you are embarrassed to talk about it. Remember, they are there to help you.

Listen and ask questions. Listen carefully to your provider to understand what they are saying. Speak up if you are having trouble understanding him/her. Also, ask follow-up questions to get clarity on their instructions, treatment plans, meal plans, medications, etc.

Share your knowledge. If something has worked for you, let your provider know. This could be helpful to other patients or for helping you in the future.

After Your Visit

Take note of new treatments. This will help you prepare for your next visit.

Ask follow-up questions, if needed. Forgot to ask a question during your visit? Either call or if available, ask your question through your online patient portal.

Try to stick with the same provider. This will help keep your treatment consistent. However, if you do not feel comfortable with your provider, try looking for someone else.

Sources:

- Communicating with Your Doctor. Communicating with Your Doctor | Family Caregiver Alliance. https://www.caregiver.org/communicating-yourdoctor. Accessed January 22, 2021.
- 2. Don't Be Shy: 4 Tips for Talking to Your Doctor. Johns Hopkins Medicine. https://www.hopkinsmedicine.org/health/wellness-and-prevention/dont-be-shy-4-tips-for-talking-to-your-doctor. Accessed January 22, 2021.
- Donovan J. Talking to Your Doctor: How to Make Yourself Heard. WebMD. https://www.webmd.com/a-to-z-guides/features/be-heard-by-dr#4. Published January 27, 2020. Accessed January 22, 2021.
- 4. How Can I Communicate Effectively? Taking Charge of Your Health & Wellbeing. https://www.takingcharge.csh.umn.edu/how-can-i-communicate-effectively. Accessed January 22, 2021.
- Torrey T. Why Communicating Well With Providers Improves Care. Verywell Health. https://www.verywellhealth.com/effective-patient-doctor-communications-2615472. Published March 21, 2020. Accessed January 22, 2021.





Recipe Corner

Berries With Banana Cream

Yield: 4 servings

Ingredients

1/3 cup low-fat yogurt, plain

½ banana, ripe

1 Tablespoon 100% fruit juice, orange or other as desired

2 cups strawberries, sliced

1 teaspoon honey

1 teaspoon cinnamon



Directions

- 1. Combine yogurt, banana, and juice. Mash with a fork until most chunks are gone.
- 2. Wash and slice berries.
- 3. Top berries with yogurt mixture.
- 4. Top with honey and cinnamon.

Nutrition Facts per Serving:

Calories: 60

Carbohydrates: 13 grams

Total fat: 1 gram Protein: 2 grams

Sodium: 15 milligrams

Fiber: 2 grams

Reference:

Taken from USDA MyPlate Recipes

https://www.myplate.gov/recipes/supplemental-nutrition-assistance-program-snap/berries-banana-cream

Contributors:

Alison C. Berg, PhD, RDN, LD, Extension Nutrition and Health Specialist Hannah K.Wilson, BS, Doctoral Candidate, Graduate Assistant Candice Tucker, MA, NDTR, CHES, FACS Agent, UGA Extension, Coweta County

Editorial Board:

Ian C. Herskowitz, MD FACE, University Health Care System, Augusta, Georgia Melanie Cassity, RN, MSN, CDE, Piedmont Athens Regional, Athens, Georgia



The University of Georgia Cooperative Extension

College of Agricultural and Environmental Sciences / Athens, Georgia 30602–4356

Dear Friend.

Diabetes Life Lines is a bi-monthly publication sent to you by your local county Extension agent.

It is written by an Extension Nutrition and Health Specialist and other health professionals from the University of Georgia. This newsletter brings you the latest information on diabetes self-management, healthy recipes and news about important diabetes-related events.

If you would like more information, please contact your local county Extension Office.

Yours truly,

County Extension Agent

The University of Georgia (working cooperatively with Fort Valley State University, the U.S. Department of Agriculture, and the counties of Georgia) offers its educational programs, assistance, and materials to all people without regard to race, color, religion, sex, national origin, disability, gender identity, sexual orientation or protected veteran status and is an Equal Opportunity, Affirmative Action organization.

An Equal Opportunity, Affirmative Action, Veteran, Disability Institution

COOPERATIVE EXTENSION U.S. DEPARTMENT OF AGRICULTURE THE UNIVERSITY OF GEORGIA COLLEGES OF AGRICULTURAL AND ENVIRONMENTAL SCIENCES & **FAMILY & CONSUMER SCIENCES** ATHENS, GEORGIA 30602

OFFICIAL BUSINESS

Diabetes Life Lines: Your current issue is enclosed

U.G.A. ♦ Cooperative Extension ♦ College of Family and Consumer Sciences

