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Bigger, Fatter, Sicker: How the Standard American Diet is Killing us! **Recorded October 17, 2017**

Course Type: Recorded 1 Hour Webinar

Course Level: All Levels

Course Objectives

After completing this course, you will be able to:

1. Describe the Standard American Diet (SAD).
2. Discuss the role diet plays in chronic disease.
3. Explain the dangers of “dieting” on long-term weight management.
4. Discuss the role of the fitness professional in shifting the nation’s food choices.
5. Describe how to legally provide nutrition guidance to clients.

Course Description

Our nation continues to see significant increases in obesity as well as other chronic diseases. Current research proves that lifestyle interventions are the most effective way to help clients create lasting changes to prevent or treat these conditions. Through the addition of evidence-based nutrition recommendations, the fitness professional is ideally positioned to help reverse the obesity epidemic.

About the Presenter

Greg Salgueiro, MS, RD, LDN

Greg Salgueiro is a Registered and Licensed Dietitian in the State of Rhode Island. Greg began teaching the two-day Nutrition for Professionals course with Dr. Jane in 2008. He also held the position of the Director of Sports Nutrition for Lifestyle Management Associates and currently is the AASDN Nutrition Director.

Greg has experience in corporate, as well as hospital based, fitness and wellness programming. In the past he has been called upon to lecture on Sports Nutrition and Weight Management for the United States Coast Guard Academy. Greg has performed Sports Nutrition workshops for Division I Collegiate athletic teams and works with local high school and college athletes to help them fuel their bodies for optimal athletic performance. Greg is also certified through the Cooper Institute as a Health Promotion Director and through Totally Coached as an Intrinsic Coach.

Greg is an ACSM Certified Exercise Physiologist and possesses a B.S. in Nutritional Sciences from Cornell University. Greg completed his Dietetic Internship at the Bronx VA Medical Center while simultaneously completing his M.S. in Clinical Nutrition at New York University. He also received advanced training at the Human Performance Institute in the Power of Full Engagement and works with clients to optimize human performance through energy management.

Greg currently works full-time as the Manager of the Lifestyle Medicine Center at the Women’s Medicine Collaborative in Providence, RI.

Course Outline

Standard American Diet or Western Diet:

- Rich in meat, dairy products, processed & artificially sweetened foods, and salt.
- Low in fruits, vegetables, fish, legumes & whole grains.

2015 Dietary Guidelines

Committee stated:

“The quality of the diet currently consumed by the U.S. population is suboptimal overall and has major adverse health consequences.”

Client Food Recall

Breakfast:

Small glass of water for morning medication
 Coffee with cream and sugar
 Plain bagel with cream cheese (skips 2 -3 times/wk)

Lunch:

Deli ham and turkey meat
 American cheese
 White bulky roll
 Potato chips and a pickle
 Diet Coke

Snack:

Two small fun size candies (twix or snickers)
 Chocolate chip cookie
 Diet Coke

Dinner:

Breaded chicken breast (prepared and frozen)
 Tater tots (prepared and frozen)
 Canned green beans
 Red wine

Snack:

Low fat ice cream sandwich

US Food Consumption as a % of Calories

63% of foods consumed in 2009 were from refined and processed foods
 25% from animal based products
 Only 12% from plant foods (and half of that from processed plant foods)
 So...only 6% of calories were from nutrient dense, minimally processed plant foods.

What our clients are eating

- 38% of adults consume less than 1 serving of fruit every day
- 22% report eating vegetables daily
- Average fiber intake in U.S. = 15 g/day
- 75% of restaurant meals come from fast-food restaurants
 - Over 30% of those included soda
- 1970 to 2008 per capita calorie consumption increased by 25%
- 13% of daily calories are from added sugar
- 90% of Americans exceed sodium recommendations
- 85% of cereals consumed are refined products

Chronic Disease

2015 Dietary Guidelines Committee: “Approximately half of American adults have one or more chronic disease related to poor diet and inactivity.”

More than 2/3 of American adults are overweight or obese.

Approximately 1/3 of American children are overweight or obese.

Obesity Rates

1990:

- Highest rate was 15% (one state)

2016:

- No state with less than 15% (Lowest is 22%)
- Five States over 35%
- Twenty states between 30 and 35%

- Twenty-two states between 25 and 35%

Diabetes Rates

Rates have nearly doubled in past 18 years.

National Average:

- 1994 = 5.5%
- 2012 = 9.3%

2016:

- Twenty-nine states currently over 10%
- Highest rate is 15%

Hypertension Rates

1990:

- Highest rate was about 28% (one state)
- All other states were under 25%

2016:

- Eleven states over 35%
- Highest rate is almost 43%
- Only one state under 25%

Call to Action

As health care practitioners **WE** are failing:

- By 2030... 65 million more obese adults in the US.
- By 2050... 60% of men and 50% of women could be clinically obese.
- By 2030... Combined medical cost are estimate to increase by \$48-66 billion/year in the US.

Nutrition and You: Trends 2011

American public is just as likely to seek nutrition information from a personal trainer or health club/gym as they are a registered dietitian.

Population Health

Dept. of Health & Human Services, Surgeon General & CDC have all stated that this is a public health issue that can only be resolved at a community level.

It's our responsibility to seek out evidence based nutrition information and get this information to our clients.

Lifestyle Medicine Movement

Lifestyle Medicine is about getting to the root cause of disease

Treat the Cause

While others have spent years mopping the floor, WE can turn off the faucet!

Eliminate "Diet" Mentality

95% of all diets fail long-term

40% of diets lead to weight gain

Diets result in:

- Preoccupation with food & weight
- Labeling food as "bad" or the enemy
- Feelings of guilt
- Lower metabolism
- Lean body mass loss
- Decreased self-esteem
- Binging on high sugar & high fat foods
- Dieting leads to a decreased metabolism; tendency to retain fat; increase cravings/binges; higher death rate.
- Emotionally it leads to low self-esteem; loss of self-trust; eating disorders; depression; social anxiety.

Diet Cycle

Many images of dieting cycles on the internet. Here are two that just provide a visual of what we are discussing.

Diets are designed to be temporary. We need to work with our clients on a permanent and long-term lifestyle change

Evidence Based Nutrition

Lots of Nutrition Controversy.

Common ground:

- Limit highly processed foods
- Consume more minimally processed, whole plant based foods
- Hydrate with water
- Listen to hunger and satiety cues
- Aim for Nutrient Density NOT Calorie Density
- Plan more, shop more, prepare more...

It's beyond the scope of this webinar to get into clinical nutrition and the specifics of a healthy food intake.

But it is obvious that dietary risks are one of the biggest impacts on Chronic Disease.

Keep It Simple

Some places to go for more specifics:

Michael Pollan – eat food, not too much (OR TOO LITTLE), mostly plants.

In defense of food & Food Rules

Intuitive Eating; Mindful eating; The Blue Zones (Dan Buettner)

Understand that every food choice displaces another food choice, whether positive or negative

Role of the Fitness Professional

Do not need to be a Registered Dietitian to support your client in healthy eating.

In 2012 the AND stated: "In fact, there is not a single dietetics licensure law in the country that would prohibit licensed chiropractors, pharmacists, nurses, personal trainers, or acupuncturists from providing nutritional counseling."

Follow your organization's scope of practice and seek legal advice.

Seek additional education & training.

Providing Nutrition Guidance

Use documents written and reviewed by Registered/Licensed Dietitians.

Understand misleading food advertising & labeling.

Encourage planning; grocery shopping; preparing foods at home (cooking); and mindful eating.

If working with clients with chronic disease, collaborate with an RD in your area.

Using government approved information like DASH, Mediterranean diet, Old Ways, Harvard's Healthy Eating Plate, etc.

Deceptive claims like Gluten Free, organic, Vegan, Sugar Free, low fat/fat free, etc

Question and Answer Segment

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