

#### Allison Rhodes, MD, ABOM, FOMA

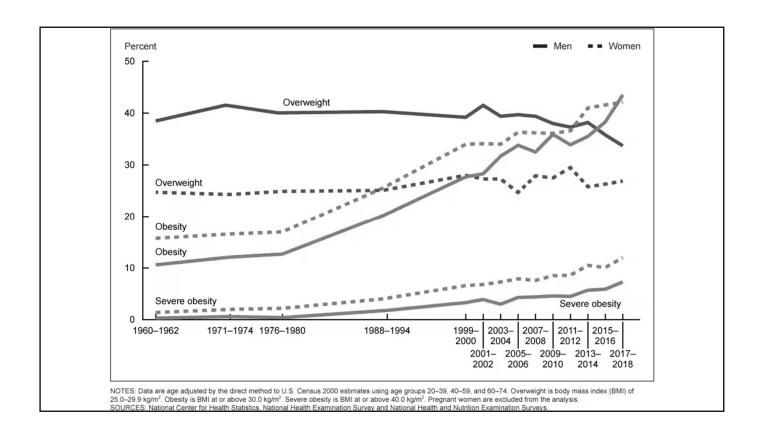
Assistant Professor of Clinical Medicine
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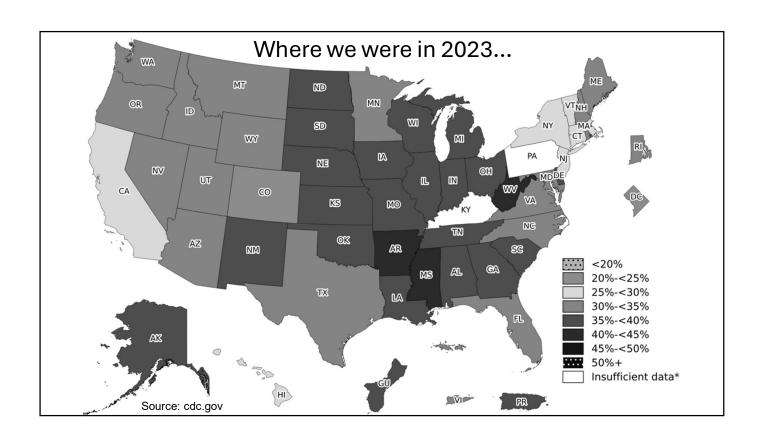


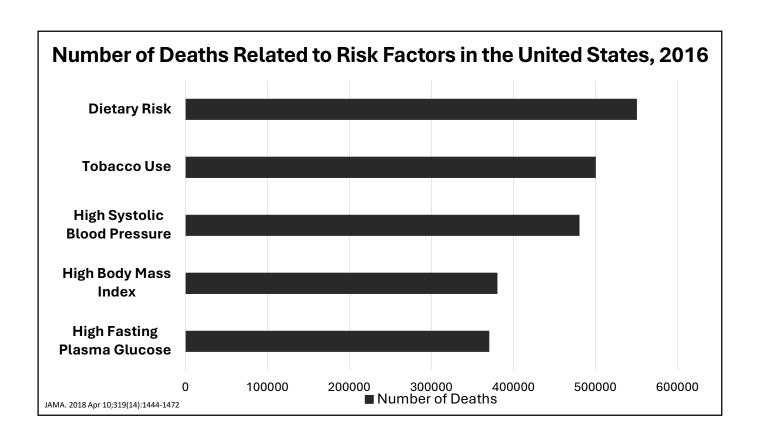


## **Objectives**

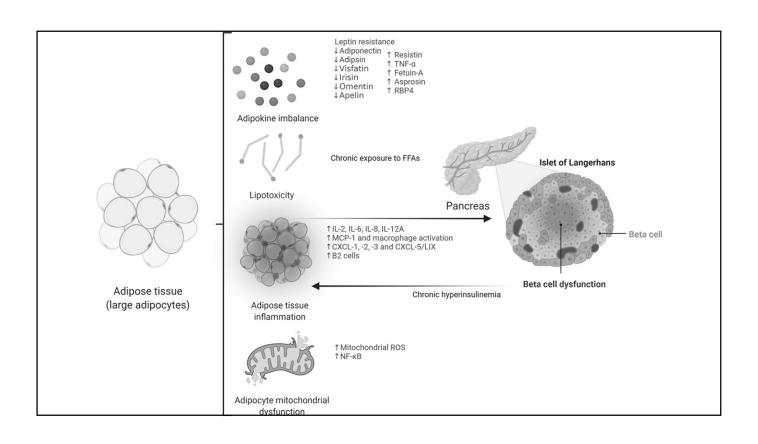
- Describe obesity trends
- Identify contribution of diet to disease and mortality
- Discuss mechanisms by which intensive dietary change can treat and potentially reverse disease
- Recall components of a healthiest diet
- Prescribe patient centered food interventions
- Utilize the Lifestyle & Obesity Medicine Pillars as a framework to approach nutrition and health optimization

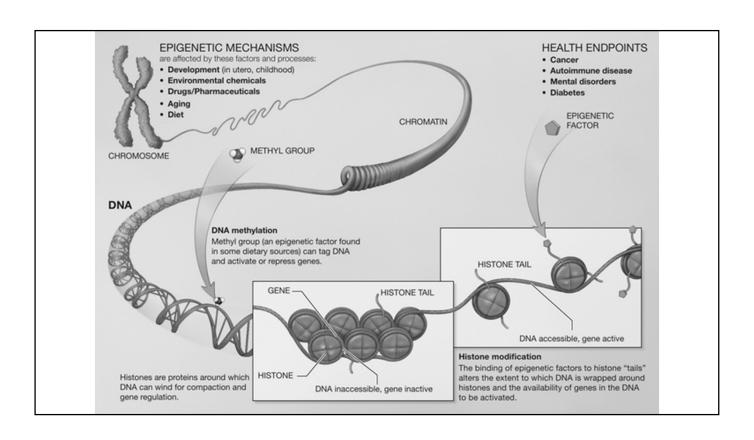












## **Gut Microbiome**

- Trillions of bacteria in colon
- Healthy bacteria
- Feed on fiber, polyphenols & resistant starches
- Create **short-chain fatty acids (SCFAs**): acetate, propionate,& butyrate
- · Unhealthy bacteria
- · Feed on meat, eggs, & food additives
- Create inflammatory compounds such as trimethylamine oxide (TMAO)





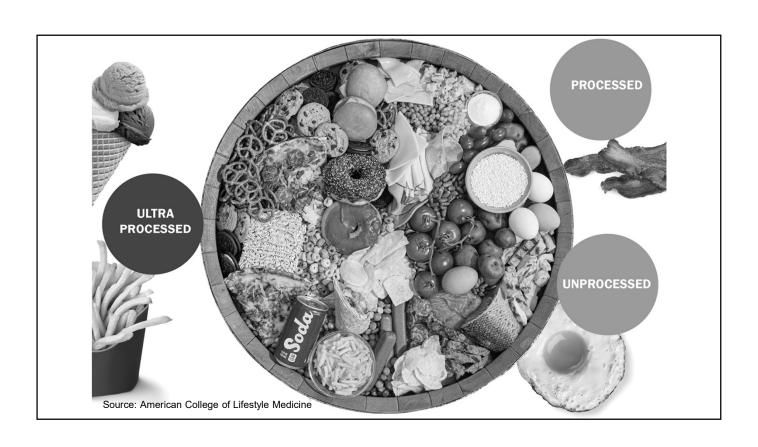
## **Food as Medicine**

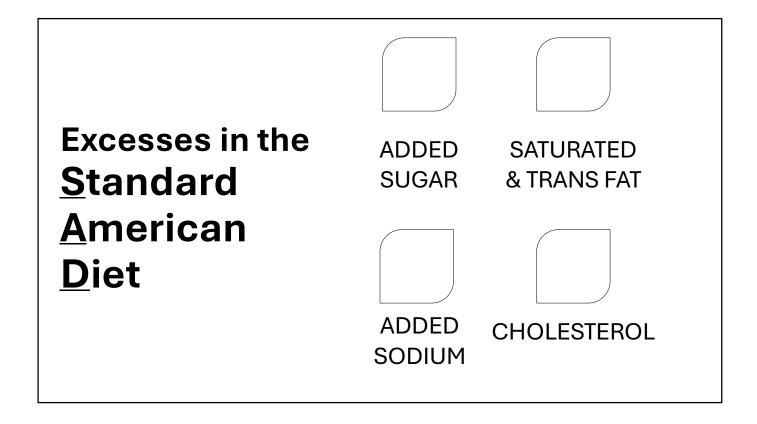
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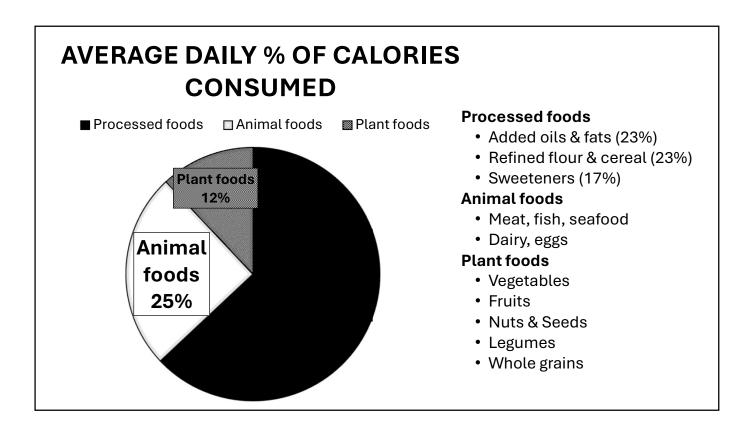
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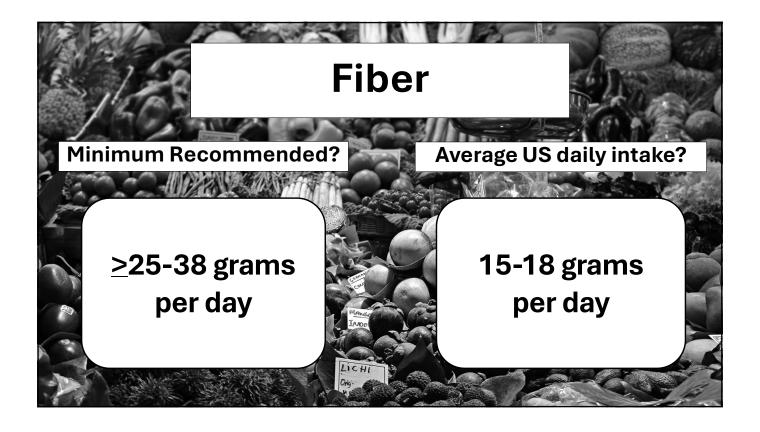
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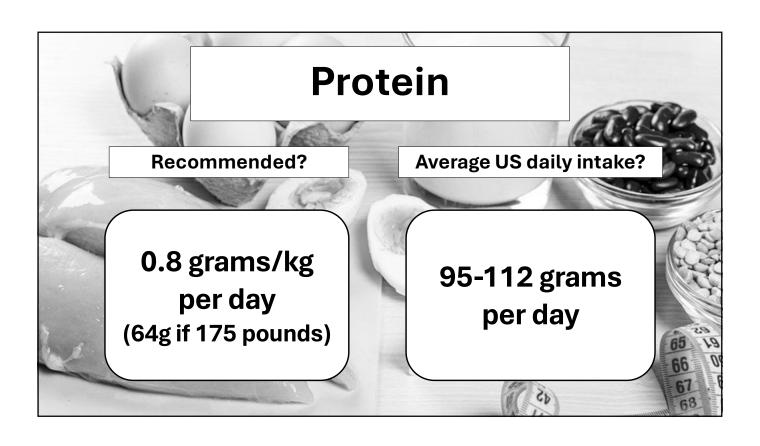
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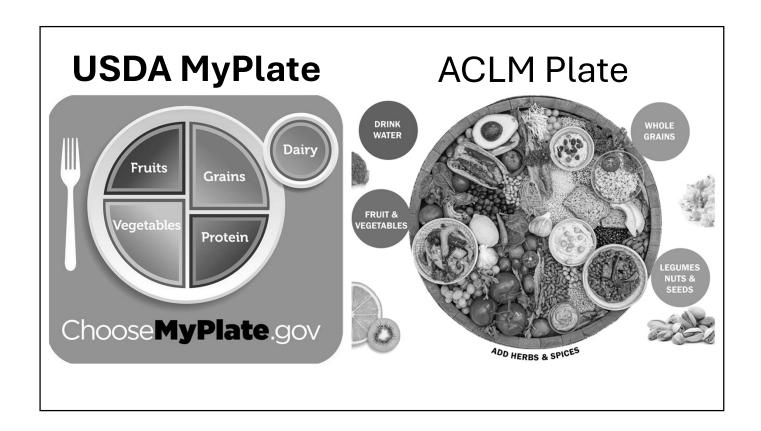


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# Beans (Legumes/Soy)

Up to 3 servings per day

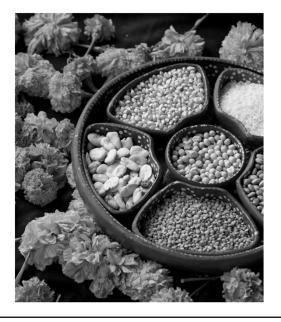
High in protein and fiber

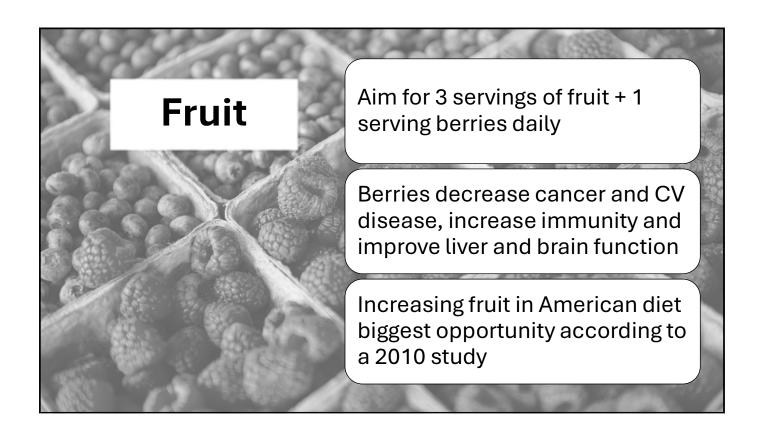
Lowers cholesterol, weight, blood sugar, and insulin levels

Decrease risk of stroke, depression and colon cancer

Soy decreases risk of breast cancer

Lectins destroyed by cooking





# **Cruciferous Vegetables**

Broccoli, Cauliflower, Brussel Sprouts, Kale, Bok choy, Cabbage, Arugula

Aim for at least 1 serving / day

Chemical sulforaphane reduces inflammation and cancer risk, boosts liver detoxification



## **Greens, Vegetables (+ Mushrooms)**

Leafy Greens	Dark leafy greens: high source minerals (calcium, magnesium, iron), vitamins, fiber. Aim for 1 serving per day.
Plus 3 More	Aim for 3 other veggie or mushroom servings per day
Mix & Match	Mix and match veggies over a week to diversify portfolio and maximize cancer protection. Eat mix of raw and cooked.





## **Seeds and Nuts**

Aim for 1 serving/day plus 1 serving flaxseed per day. High in fiber and poly-unsaturated fatty acids (PUFAs.)

Global Burden of Disease study: Insufficient nuts/seeds were 3<sup>rd</sup> leading dietary risk factor for death and disability worldwide

Walnuts have highest omega-3. PREDIMED study showed 50% reduction in cancer death if >3 serves/wk

Despite high caloric density, nuts and seeds associated with weight loss

# Whole Grains

Aim for 3 servings per day; whole INTACT grains preferred

Barley, oats, farro, brown or wild rice, wheat berry, buckwheat, bulgur, millet and pseudograins

High in protein, fiber, nutrients, and antioxidants

Whole grains associated with decrease inflammation, heart disease, diabetes, obesity, stroke

Can increase resistant starches by eating cooled or cooling and reheating

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## Diet Pattern: Mediterranean

#### What's Encouraged

- Olive oil as main source of fat
- 3-9 servings of vegetables
- 0.5-2 servings of whole fruit
- 1-13 servings of cereals, whole grains & legumes
- Moderate intake of:

✓ Red wine Fermented dairy

√Seafood Eggs

√ Poultry Nuts & seeds

#### What to Limit

- Red meat
- Ultra-processed carbohydrates & meats
- Saturated fats



## **Diet Pattern: DASH**



#### What's Encouraged

- Vegetables, fruits, and whole grains
- Fat-free or low-fat dairy products
- Fish, poultry, and lean meats
- Nuts, seeds, and legumes
- Fiber and the minerals calcium, potassium, & magnesium

#### **What to Limit**

- Sodium: 1,500-2,300 mg per day
- Total fat: ~27% of total daily calories
- Saturated fat: < 6% of total daily calories
- Cholesterol: < 150 mg per day for a 2,100-calorie eating plan
- Red and processed meats
- Sugar-sweetened beverages & foods with added sugars

## **Intermittent Fasting**

#### **Potential Advantages**

- Reducing "decision fatigue" regarding food selection
- · Quickly reversible
- May better fit in day-to-day patient scheduling
- May reduce caloric intake with variable effects on lean body mass, resting metabolic rate, and total energy expenditure, often dependent upon physical activity
- May reduce body weight and improve metabolic parameters (i.e., improve insulin sensitivity, blood pressure, lipids, and inflammatory markers)



#### **Potential Disadvantages**

- Does not necessarily emphasize healthful meal quality
- May not be appropriate for patients with eating disorders (e.g., bulimia or bingeeating disorder)
- Increases the risk of hypoglycemia among patients with diabetes mellitus who do not appropriately adjust their hypoglycemic anti-diabetes drug treatments
- · Unclear if sustainable lifelong
- Most long-term evidence of efficacy, health benefits, and safety derived from animal studies
- Prolonged fasting (not intermittent fasting) may promote gout, urate nephrolithiasis, postural hypotension, and cardiac dysrhythmias.

## **Clinical Case**

#### **HPI**

- 61-year-old man with a BMI of 39.2, hypertension, dyslipidemia, HFpEF, coronary artery disease s/p PCI in s/o recent myocardial infarction, type 2 diabetes, peripheral neuropathy, knee osteoarthritis and depression presents to clinic for hospital follow up.
- He works third shift as a hotel auditor. He snacks frequently and passes time watching
  TV. He met with a dietitian during his hospitalization and complains he "can't eat
  anything" due to his "water, sodium, and sugar restrictions."

#### **Medications**

• Rosuvastatin, Losartan, Metoprolol, Aspirin, Plavix, Metformin, Glipizide, Gabapentin, Escitalopram, Tylenol

#### Insurance

Commercial (Non-Medicaid/Medicare)



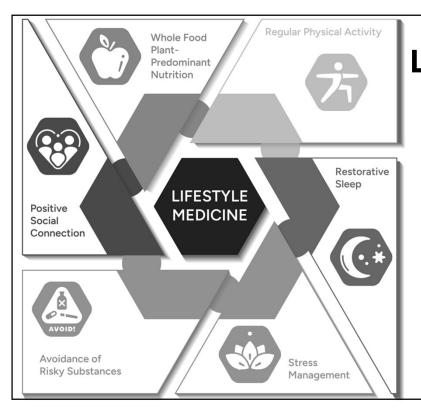
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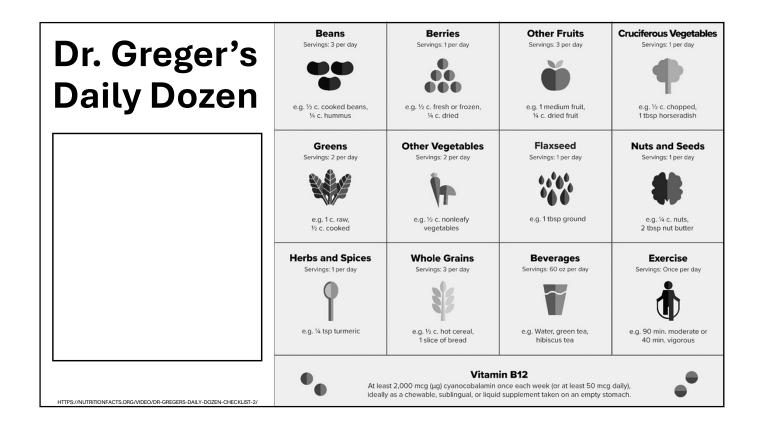
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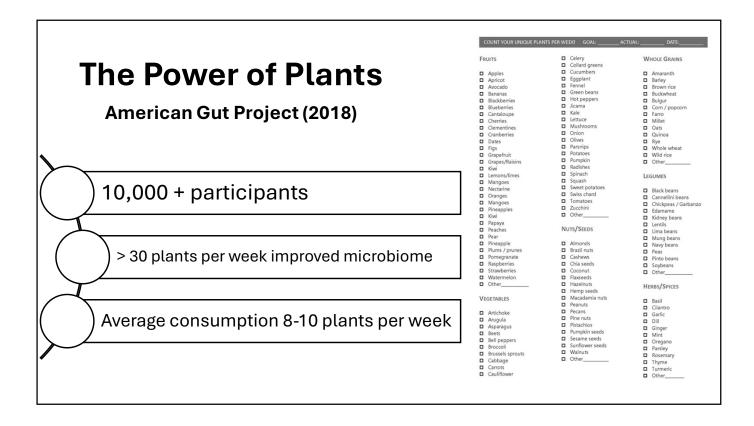


# Lifestyle Medicine Approach to Patient Care

- 1. Identify purpose
- 2. Outline goals
- 3. Assess current lifestyle
- 4. Co-create an action plan to focus on 1-2 areas at a time
- 5. Review progress towards goals and identify barriers

Source: American College of Lifestyle Medicine





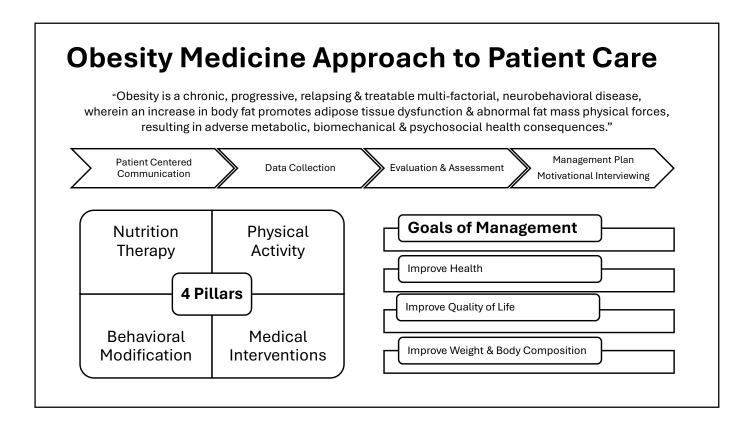


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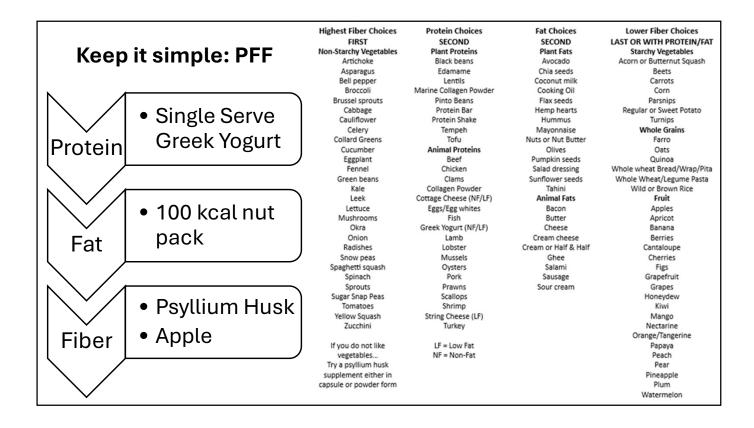
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## Lifestyle & Obesity Medicine Resources

#### American College of Lifestyle Medicine

• lifestylemedicine.org

#### **Obesity Medicine Association / The Obesity Society**

- obesitymedicine.org
- · obesity.org

#### **Clinician and Patient Resources**

- fullplateliving.org
- nutritionfacts.org
- Obesity: A Disease Podcast