The Use of Diet and Nutritional Supplements to Maximize Wellness and Prevent Illness

Robert Baron, MD MS
Professor of Medicine
Associate Dean for Graduate and Continuing
Medical Education

I have no conflicts of interest

I would describe my diet as:

- Balanced, healthy
- Not as healthy as I want it to be
- Vegetarian
- Pesco-vegetarian
- Mediterranean
- Low carbohydrate
- Low glycemic index
- Gluten-free
- Paleo
- None of the above

Why Do We Care About What We Eat?

US Leading Causes of Death, CDC	
1. Heart Disease	32.6%
2. Cancer	30.9%
3. Chronic lower respiratory disease	7.5%
4. Stroke	7.0%
5. Accidents	6.4%
6. Alzheimer's disease	4.3%
7. Diabetes	3.7%
8. Influenza and pneumonia	2.9%
9. Nephritis, nephrotic syndrome & nephrosis	2.7%
10. Intentional self-harm (suicide)	2.0%

Why Do We Care About What We Eat?

US Leading Causes of Death, CDC	
1. Heart Disease	32.6%
2. Cancer	30.9%
3. Chronic lower respiratory disease	7.5%
4. Stroke	7.0%
5. Accidents	6.4%
6. Alzheimer's disease	4.3%
7. Diabetes	3.7%
8. Influenza and pneumonia	2.9%
9. Nephritis, nephrotic syndrome & nephrosis	2.7%
10. Intentional self-harm (suicide)	2.0%

Lifestyle and Disease

- 1/3 of premature deaths in the U.S. are attributable to poor nutrition and physical inactivity.
- Over 50% of American adults do not get the recommended amount of physical activity.
- Only 10% of Americans eat a healthy diet consistent with federal nutrition recommendations.
 - Too high in calories, saturated and trans fat, salt, and refined sugars.
 - > Too low in fruits, vegetables, whole grains, and fiber

Topics

- Total calories and macronutrient balance
- Dietary Fiber
- US Dietary Guidelines
- Sodium
- Vegetarian Diets
- Mediterranean Diets
- Antioxidants and B vitamins
- Fish oil
- Vitamin D
- Recommendations

U.S. Calorie Intake

 Calorie consumption in the U.S. has increased 30% over the past 4 decades.

Year	Average calories consumed	
1970	2,057	
2008	2,674	

Top calorie sources in U.S.

- 1. Grain-based desserts
- 2. Yeast breads
- 3. Chicken and chicken-mixed dishes
- 4. Soda, energy drinks, and sports drinks
- 5. Pizza
- 6. Alcoholic beverages
- 7. Pasta and pasta dishes
- 8. Mexican mixed dishes
- 9. Beef and beef dishes
- 10. Dairy desserts

Extra Calories From Eating Away From Home

	Calories/meal at home	Calories/meal at a restaurant
Normal Weight	550	825
Overweight/Obese	625	900

Public Health Nutrition, 2013

Macronutrient Composition

- Macronutrient composition: the relative proportions of fat, carbohydrate, and protein in the diet
- Bottom line:
 - a wide range of macronutrient composition is consistent with a healthy diet
 - in most clinical circumstances total calories "trumps" macronutrient composition
 - achieving desired calorie intake will achieve most clinical goals

Dietary Fiber

- Plant matter
 - Not digested by human digestive enzymes
 - Some can be digested by gut bacteria
- Includes
 - Cellulose, hemicellulose, pectins, gums, and mucilages, lignins
- Classified as soluble or insoluble
- IOM: Men 30-38 g/day. Women 21-25 g/day.

Dietary Fiber:The Most Important Nutrient?

- Heart: Lowers LDL, lowers triglycerides
- Diabetes: Reduces blood sugar
- Gut: Prevents constipation, hemorrhoids, diverticular disease
- Weight: Promotes satiety

Baron RB, BMJ 2013

Dietary Fiber:The Most Important Nutrient?

- Meta-analysis of 22 cohort studies:
- Every 7 grams of fiber associated with a 9% decrease in CV events
- One portion of whole grains and one portion of legumes, or from two to four servings of fruits and vegetables.

Threapleton DE, BMJ, 2013

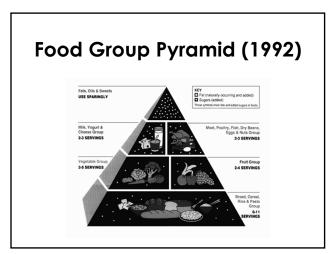
Quantifying Dietary Fiber (per serving)

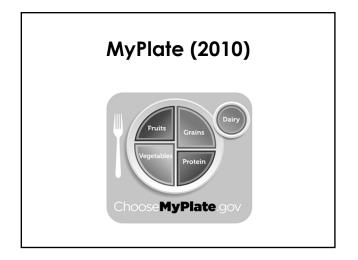
Apple:	4.4	Shredded wheat	6.1
Blueberries:	3.6	Brown rice	1.5
Orange:	3.0	White rice	0.3
Grapes	0.8	Peanuts	9.1
Pear:	5.5	Asparagus	1.4
Raspberries	8.0	Kidney beans	6.8
Vhite bread	0.7	Broccoli	1.1
Vheat bread	1.9	Carrot	1.7
Vheat-bran cer	eal 7.4	Spinach	3.5
Cornflakes	0.9	Tomato	1.0
Datmeal	4.8	Powdered psyllium 3.0	

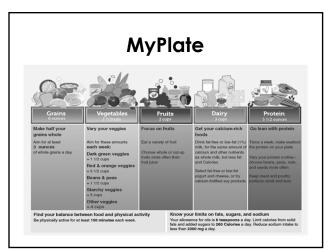
Principles of a Healthy Diet

- Wide variety of foods
- High food quality
- Moderation (right quantity)









Dietary Guidelines 2010

- Enjoy food, but eat less
- Make half your "plate" fruits and vegetables; consume beans, whole grains, nuts and seeds
- Increase the intake of seafood & fat-free & low-fat milk and milk products
- Drink water instead of sugary drinks
- Compare sodium in foods and choose the lower v
- Consume only moderate amounts of lean meats, poultry & eggs

Dietary Guidelines 2015 (Draft)

- Limitations on dietary cholesterol have been removed
- Consume a diet rich in fruits and vegetables, whole grains, low-fat dairy, seafood, legumes, and nuts
- Consume a diet low in red or processed meats, sugar sweetened foods and beverages, and refined grains

Dietary Guidelines 2015 (Draft)

- Limit daily consumption of added sugars (<10% of calories), saturated fat (<10% of calories), and dietary sodium (2300 mg)
- Half of all grain intake should come from whole grains
- Moderate alcohol is fine in most adults
- Up to five cups of coffee per day is not associated with adverse effects in most adults

Too Many Refined Grains

- Federal guidelines recommend six 1 ounce servings per day for a 2000 calorie diet, and half should be whole grain.
- The average person eats 8 servings of grains per day, and 7 of the 8 are refined.



What is a serving of grain?

- 1/2 cup cooked rice or other cooked grain
- 1/2 cup cooked pasta
- 1/2 cup cooked hot cereal, such as oatmeal
- 1 six inch tortilla
- 1 slice of bread (1 oz.); ½ bun
- 1 very small (1 oz.) muffin
- ½-1 cup ready-to-eat cereal (½ cup = ½ a baseball)



Select whole grains

- Look for "whole" in the first ingredient on the label.
- Aim for total carbs/fiber = <10 for bread and <5 for cereals.

Way Too Much Added Sugar

The average person consumes 30 teaspoons of sugar and sweeteners per day (over 15% of calories).

(Includes cane and beet sugar, high fructose corn syrup, corn syrup, dextrose, honey)

- >The AHA recommends \leq 6 teaspoons (24 grams) of added sugar per day for women, and \leq 9 (36 grams) for men .
- >A 20 oz. soda has twice that.

Nutrition Action Health Letter, CSPI, March, 2013

Salt and Public Policy

- Coronary Heart Disease Policy Model to quantify benefits of modest salt reduction in U.S.
- Benefit through a reduction in systolic blood pressure from 1-9 mm Hg in selected populations
- New cases of CHD decrease by 4.7 8.3 and stroke by 2.4 to 3.9 /10,000
- Regulatory change leads to wide benefit and is cost-effective

Bibbins-Domingo K, et al. NEJM 2010

Sodium reduction and BP control in individual patients

- Reduce sodium intake to ≤100 meq/d (2.4 g Na): 2-8 mm Hg in SBP
- DASH Diet: 6 mm alone:
- DASH diet plus sodium restriction: 14 mm Na

Dietary Guidelines 2010

Addressing Sodium:

- 2,300 mg per day for general population
- 1,500 mg for aged 51+, African Americans
 kypertension, diabetes & kidney disease

Sodium

But:

- •1/2 of U.S. would qualify for 1,500 mg recommendation
- •Average current intake 3,400 mg per day (1.5 teaspoon salt)

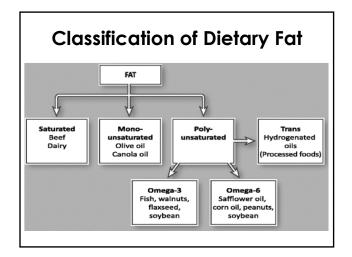
Institute of Medicine: May 2013:

- •Limit everyone to 2,300 mg per day (<u>1 teaspoon</u> salt)
- •Evidence doesn't support lower recommendations

Sources of sodium 80% in processed or prepared foods Naturally occurring 12% Processed/restaurant foods 777% Sources: Mattes et al.

Top sodium sources in U.S.

- 1. Yeast breads
- 2. Chicken and chicken-mixed dishes
- 3. Pizza
- 4. Soda, energy drinks, and sports drinks
- 5. Cold cuts
- 6. Condiments
- 7. Mexican mixed dishes
- 8. Sausage, franks, bacon and ribs
- 9. Regular chees
- 10. Grain-based desserts



Saturated Fat and Cardiovascular Disease (CVD)

- Meta-analysis of observational studies: no association between higher saturated fat and CVD
- But: strong evidence from RCT's that replacing saturated fat with unsaturated fat reduces total and LDL cholesterol.
- Replacing sat fat with carbohydrates also reduces total and LDL cholesterol but increase triglycerides and lowers HDL

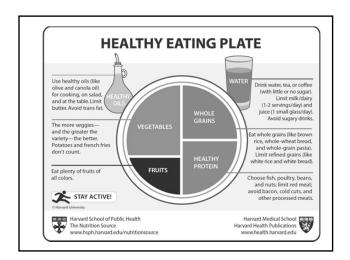
Saturated Fat and Cardiovascular Disease (CVD)

- Replacing saturated fat with polyunsaturated fat (or mono-unsaturated fat) reduces CVD events and mortality
- But: reducing total fat with carbohydrates does not lower CVD risk
- Current recs: need to be careful what replacers saturated fat.
- Use oils (soy, corn, olive, canola) to replace animal fats (butter, cream, lard) or tropical oils (palm, coconut)

Mediterranean Diet:

Healthy fats and good carbs with a big side of fruits and vegetables





Primary Prevention of Cardiovascular Disease with a Mediterranean Diet

NEJM, Feb. 25, 2013

7447 Men and women, type 2 diabetes or at least 3 CV risk factors. 4.8 years

Compared 1) Mediterranean diet supplemented with 4 Tbsp/day of olive oil or 2) with 1 ounce of nuts/day; vs. 3) a low fat diet (the control)

Results: 288 cardiovascular events occurred: 3.8% in the olive oil group, 3.4% in the nut group, and 4.4% in the control group. (P=0.015)

Eat about 1 ounce of nuts most days

- 1 ounce of nuts=1/4 cup or a small handful
- But be aware of the calories...
 - 1 ounce=160-200 calories



Vegetarian Diets

- Vegans
- Fruitarians
- Lacto-vegetarians
- Lacto-ovo vegetarians
- Pesco-vegetarians
- Pollo-vegetarians
- Flexitarians (Semi-vegetarians)

Vegetarian Diets: Observational Study

- Adventist Health Study 2
 - 73,000 participants; 2570 deaths
 - 5.8 years follow-up
- <u>Compare</u>: vegans, pesco-; lacto-ovo-; and semi-vegetarians to nonvegetariants
- <u>Outcome</u>: lowest mortality in pescovegetarians and vegans (15-20%).

Orlich, JAMA IM, 2013 Baron, JAMA IM, 2013

Antioxidants

- Meta-analysis of 47 high-quality randomized trials of antioxidants
- 181,000 individuals
- 25,000 deaths

Bjelakovic, JAMA, 2007

Antioxidants: All-cause mortality

• Vitamin A 16% increase

• Beta-carotene 7% increase

• Vitamin E 4% increase

• Vitamin C 6% trend towards increase

All p << 0.05 except vitamin C

Bottom line: actively discourage anti-oxidant

Bjelakovic, JAMA, 2007

Folate Supplements

- Pooled meta-analysis of 8 large, high quality randomized trials
- 37,485 individuals
- 5,125 deaths
- 9,326 major vascular events
- 3.010 cancers

Clarke, Archives IM, 2010

Folate/Homocysteine RCTs

• Homocysteine 25% decrease

Death No effect: 1.02 (97-1.08)
 CVD events No effect: 1.01 (.97-1.05)
 Cancer No effect: 1.05 (.98-1.13)

Folate does not prevent cancer or heart disease

Clarke, Archives IM, 2010

Folate And Neural Tube Defects (NTD)

- 70% reduction in 2nd occurrences
 - 4 mg of folate
- 63% reduction in 1st occurrence
 - 0.4 mg of folate
- Since flour fortification
 - 46% reduction in NTD

Meta-analysis, Blencowe, IJE, 2010

Classification of Dietary Fat FAT FAT Saturated Beef Dairy Omega-3 Fish, walnuts, flaxseed, soybean Omega-6 Safflower oil, corn oil, peanuts, soybean Omega-6 Safflower oil, corn oil, peanuts, soybean

Omega 3 Fatty Acids: Meta-analysis

- 48 RCTs of 36,913 participants; 41 cohort trials
- No significant effect of omega 3 fats on mortality, CV events, or cancer
- · Analysis of diet only trials: also no benefit
- No reason to advise people to stop rich sources of omega 3 fats, but better trials needed

Cochrane Library, 2009

Since meta-analysis: Two additional RCTs

- ORIGIN trial: NEJM June 2012
 - 12,536 patients with DM or high sugar
 - 1 g daily of omega-3 x 6.2 years
 - NO reduction in death, CVD events
- Risk and Prevention Trial: NEJM May 2013
 - 12,513 patients at high risk for CVD
 - 1 g daily of omega-3 x 5 years
 - NO reduction in death, CVD events

Vitamin D

 Many clinicians measure vitamin D and recommend supplements, often high doses, for possible prevention of cancer, CVD, diabetes, autoimmune disorders, cognitive decline, and other conditions

Rut

- USPSTF: no data to support overall risks and benefits of supplemental vitamin D and no role for screening for vitamin D deficiency
- IOM: no clear evidence that supplemental vitamin D lowers risk of non-skeletal health outcomes

Manson, JAMA 2015

Vitamin D

- IOM: Recommends 600 IU < age 70; and 800 IU > age 70
- Equivalent to: 3-4 servings per day for fortified foods: milk, yogurt, soy beverages, OJ, cereal plus fatty fish twice per week
- Adequate for 97.5% of US and Canadian residents (including those who live in north in winter.)
- Normal serum concentration of 20-50 ng/ml

Manson, JAMA 2015

Calcium

- Adequate calcium important for skeletal health at all ages
- Food is preferred approach. No routine recommendation for supplements. May consider if intake is inadequate
- Recent studies have raised concerns about increased CV risk with supplements

Bauer, NEJM 2013

Calcium

IOM Recommends:

- Women age 19-50 and men age 19-70: 1000 mg per day
- Women >50 and men >70: 1200 mg per day
- Avoid > 2000 mg per day (after age 50)

Bauer, NEJM 2013

mq • Plain Yogurt 448 8 oz 1.5 oz 333 Mozzarella Cheddar 1.5 oz 307 293 • 2% milk 1 cup Cottage cheese 1 cup 206 • Fruits and vegetables 261

Dietary Calcium

Fortified OJ 6 oz • Kale 100 1 cup Bok Choy 1 cup 74 Broccoli 1 cup 43

Dairy

Dietary Calcium

 Canned fish ma Sardines 3 oz 325 • Salmon 3 oz 183 Grains Fortified cereals 1 cup 100-1333 Fortified cooked oats 1 cup 187 Commercial breads 1 slice 30-73

Calcium and Vitamin D: Summary

- Primary Prevention of Fractures: Insufficient (I)
- >400 D3 and >1000 Calcium: Insufficient (I)
- <400 D3 and >1000 Calcium: Discourage (D)
- Screening for Vitamin D deficiency: Insufficient (I)
- Vitamin D for preventing falls with in high risk,
 >65: Recommend (B)

USPSTF 2013/2014

Dietary Supplements: Summary

Beta-carotene Discourage - harmful
 Vitamin E Discourage - harmful

• Folate Prevent neural tube defects

• Omega-3s No benefit

Correct deficiency, <20ng/ml

Michael Pollan's Three Rules

- Eat food
- Not too much
- Mostly plants

Baron's Rules

- Eat unprocessed foods
- Eat the right amount to maintain your weight
- Eat something colorful at every meal (and every snack)
- Don't drink calories
- If can't make the "best" choice, make a better choice
- Be as fit as you can be: exercise daily
- Eat with your children; eat at home

The "Generic" Diet

- Continued debate: macronutrient balance, amounts of meat/fish/fowl, other specific foods
- But almost all agree: Limit sugar, refined grains, large amounts of saturated and trans fat. Eat fruits and vegetables, healthy oils, whole grains, legumes and nuts
- Bottom line: Master a "generic" diet for patients and self

Baron, RB JAMA Int Med, 2013

For More Information

- Dietary Guidelines for Americans, 2015 http://health.gov/dietaryguidelines/2015.
- USDA's Food & Nutrition Information Center: http://fnic.nal.usda.gov/nal_display/index.php?info_center=4&tax_level=1
- CDC Division of Nutrition, Physical Activity & Obesity: http://www.cdc.gov/nccdphp/dnpao/index.html
- USDA National Agricultural Library: http://www.nutrition.gov/
- Center for Science in the Public Interest (CSPI): http://www.cspinet.org/
- ChooseMyPlate.gov: http://www.choosemyplate.gov/

For More Information

- FDA: How to Understand and Use the Nutrition Facts Label: http://www.fda.gov/Food/ResourcesForYou/Consumers/NFLPM/ucm274593.htm
- FDA: Label Man Make Your Calories Count: http://www.accessdata.fda.gov/videos/CFSAN/HWM/hw mintro.cfm
- Nutrition.gov: Shopping, Cooking & Meal Planning: http://www.nutrition.gov/shopping-cooking-mealplanning
- Healthy Eating Plate (Harvard): http://www.hsph.harvard.edu/nutritionsource/whatshould-you-eat/pyramid/