

Questions and Answers

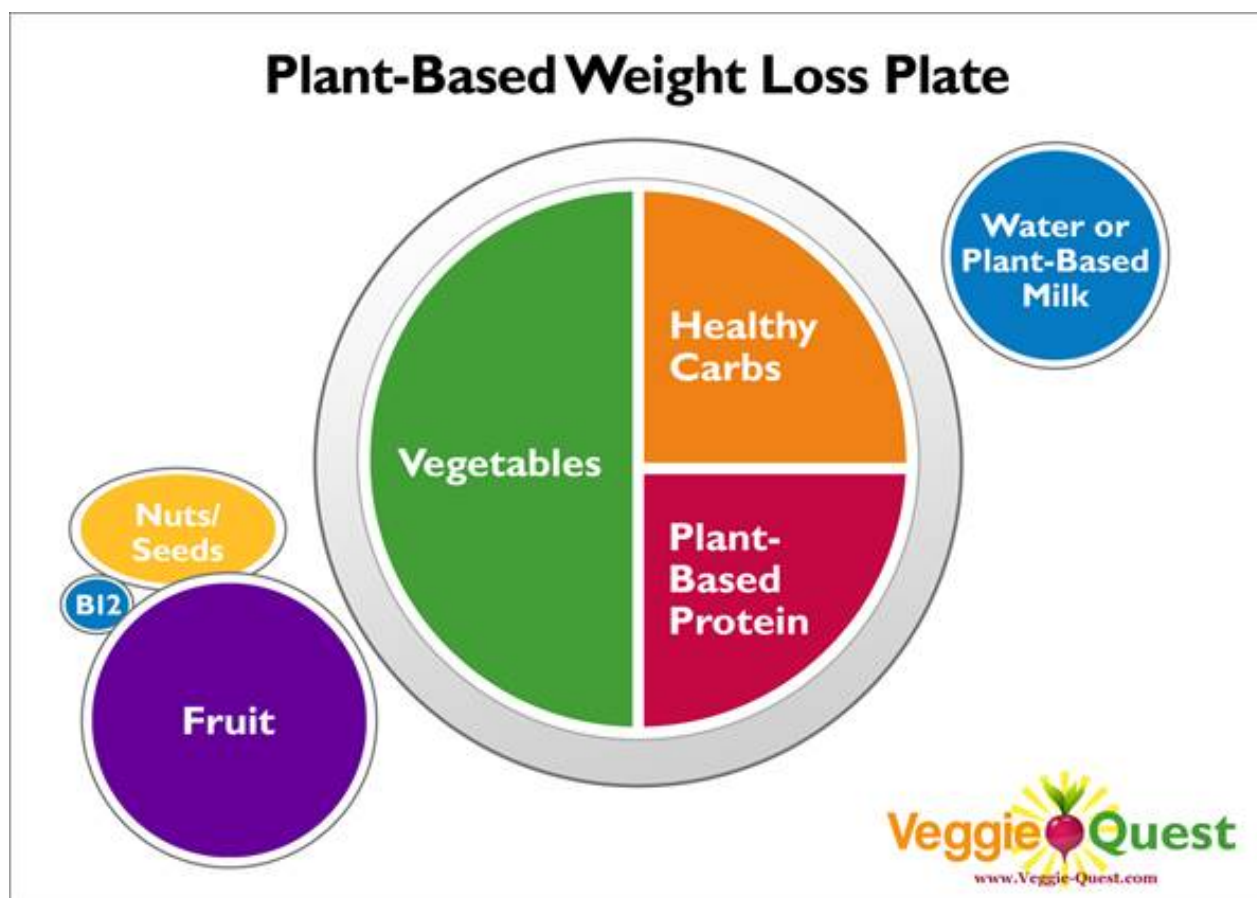
How a Flexitarian Diet Could Work for You

February 18, 2020

Following are questions from participants in the webinar, ***How a Flexitarian Diet Could Work for You*** and answers to each by the speaker, Jessy Richards, MS, RD, CDE.

Q: I am pre-diabetic and believe I have trouble processing sugar and carbs. Do you think the flexitarian diet will help me lose weight? I am struggling with post-menopausal weight gain.

A: Yes, this lifestyle is super helpful for people with prediabetes and diabetes! Whole, plant foods contain fiber. When fiber is broken down by your beneficial bacteria, little bits are left over and float through your blood stream and improve the functioning of your insulin, so that you will be able to process sugar and carbs better. Yes, this diet can help with losing weight, as well. One way to do this is to aim for half your plate to be vegetables. Vegetables especially are very low calorie, but filling. Here's what it could look like on your plate:



You can get “The Flexitarian Diet” by Dawn Jackson Blatner from your local library. It contains 140 easy recipes with just five ingredients or fewer. All of them would be supportive for somebody with prediabetes. Blatner talks about healthy weight loss, as well.

Q: How does a flexitarian diet compare to a ketogenic diet? Will the flexitarian diet bring my A1C down and maybe get me off of Metformin (medication for Type 2 diabetes)?

A: Because you’re asking both questions, I’ll compare how the ketogenic diet and the flexitarian diet affect your A1C.

How does the ketogenic diet affect people with diabetes? Some people have used a ketogenic diet to reduce or eliminate diabetes medications, such as insulin. Diabetes is a disease of insulin resistance and a symptom is high levels of sugar in the blood, which is, of course, damaging. If a person with diabetes follows a ketogenic diet, the symptom of high blood sugars often improves, and people have come off of their diabetes medications. But they still have insulin resistance, and following a ketogenic diet which is often 80% fat, their insulin resistance unfortunately gets worse, because of the high fat content. It’s easy to test. Give a person on a ketogenic diet half a serving of carbohydrate and it can send blood sugars into the 200s. Because the ketogenic diet never did cure the insulin resistance, but it did manage a symptom.

A flexitarian diet is higher carb, but hopefully whole-food, high-fiber carbohydrate. It can bring up a person’s blood sugar temporarily, but the fiber ultimately can improve insulin sensitivity so much that I have seen people’s A1C come down to the ideal range, getting off all medications and insulin. So while both diets can bring down A1C’s and may get people off their insulin, I like the flexitarian diet best because it is treating the underlying condition – the insulin resistance.

Q: How do the new "Impossible" burgers fit in here (with the flexitarian diet)?

A: I like to take the approach the PREDIMED study chose. To keep it simple, in my mind, I give positive points for plants and negative points for animal products. So incorporating the “Impossible” veggie meat would provide some good protein, B12, and other nutrients in the flexitarian diet. But “impossible” meat is more processed than beans and contains less fiber. So in my mind I classify beans, nuts, and seeds as more healthy, but I enjoy the plant-based protein alternatives alongside them, finding they taste great together for many recipes.

Q: Are there problems associated with too much soy? Is it linked to breast cancer?

A: This is a great question and not simple to answer. After pouring over lots of research, I have concluded that between one to four servings of organic, non-GMO soy is associated with being even preventative against breast cancer. The phyto-estrogen in soy doesn’t stimulate the same receptors as the estrogen that has been supplemented or is produced by our own bodies. Here is a link to one of my favorite plant-based advocates and what he has to say about soy and breast cancer: “Soy Intake and Breast Cancer” Michael Greger, MD, from Nutritionfacts.org.
<https://nutritionfacts.org/video/is-soy-healthy-for-breast-cancer-survivors/>.

Q: What do you think of the flexitarian diet for post gastric bypass people?

A: In a previous position, I worked as a bariatric dietitian, counseling people before and after gastric bypass surgery. The flexitarian diet goes along nicely with the diet information I provided my patients, when their surgeons have advanced them to a regular texture diet. But let me add three other important modifiers: individual tolerance, reduced added sugar, and reduced added fat.

Individual tolerance: In a flexitarian diet, there is an emphasis of whole food items as the base: fruit, veggies, whole grains, starchy veggies, beans, nuts, and seeds. There may be some of these items that are harder for you to tolerate after gastric bypass surgery. To promote better tolerance, you could try cooking the item, as cooked food is easier to break



down than raw. Or using a blended form of an item. For example, if you can't tolerate nuts, try a nut butter. If you can't tolerate beans, mash them up. If you can't tolerate salad, try cooked vegetables instead. It can take time. Stick with items you know you can tolerate, and try others as you feel inclined, but listen to your body, and don't push it if it's causing you GI distress!

Reduced Added-Sugar: Some people don't tolerate added sugars after a gastric bypass surgery. They can cause diarrhea. The sugar from brown sugar, white sugar, organic sugar, even 100% fruit juice and honey can be problematic. I recommend no more than 1 teaspoon or 5 grams in one sitting. Those forms of sugar are dumped into the intestines too quickly, as they are too processed and don't have any fiber to slow them down. But sugar from whole fruit, berries, and other carbohydrates is fine, as the fiber is connected to it and will slow down its absorption. Use fruits to sweeten or I would recommend Stevia or monk fruit sweetener, which are two natural sweeteners.

Reduced Added-Fat: Too much oil, butter, shortening, cheese, cream or other high-fat items can also cause GI distress after a gastric bypass surgery. So it is recommended to have a lower fat diet. This is also recommended because it's supportive of weight loss. I would recommend steaming or baking vegetables or using a minimal amount of oil. It is better to get your fat from natural nut butters or avocado, as these contain the fiber that can be helpful.

Q: Are there specific fruits and vegetables that need to be avoided? I am used to having to avoid starchy vegetables and certain high sugar fruits, all of which I love. It makes it difficult to follow a diet when you have to remove all the foods you enjoy and eat those that are okay to your palate but not nearly as fun or enjoyable.

A: If you have been told to be careful with potassium or phosphorus because of chronic kidney disease, or you are dealing with uncontrolled blood sugar levels, then there is reason to modify the flexitarian diet to not include some of the fruits or veggies or modify the portion size.

If you are considering this for achieving or maintaining healthy weight, and you are afraid of consuming high-carb items, then I have good news for you. The carbs from whole fruit and whole starchy vegetables belong as part of the lifestyle to best control your weight! So that's fresh or frozen fruits and veggies, baked in the oven, or sautéed lightly with oil.

The processed versions include fruit juice, crackers, potato chips and fries, these are the ones to shift off your plate. Whole fruits and veggies are often low calorie, but filling. One of my favorite examples is the calories of a Costco blueberry muffin compared to the calories in navel oranges. It would take eating 11.5 navel oranges to equal the same calories as ONE Costco blueberry muffin! I don't know about you, but I have never consumed so many navel oranges in one sitting. Your weight is going to be easier to control allowing yourself these fruits and vegetables.

See the plate graphic from page 1 as an example of how to put them in the right balance. Note: the plate is often smaller for us women working to keep our weight where we want it.

