



communicating Food for Health

Can a Rural Asian Diet Prevent and Treat Type 2 Diabetes?

By James J. Kenney,
PhD, FACN

The USA has seen a disturbing increase in obesity since the 1970s. This increase in body fat stores for the average Americans has led to a marked increase in the prevalence of type 2 diabetes mellitus (DM). In the 1970s, about 5 million Americans had type 2 DM compared to nearly 30 million today. As if that was not bad enough, there are also another 90 million Americans who have the insulin resistant metabolic syndrome. This metabolic syndrome is generally accepted as a pre-diabetic state and also called pre-diabetes. Exactly what is driving this obesity and type 2 DM epidemic has been a matter of debate for many years. In recent years, as the problem has continued to grow, we've heard from a few researchers, quite a few of scientifically-naïve clinicians, and a growing number of journalists turned wannabe nutritionist "experts" who claim that Americans are getting fatter

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and developing type 2 DM largely because the US Dietary Guidelines told Americans to reduce their intake of dietary fat and especially saturated fat. These "experts" blame the modest reduction in the % of fat calories (from about 40% to 34% of calories) and the modest increase in % carbohydrate calories inspired, perhaps in part by the US Dietary Guidelines starting in the 1970s, for the expanding American waistlines we've seen over the past half century in the USA. These "experts" tell us that excessive insulin release caused by diets higher in carbohydrate are largely responsible for excessive calorie intake and the resulting epidemic of metabolic abnormalities that culminate in type 2 DM. Is their thesis consistent with the preponderance of the scientific evidence?

Perhaps not, according to Dr. George King, a professor at Harvard Medical School and the Research Director and Chief Science Officer at the Joslin Diabetes Center. Dr.

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In China, the growing epidemic of overweight and type 2 DM has been associated with a marked increase in fatty animal products and refined oils, along with a large increase in the percent of calories coming from fat.

King, who is Asian-American, has spent a lot of time in China and is well aware that China now has far more people diagnosed with type 2 DM than America and that the prevalence of type 2 DM is increasing even faster in China and other Asian countries than it has in the USA over the past two decades (or longer). However, in China, the growing waistlines and increasing prevalence of type 2 DM are not associated with an increase in dietary carbohydrate. In fact, in China the growing epidemic of overweight and type 2 DM has been associated with a marked increase in fatty animal products and refined oils, along with a large increase in the % of calories coming from fat. At the same time, traditional starchy foods like rice, wheat, beans, yams, and potatoes have been declining and so has the % of calories from carbohydrate. Indeed, it is in urban areas of China where people are getting heavier and developing type 2 DM in unprecedented numbers. In the rural areas of China, where people are still eating more starchy

foods and a lot less animal products and fat, the prevalence of type 2 DM has become far lower than in the cities. At the Joslin Asian Clinic they are recommending a high-carbohydrate diet based more on traditional Asian foods than the high-fat, low-carb foods that Americans are being told to eat in place of whole grains and beans, particularly according to the Paleo-Diet mythologists, in order to lose weight and prevent or treat type 2 DM. For the past two decades, Dr. King and colleagues at the Joslin Diabetes Center have recommended what they call a Rural Asian Diet (RAD), that is composed largely of plant foods high in complex carbohydrates and fiber and very low in fat. They recommend this in order to prevent and treat type 2 DM. The RAD is 70% carbohydrate, 15% fat, and 15% protein and has 15g of fiber per 1000kcal. Could a high-carbohydrate, very-low-fat diet actually be useful for preventing and even reversing type 2 DM?

In his new book, *The Diabetes Reset*, Dr. King talks

about cutting edge research he and others at the Joslin Diabetes Center and in other research centers around the world are doing. The introduction of this book discusses the research showing how and why a typical Western diet promotes weight gain and insulin resistance and eventually leads to the development of type 2 DM. He explains what it is about a typical Western-style diet and lifestyle that is largely responsible for promoting weight gain, insulin resistance, and type 2 DM. On page 94 Dr. King states:

“My own research has identified this approach as a highly effective diet for reversing and preventing type 2 diabetes. Our clinical trial of this [RAD] diet found that it encourages weight loss even without any calorie restrictions.”

Dr. King’s book provides guidelines on five important blood tests that people need to determine whether they

To see the rest of this article, please visit <https://foodand-health.com/rural-asian-diet-diabetes/>.

How Much Fat is in That?

Activity Ideas:

Sometimes foods can hide far more fat than you might expect. Help your clients develop a good sense of how much fat a product contains (along with where to look for it) with these fun and engaging activity ideas.

Activity #1: Isolate the Fat

For this activity, you will need pencils and paper, a few food packages (we recommend pepperoni pizza, fried chicken, and a croissant sausage sandwich), and some sticks of butter or lard.

Gather your audience. Explain that the sticks of butter/lard represent the fat content in various foods.

Have participants check the Nutrition Facts labels on the boxes of food (or look up the nutrition information online) and

write down how much total fat is in each item.

Then have each person or group measure out the proper amount of butter/lard to represent the fat content of the food (this can be done by grams of fat in each or by tablespoon, whichever is easiest for your group to grasp). Place each measured amount in a separate clear drinking glass.

Now that the fat in several dishes has been isolated and visually represented, talk about it. Did people expect those foods to have that much fat? Why or what not? What are some healthful ways to reduce the fat that people eat?

Activity #2: Freeze the Fat

For this activity, you will need access to a refrigerator and a variety of foods from a fast food restaurant. Burgers and fries work especially well.

If you have the time, introduce this activity at the beginning of your presentation, then refrigerate the foods and conclude the activity right before you end the presentation.

If you don't have the time, or access to a refrigerator, you'll simply need to put the food in the fridge several hours before you begin.

Refrigerate the fast food for at least 6 hours, then present it to your participants. Point out how much easier it is to see the hardened fat now that the food is cold.

Now it's time for the discussion. How much fat is in each food item? Talk through the relationship of the chilled food to the advertising images everyone has seen, then review the health dangers that solid fats pose. How can these foods affect health? (It's especially useful to focus on heart health).

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P.O. Box 271108, Louisville, CO 80027
Phone: 800-462-2352 Fax: 800-433-7435
<http://communicatingfoodforhealth.com>

Executive Editor

Judy Doherty, PC II

Contributing Writers

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Jill Weisenberger, MS, RD, CDE
Victoria Shanta Retelny, RD, LD
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P.O. Box 271108, Louisville, CO 80027;

Phone: 800-462-2352; Fax: 800-433-7435; orders@foodand-health.com

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