## Session One Objectives

- Provide nutrition guidelines for school nurses working with students with diabetes
- Describe methods of diabetes medical nutrition therapy for Type 1 and Type 2 diabetes
- Describe how macronutrients affect blood glucose and weight


## Goals of Medical Nutrition Therapy (MNT)

- To provide adequate energy to ensure normal growth and development
- Improve health through healthy food choices and physical activity
- Attain and maintain optimal metabolic outcomes


## Goals of Medical Nutrition Therapy (MNT)

- Address individual nutritional needs
- To provide self-management education for treatment of acute complications
-Hypoglycemia and hyperglycemia
- To decrease risk of chronic diabetes complications


## Question

True or False
Management of diabetes at school is best accomplished when the student is not allowed to eat sweets.

## Treatment of Diabetes

- Self-management training/education
- Medical Nutrition Therapy
- Exercise
- Medications
-Oral agents
-Insulin


## MNT Considerations

- Age and ideal body weight
- Pattern of growth and weight gain
- Typical food intake at home/school
-What, when, where
- Activity patterns
- Home and school schedule


## Question

True or False
Medical Nutrition Therapy for Type 1 and Type 2 diabetes...
$\qquad$ is the same.
$\qquad$ CHO intake for Type 1 can be more flexible.

Management of Type 2 Diabetes

- Weight management
- Controlled carbohydrate intake
- Blood glucose monitoring
- Possibly oral medications
- Physical activity


## Why - Weight Management for Type 2 Diabetes

- Helps maintain glucose control
- Decreases insulin resistance
- Weight loss can improve lipid levels
- Improves general health and self esteem


## How - Weight Management

 for Type 2 Diabetes- Calorie control/reduced calorie intake vs. "low calorie diet"
- 3 meals and 2-3 snacks per day
- Controlled carbohydratellow sugar
-Some sweets are allowed
- Low fat = fewer calories, cholesterol
-Low fat dairy products, lean meats


## How - Weight Management for Type 2 Diabetes

- Eat fruits, vegetables, whole grain products
- Increase/regular physical activity
- Note: No written orders for school
-No ADA diet
-Occasionally may need to offer alternative foods for weight loss


## Management of

Type 1 Diabetes

- Insulin administration
- Managed carbohydrate intake
-Some sweets are allowed
- Blood glucose monitoring
- Physical activity


## How - Management of Type 1 Diabetes

- Carbohydrate management
- Calorie control
- Fat control
-Lean meats and dairy products
- Eat fruits, vegetables, and whole grain products


## How Carbohydrate Affects Blood Glucose

- Large effect on blood glucose
- Up to $\mathbf{1 0 0 \%}$ becomes glucose
- Digests in 15 minutes to $\mathbf{2}$ hours
- Blood glucose highest 1 hour after eating
- Fiber slows digestion


## Question

What are the 3 main "fuels," macronutrients, in foods?

C $\qquad$
P $\qquad$
F $\qquad$

## What is a Carbohydrate?

- Macronutrient the body breaks down into glucose
- Provides energylcalories
- Many foods with CHO provide vitamins and minerals for body maintenance and growth


## Question

Carbohydrate food sources include:
$\qquad$ Corn $\qquad$ Cheese
$\qquad$ Yogurt $\qquad$ Milk
$\qquad$ Bread $\qquad$ Egg
$\qquad$ Fruit $\qquad$ Peas

## Other Macronutrients

- Protein
-Provides energy and is essential for growth
-Small effect on blood glucose
-Digests in 3-4 hours
-Slows down digestion of CHO


## Other Macronutrients

-Sources include meat, poultry, eggs, cheese, peanut butter, milk products, soy

## Other Macronutrients

-Saturated fats, cholesterol, and trans fats increase risk of CV disease

## Other Macronutrients

- Fat
-High calorie content
-Small effect on blood glucose
-Digests in 4-5 hours
-Slows down digestion of CHO
-Sources include oils, butter, margarine, nuts, creams, salad dressings


## Question

What kinds of foods affect blood glucose most?
a. Fatty foods - meats, fried foods
b. Starchy foods - fruits, juice, milk
c. Desserts/chocolate

## Exercise and Diabetes

- Effects on blood glucose
-Generally exercise will lower blood glucose
-For students who are highly competitive, exercise may raise blood glucose


## Exercise Guidelines for Type 1 Diabetes

- Monitor blood glucose
-Before and after exercise
- Food intake may need to be increased
- Fluid intake is essential



## Exercise Guidelines for Type 1 Diabetes

- A source of fast-acting CHO should be easily accessible for low blood sugars
- May require a decrease in insulin
-Pump patients may use a temporary lower basal rate or disconnect the pump for up to one hour


## Exercise Guidelines for Type 1 Diabetes

- Continue monitoring blood glucose after exercise is completed


## Fast Acting CHO Sources

- Juice
- Glucose tablets
- Nonfat or 1\% milk
- Candy, no fat
- Sugar
- Honey
- Raisins
- Regular soda
- Regular fruit flavored drinks
- Plain crackers, no fat or peanut butter
- Fruit rollup

| Fast Acting CHO Sources |  |
| :--- | :--- |
| - Juice | - Raisins |
| - Glucose tablets | - Regular soda |
| - Nonfat or 1\% | - Regular fruit |
| milk | flavored drinks |
| - Candy, no fat | - Plain crackers, |
| - Sugar fat or peanut |  |
| - Honey | butter |
|  | - Fruit rollup |

## Session Two Objectives

- Describe use of basic CHO counting for set meal plans/snacks
- Describe use of advanced CHO counting for insulin dosing
- Identify resources for CHO counting
- Identify ways to support students in managing their diabetes



## So How Do You Count Carbohydrates?



## Management of Carbohydrate Intake

- Two options

1. Prescribed amount of carbohydrate (CHO) with each meal and snack
2. Carbohydrate counting and adjusting insulin to food intake at meals and snacks

## Carbohydrate Management at School

1. Prescribed amounts of CHO for lunch and snack(s)
-Prescribed amount of rapid acting insulin with lunch
-Snack - may take extra insulin
-Written orders for CHO amounts can be obtained from dietitian

## Carbohydrate Management at School

2. CHO counting and adjusting insulin doses at lunch to food eaten
-Some may count CHO for snacks and take insulin accordingly
-For MDI

- I:CHO ratio will be written on the school orders


## Carbohydrate Management at School

-For Insulin Pump

- I:CHO ratio is programmed into the pump


## Carbohydrate Management at School

- Insulin administration - when?
-Give before meal/snack to prevent elevated blood glucose
-Give after meal/snack if in orders or if blood glucose is low


## Exchange List for Diabetes

- Used by some for MNT since 1950
- Lists of measured foods that equal an "exchange"/serving/choice
- Divides foods into food groups
-CHO
- Starches, fruit, milk, other
-Non-starchy vegetables


## Exchange List for Diabetes

-Meat and meat substitutes
-Fats
-Free foods

## 1 Carbohydrate Serving = 15 grams Carbohydrate

-Combination foods

The Fruit Group

- Fresh fruit
- 1 cup - tennis ball size
-1/2 banana
- 1/8 cantaloupe
- 15 grapes
-1 cup watermelon


## The Fruit Group

- Canned fruit, light
-1/2 cup
- 100\% fruit juice
-4 ounces
- Dried fruit
-2 tablespoons


## The Starch Group

- Starches
-1 slice bread
- $1 / 3$ cup rice or pasta
- $1 / 2$ cup cereal
-1 small roll, biscuit
-1/2 bun


## The Starch Group

- Starchy vegetables
- $1 / 2$ cup corn, peas, potatoes, dried beans


## The Milk Group

- Milk
-8 ounces
- Yogurt
- 1 cup
- Pudding and ice cream
$-1 / 3-1 / 2$ cup


## Non-starchy Vegetables

- Do not count as a CHO exchange
- "Free" foods, "filler" foods
- < 20 calories; < 5 grams CHO
- Good sources of vitamins, minerals, and fiber
- Include carrots, green beans, leafy vegetables, cucumbers, tomatoes, squash, okra, celery, broccoli


## Exchange Lists

- Advantages
-Provides a framework for grouping foods
-Emphasizes important nutrition concepts
- Calories as well as sodium, fiber, types of fats
- Can be supplemented by reading food labels


## Exchange Lists

- Disadvantages
- Not appropriate if family cannot understand "exchanges"
- CHO may not be as accurate
-Often more rigid/complex meal plans
- Calories, pro, fat


## Carbohydrate Counting

- Around since 1920's
- Focus is on techniques to optimize blood glucose control
- Used to match pre-meal insulin doses to the demand created by food
- Note: other nutrition aspects must be addressed separately


## Carbohydrate Counting

- Easier to learn than exchanges
- Insulin dose calculated based on CHO intake
- Greater flexibility in meals
- More variety in food choices
- More accurate control of blood sugar
- Utilizes food labels to make meal planning easier


## Carbohydrate Counting

- Basic
-Eat balanced healthy meals
- Learn CHO content of foods
-Follow meal plan with set amount of CHO at each meal/snack and fixed insulin dose
-Eat meals and snacks at set times


## Carbohydrate Counting

- Advanced
- Adjust insulin to the CHO in foods to be eaten
- Use calculated I:CHO ratios
- $1: 18$ = 1 unit insulin for 18 grams CHO
-Flexible meal/snack times and amount of carbohydrate eaten


## Carbohydrate Counting

- Example
- Sandwich - 2 slices bread = $\mathbf{3 0}$ grams CHO
- Potato chips - 1 bag = 26 grams
- Milk-1 cup $\quad=12$ grams
- ½ banana

$$
=15 \text { grams }
$$

Total $\mathbf{= 8 3}$ grams CHO

## Carbohydrate Counting

- If Insulin: CHO ratio is 1:18
- Insulin dose needed $=83 / 18=$ 4.61 units
- Insulin by syringe - dose = 4.5 or 5.0
- Insulin by pump - pump will calculate to nearest decimal possible for that pump


## Carbohydrate Resources

- Exchange lists for diabetes
- Carbohydrate counting books
- Restaurant/fast food booklets
- Food labels


## Carbohydrate Resources

www.calorieking.com
www.diabetes.org
www.americanheart.org
www.eatright.org


## Nutrition Facts

Serving Size $1 / 2$ cup (114g)
Servings Per Container 4
Amount Per Serving
Calories 90 Calories from Fat 30

|  | \%Daily Value |
| :--- | ---: |
| Total Fat 3 g | $\mathbf{5} \%$ |
| Saturated Fat 0 g | $\mathbf{0} \%$ |
| Cholesterol 0 mg | $\mathbf{0} \%$ |
| Sodium 300mg | $\mathbf{1 3} \%$ |
| Total Carbohydrate 13 g | $\mathbf{4 \%} \%$ |
| Dietary Fiber 3g | $\mathbf{1 2 \%}$ |
| Sugars 3 g |  |
| Protein 3 g |  |



## Carbohydrate Considerations

- Sugar
-Sources
- Other carbohydrate
- Fiber
- If > $\mathbf{5}$ grams, subtract
- Sugar alcohols
- If >20 grams, subtract half


## 3 Things to Read on a Food Label

- Serving size
- Total carbohydrate
- Includes dietary fiber, sugar, other carbohydrate, and sugar alcohols
- Total fat
-< 5 grams is healthier


## Question

Which of the following will not raise blood glucose level?
a. Sugar
b. Other carbohydrate
c. Fiber
d. Sugar alcohols
e. Non-nutritive sweetners

| Snack Ideas |  |
| :--- | :--- |
| - Fruit | - Pretzels |
| - Pudding | - Chips - pita, bagel |
| - Popcorn | - Snack mix |
| - Muffin | - Crackers |
| - Yogurt | - Cheese |
| - Snack bars | - Peanut butter |
| - Low fat ice | sandwich |
| cream |  |

## Question

Which snack is better?
a. 1 cup of strawberries
b. 5 Vanilla Wafers

## Free Foods

- Gelatin - sugar free
- Popsicle - sugar free
- Sugar free drinks
- Fat free cream cheese
- Whip topping - 2 tablespoons
- Mini rice cakes - 2
- Animal crackers - 2


## Free Foods

- Popcorn - 1 cup
- Carrots
- Celery
- Broccoli
- Cucumber slices
- Salad dressing Tbsp (1 Tbsp.)
- Berries - $1 / 4$ cup


## Parties at School

- Can still participate and eat food at parties!
- Communicate with parents before party
- Change insulin dose to cover party food
-Plan party around snack time


## Parties at School

- Encourage teacher or parents to provide healthy snacks at parties
- Use fat-free whipped topping as icing on cakes or cookies


## How to Be Supportive

- Be knowledgeable
- Be empathetic
- Offer ideas/ways to make healthy choices
- Inform/educate teachers
- Provide resources
- Communicate with parents


