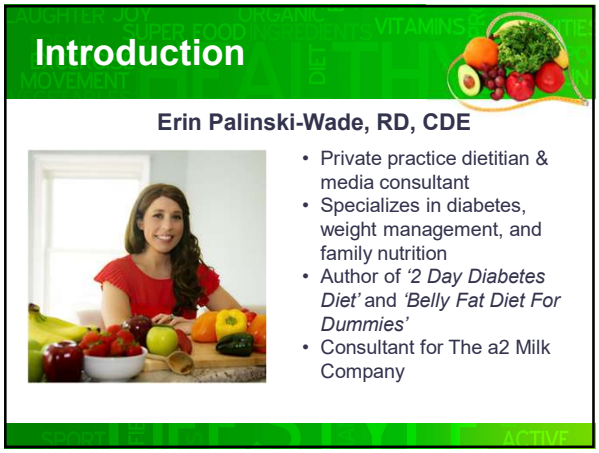
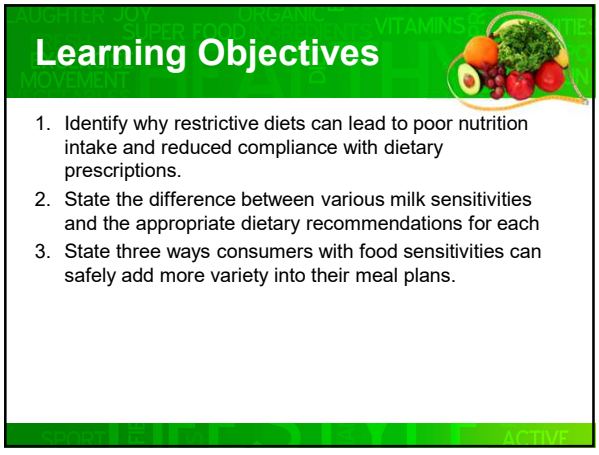

Complimentary Webinar Presentation
Rethinking Restrictive Diets
Helping Clients with Food Sensitivities Navigate a More Varied Diet for Improved Success
PRESENTED BY
Erin Palinski-Wade, RD, CDE, CPT
Wednesday, June 24
2 PM EDT
This activity is accredited through The a2 Milk Company.
Earn 1 CEU FREE
Investigate Communicate Collaborate

1


Introduction
Erin Palinski-Wade, RD, CDE
• Private practice dietitian & media consultant
• Specializes in diabetes, weight management, and family nutrition
• Author of '2 Day Diabetes Diet' and 'Belly Fat Diet For Dummies'
• Consultant for The a2 Milk Company

2


Learning Objectives
1. Identify why restrictive diets can lead to poor nutrition intake and reduced compliance with dietary prescriptions.
2. State the difference between various milk sensitivities and the appropriate dietary recommendations for each
3. State three ways consumers with food sensitivities can safely add more variety into their meal plans.

3

Health Risks of Restrictive Eating

Restrictive diets may lead to:

- Nutrient deficiencies
- Impact on growth and development (children)
- Food phobias & disordered eating
- Lack of compliance with meal plans over time

4

Nutrient Density & Restrictive Diets

- Pediatric nutrient deficiencies are associated with those who adhere to restricted diets
  - Milk allergies associated with higher risk of poor bone growth and shorter stature, vitamin D deficiency
  - Self diagnosis of food intolerances may unnecessarily restrict essential nutrients
- Popular 'diet plans' found to increase risk of deficiencies in six micronutrients

5

Impact on Long-Term Health

- Unbalanced restrictive diets may increase the risk of nutrient deficiencies when followed long term
- Restrictive diets may lead to increased risk of eating disorders
- Highly restrictive diets for medical conditions may have low adherence rates
  - Non-compliance with medically necessary diets may accelerate disease process

6

Profile of a Restrictive Eater

Avoidance of a specific food or nutrient caused by:

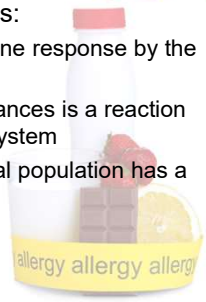
- Pain or discomfort
- Fear
- Medical restrictions
- Personal beliefs

7

Food Sensitivities and Dietary Limitations

Food allergies vs sensitivities:

- Food allergies are an immune response by the body
- Food sensitivities or intolerances is a reaction triggered by the digestive system
- It is estimated 2-20% of total population has a food intolerance

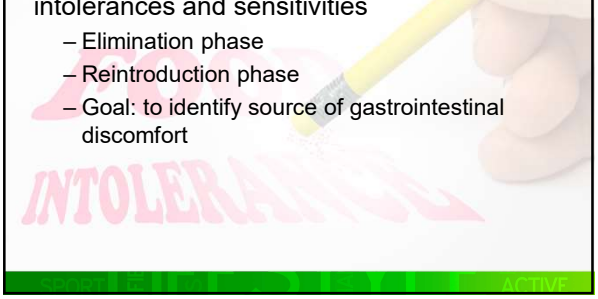


8

Elimination Diets for Food Intolerance

An elimination diet can help to identify food intolerances and sensitivities

- Elimination phase
- Reintroduction phase
- Goal: to identify source of gastrointestinal discomfort



9

Navigating Dairy Sensitivities

65% of human population has a reduced ability to digest lactose

- Many assumed to be lactose intolerant may not have been diagnosed with a lactose tolerance test
- Research suggests the milk protein beta-casein and not the milk sugar lactose may be causing much of the GI distress
  - Elimination of dairy will improve symptoms, but won't determine if lactose or beta-casein was the cause

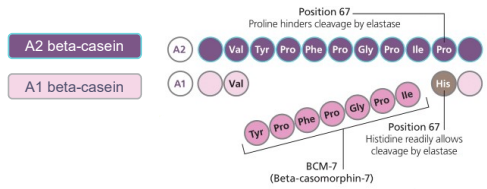
10

Understanding A1 and A2 Proteins

- One third of protein in regular cow's milk is beta-casein which includes both A1 and A2 beta-casein
- Research suggests A2 protein is easier on digestion and may help to avoid discomfort

11

A2 Protein Benefits



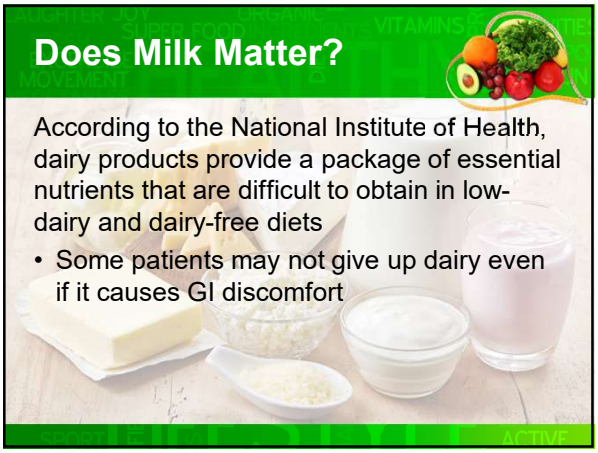
Digestion of A1 beta-casein in the small intestine releases BCM-7.
The structure of A2 beta-casein limits the release of BCM-7 on digestion

12

Does Milk Matter?

According to the National Institute of Health, dairy products provide a package of essential nutrients that are difficult to obtain in low-dairy and dairy-free diets

- Some patients may not give up dairy even if it causes GI discomfort



13

Does Milk Really Need to be Restricted?

- Is it the lactose or is it A1 protein?
- Things to consider:
  - Why does your patient avoid milk/ dairy?
  - Has there been an official diagnosis of a lactose intolerance or a milk allergy?

14

The A2 Tolerance Test

- For five days, have your client eliminate all forms of dairy except milk/dairy with only A2 protein
- Gradually increase intake over the course of 5 days and track tolerance
  - If no stomach discomfort noted, client have have a sensitivity to A1 protein instead of a lactose intolerance

15

Why Balance is Key

A balanced diet can improve diet quality by:

- Offering a variety of nutrients from various sources
- Improved dietary compliance and enjoyment of food

16

Case Study

- Patient: 47 year old woman with type 2 diabetes
- Symptoms: Constant gas & bloating after meals
- Patient concerns:
  - Notices symptoms resolve when eliminating gluten and dairy from diet
  - Feels bored and discouraged with current meal plan
  - Eats few foods out of fear of GI distress and/or blood glucose elevation
  - Cycles of restrictive eating followed by binges
  - No food sensitivity or food allergy testing conducted

17

Case Study

What would your first recommendation be for this patient?

18

Case Study

Treatment:

- Patient reintroduced gluten containing foods into diet and tracked symptoms
  - No change in GI symptoms with reintroduction of gluten
  - tTG-IgA Test conducted after two months of gluten introduction to r/o celiac disease (test results negative)

19

Case Study

Treatment:

- Patient reintroduced small amount of dairy (<1 cup per day)
  - Stomach discomfort immediately noticed with reintroduction of dairy
- Dairy removed from diet
  - Introduction of a2 Milk slowly over five day period
  - No GI distress noted with a2 Milk

20

Case Study

Outcome:

- Patient able to add both gluten-containing foods and dairy made with A2 proteins back into diet
- Increased variety of meal plan allowed patient to enjoy eating once again
- Reduced fear with eating new foods
- Improved compliance with diabetes treatment plan and reduced occurrence of restriction/binge eating patterns

21

Discussing Dietary Balance

Discussing balance with clients:

- Are there certain foods you avoid or restrict? Why is that?
- Do you feel your dietary restrictions impact your enjoyment of eating?
- What is your comfort level when it comes to trying new foods?

22

Adding Variety with Food Sensitivities

- Shift the conversation to 'foods you can enjoy' over 'foods you need to avoid'
- Identify nutrient deficits and suggest additional food sources
  - Examples:
    - Gluten sensitivity may limit food sources of whole grains and fiber
      - Increase high fiber gluten free carbohydrates such as beans and brown rice along with vegetables/fruits
    - Dairy sensitivity may limit intake of calcium
      - Dairy that contains only the A2 protein may be an alternative

23

Adding Variety with Food Sensitivities

- Start slowly and discuss comfort level and phobias with client
- Increase new foods slowly over time
  - Start by adding variety to just one meal or snack
  - Track tolerance
  - Meet clients where they are at and be sensitive to fears

24

Resources

www.a2milknutrition.com

25

Questions

26

Credit Claiming

You must complete a brief evaluation of the program in order to obtain your certificate. The evaluation will be available for 1 year; you do not have to complete it today.

CREDIT CLAIMING INSTRUCTIONS:

1. Go to www.CE.TodaysDietitian.com
2. Click on "My Courses" and then click on the webinar title.
3. Click "Take Course" on the webinar description page.
4. Select "Start/Resume" Course to complete and submit the evaluation.
5. Download and print your certificate.

27

Reference List

- Jaworski M, Panczyk M, Śliwczyński AM, et al. A ten-year longitudinal study of prevalence of eating disorders in the general Polish type 2 diabetes population. Med Sci Monit. 2018;24:9204-9212.
- Wróblewska B, Szyc AM, Markiewicz LH, Zakrzewska M, Ramoszko E. Increased prevalence of eating disorders as a biopsychosocial implication of food allergy. PLoS One. 2018;13(6):e0198607.
- Kirby M, Danner E. Nutritional deficiencies in children on restricted diets. Pediatr Clin North Am. 2009;56(5):1085-1103.
- Calton JB. Prevalence of micronutrient deficiency in popular diet plans. J Int Soc Sports Nutr. 2010;7:24.
- Robbins KA, Uygungil B. Nutritional deficiencies and food allergy. J Allergy Clin Immunol Pract. 2017;5(2):528-529.
- Jaworski M, Panczyk M, Cedro M, Kucharska A. Adherence to dietary recommendations in diabetes mellitus: disease acceptance as a potential mediator. Patient Prefer Adherence. 2018;12:163-174.
- Study finds that adherence to diet, not type of diet, more important factor for losing weight. ScienceDaily website. https://www.sciencedaily.com/releases/2005/01/050111122137.htm. Published January 14, 2005.
- Nelson M, Ogden J. An exploration of food intolerance in the primary care setting: the general practitioner's experience. Soc Sci Med. 2008;67(6):1038-1045.
- US Department of Health and Human Services; US Department of Agriculture. Dietary Guidelines for Americans 2015–2020: Eighth Edition. https://health.gov/dietaryguidelines/2015/guidelines/. Published January 7, 2016.
- He M, Sun J, Jiang ZQ, Yang YX. Effects of cow's milk beta-casein variants on symptoms of milk intolerance in Chinese adults: a multicentre, randomised controlled study. Nutr J. 2017;16(1):72.
- Jianqin S, Leiming X, Lu X, Yelland GW, Ni J, Clarke AJ. Effects of milk containing only A2 beta casein versus milk containing both A1 and A2 beta casein proteins on gastrointestinal physiology, symptoms of discomfort, and cognitive behavior of people with self-reported intolerance to traditional cows' milk. Nutr J. 2016;15:35.
- Asledottir T, Le T, Petrat-Melin B, Devold TG, Larsen LB, Vegarud GE. Identification of bioactive peptides and quantification of β-casomorphin-7 from bovine β-casein A1, A2 and I after ex vivo gastrointestinal digestion. Int Dairy J. 2017;71.

28