dietitian_{to} dietitian



Do macronutrients matter for weight management?



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SUMMARY

Q. When it comes to counseling on weight loss and maintenance, does the research favor one dietary pattern over another?

This is highly dependent on the individual patient – their education level, willingness to learn about nutrition nuance, their stage of life and their medical conditions. Focusing on particular nutrients or food groups is helpful to promote improved diet quality. This is where the idea of precision nutrition comes in; it is a way of scientifically and systematically evaluating factors that determine how an individual will respond to a certain diet and lower their risk of chronic metabolic disease. It has the potential to take the guess work out of identifying an optimal dietary pattern for an individual.

Q. When individualizing eating patterns based on a patient's personal circumstances, how do you find practical approaches that actually work?

Always start with where they are now and ask what has or hasn't worked in the past (and why). A married working mom in her late 40s, for example, might not want to focus on calories due to a past bad experience with calorie counting, but wants to eat a balanced diet and lose weight. If she likes to be flexible and plan meals around food groups, educating her on food group servings could be very helpful.

Q. Is there still a need to moderate good fats in the diet if a person wants to lose weight or does the current science show us we can be more liberal with good fat calories?

If the goal is weight loss, it is ok for most people to increase the percentage of energy from fat in the context of a calorie restricted diet. When calories from carbohydrates are restricted, protein is moderate and fat is high, there is a decrease in insulin secretion after a meal and an increase in fat burning. This leads to a loss of adipose tissue overtime not only because dietary fat is being oxidized, but also because fatty acids are mobilized from adipose tissue stores.

Q. In patients who may be accustomed to an eating style dictated by culture and where they live, what tactics are useful in helping patients adapt to and succeed on a weight loss plan?

The most important thing is to listen to the patient to understand what is most important to them about their culture and food. Ask them to compare the importance of their food culture and their specific health goals, and then educate them about how diet impacts health, using examples from their diet. Then, make a patient–led plan together about strategies they might like to try.

Q. How can we help patients with a low socioeconomic background succeed with their weight loss goals?

It's important to assess all barriers around food access and preparation via open ended questions. Ask patients what they know about their resources for increasing food access and identify appropriate strategies available in your community (such as food pantries or assistance programs). Teach your patients about eating healthily on a budget.

Q. How do you identify who is right for a low carb diet for weight loss? And how do you ensure they still get the nutrients they need from foods that may be cut

With medical supervision, these eating patterns can be good for people:

- With insulin resistance, PCOS or diabetes and are on high doses of insulin
- With limited mobility and a large amount of weight to lose
- Who prefer to follow an eating pattern with very specific rules
- · Who eat out a lot
- Who travel a lot

Taking a multivitamin can help to ensure the diet is nutritionally adequate. Fibre supplements may also be beneficial (if a person becomes constipated).