

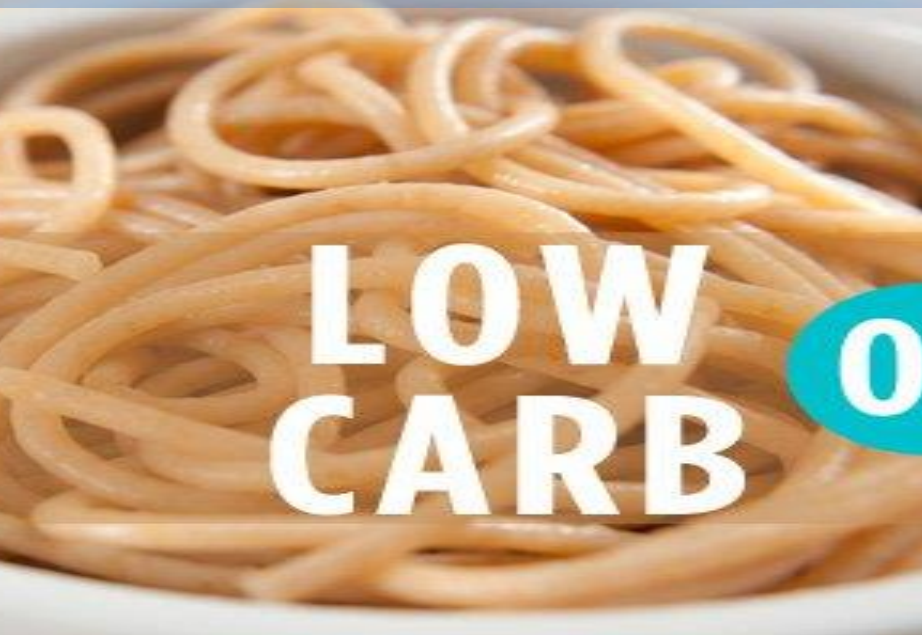
XXVIII
CONGRESO NACIONAL
DE LA SOCIEDAD ESPAÑOLA DE
DIABETES
5 AL 7 DE ABRIL 2017



BARCELONA
Palau de Congressos de Catalunya



¿DIETAS BAJAS EN GRASAS O BAJAS EN HIDRATOS?



**LOW
CARB**

OR



**LOW
FAT**

Juan Revenga
Dietista-nutricionista Nº Col. ARA00027
Profesor Universidad San Jorge, Fac. CC de la Salud

Declaración de potenciales conflictos de intereses

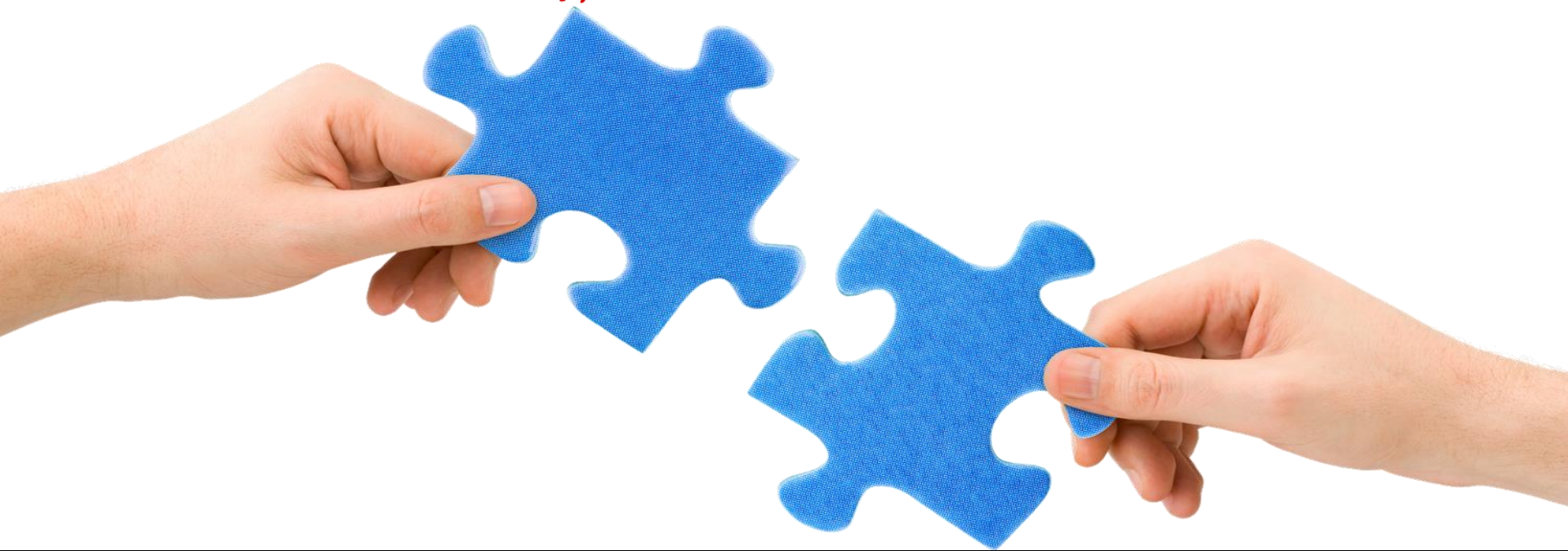
¿DIETAS BAJAS EN GRASAS O BAJAS EN HIDRATOS?

Juan Revenga declara no mantener relaciones que pudieran ser percibidas como potenciales conflictos de intereses con los contenidos de su presentación

**LOW
CARBS**



**LOW
FAT**





- Evidence is inconclusive for an **ideal amount of carbohydrate** intake for people with diabetes



Nutrition Therapy Recommendations for the Management of Adults With Diabetes Alison B. Evert et al
Diabetes Care Nov 2013, 36 (11) 3821-3842; DOI: 10.2337/dc13-2042 <https://doi.org/10.2337/dc13-2042>

- For people with diabetes and no evidence of diabetic kidney disease, evidence is inconclusive to recommend an **ideal amount of protein intake** for optimizing glycemic control or improving one or more CVD risk measures
- For people with diabetes and diabetic kidney disease (either micro- or macroalbuminuria), **reducing the amount of dietary protein below the usual intake is not recommended** because it does not alter glycemic measures, cardiovascular risk measures, or the course of glomerular filtration rate (GFR) decline

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Diabetes Care Nov 2013, 36 (11) 3821-3842; DOI: 10.2337/dc13-2042 <https://doi.org/10.2337/dc13-2042>

- Evidence is inconclusive for an **ideal amount of total fat** intake for people with diabetes



Nutrition Therapy Recommendations for the Management of Adults With Diabetes Alison B. Evert et al
Diabetes Care Nov 2013, 36 (11) 3821-3842; DOI: 10.2337/dc13-2042 <https://doi.org/10.2337/dc13-2042>

- **There is no standard meal plan or eating pattern** that works universally for all people with diabetes
- Nutrition therapy should be **individualized** for each patient
- Ideally, the individual with diabetes should be **referred to a registered dietitian (RD)** (or a similarly credentialed nutrition professional if outside of the U.S.) for nutrition therapy at—or soon after—diagnosis and for ongoing follow-up

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DiABETES UK

KNOW DIABETES. FIGHT DIABETES.

- Focus should be on total energy intake rather than the source of energy in the diet (macronutrient composition) for optimal glycaemic control. (A)



Evidence-based nutrition guidelines for the prevention and management of diabetes. Dyson PA et al
Diabet Med. 2011 Nov;28(11):1282-8. doi: 10.1111/j.1464-5491.2011.03371.x. [10.1111/j.1464-5491.2011.03371.x](https://doi.org/10.1111/j.1464-5491.2011.03371.x)



Tratamiento dietético de la diabetes mellitus tipo 2

Lourdes Carrillo Fernández

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Tabla 4: Recomendaciones nutricionales de la ADA y la EASD para los pacientes con diabetes

Parámetro	ADA	EASD
Peso	Normopeso o ↓ 5-10%	
Proteínas	15-20 % ACT	10-20% del ACT
Hidratos de carbono	HC + GM 60-70%	45-60% ACT
Grasa total	Individualizar < 30% del ACT si sobrepeso	25-35% del ACT < 30% del ACT si sobrepeso
Grasa saturada	< 7% del ACT	< 10% del ACT
Grasa poliinsaturada	10% del ACT	≤ 10% del ACT
Grasa monoinsaturada	HC + GM 60-70%	HC + GM 60-70% 10-20% del ACT
Colesterol	≤ 200 mg/diarios	≤ 300 mg/diarios
Sodio	< 3 g diarios	< 6 g diarios
Fibra	20-35 g diarios	40 g diarios

ACT: aporte calórico total; ADA: American Diabetes Association; EASD: European Association for the Study of Diabetes; GM: grasa monoinsaturada; HC: hidratos de carbono.

http://www.diabetespractica.com/docs/publicaciones/1382354270Tratamiento_dietetico_diabetes.pdf

19. Nutrición y diabetes

CARMEN GÓMEZ CANDELA, SAMARA PALMA MILLA



Hidratos de carbono y fibra

Los HC tienen una función esencialmente energética y constituyen la principal fuente de energía en la alimentación, siendo recomendable que aporten en torno al 50-60% del VCT.

https://www.kelloggs.es/content/dam/newton/media/manual_de_nutricion_new/Manual_Nutricion_Kelloggs_Capitulo_19.pdf

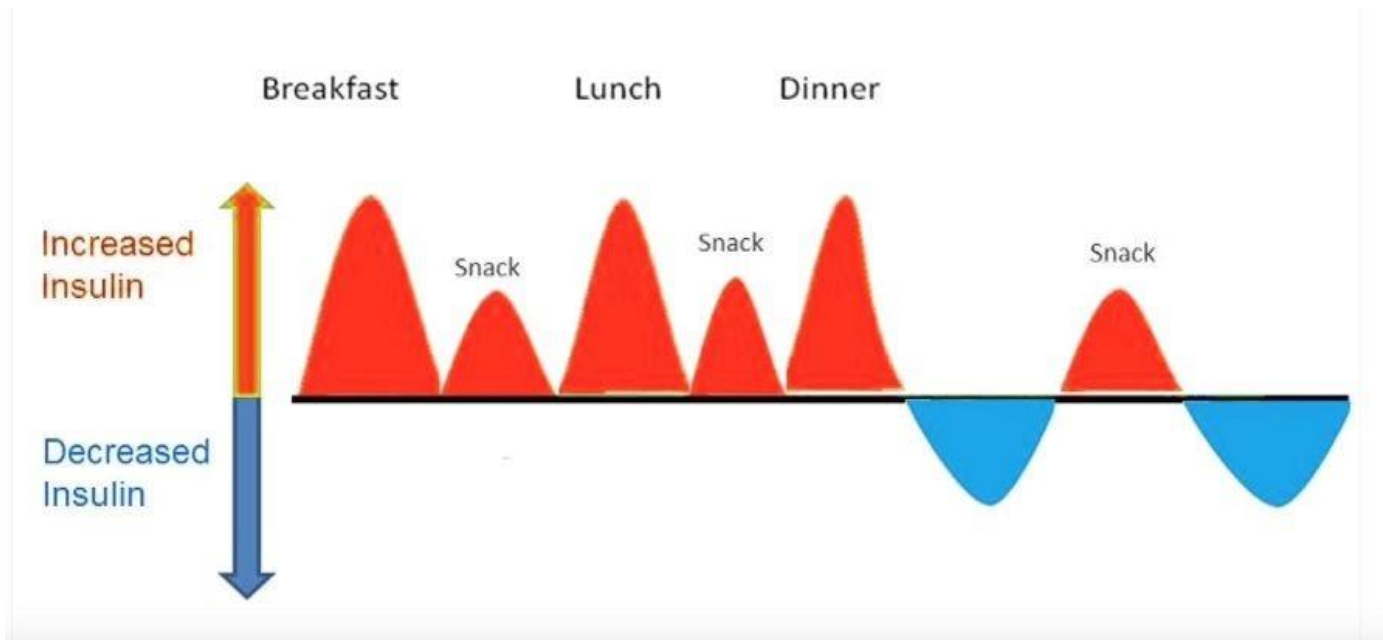
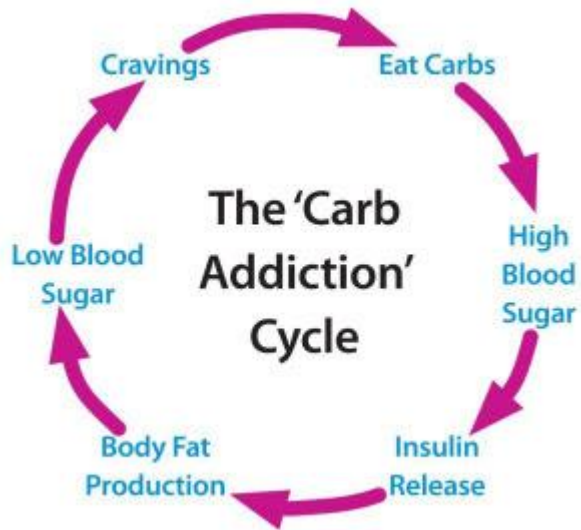
DANGER

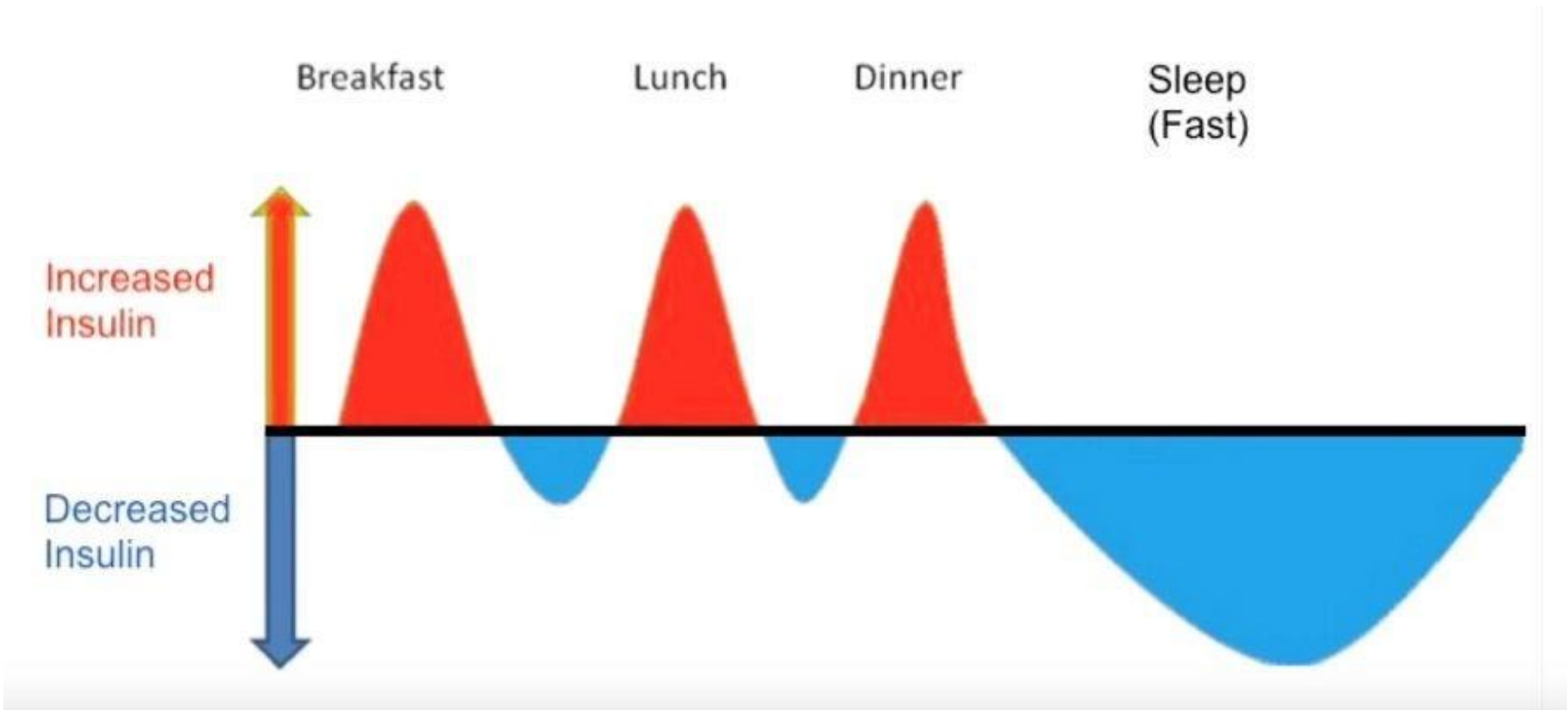


Una vez que la insulina pasó a formar parte del tratamiento de la DM, los pacientes diabéticos comenzaron a ingerir HC más libremente.



https://www.kelloggs.es/content/dam/newton/media/manual_de_nutricion_new/Manual_Nutricion_Kelloggs_Capitulo_19.pdf







Effects of Saturated Fat, Polyunsaturated Fat, Monounsaturated Fat, and Carbohydrate on Glucose-Insulin Homeostasis: A Systematic Review and Meta-analysis of Randomised Controlled Feeding Trials

- This investigation suggests that **consuming more unsaturated fats** in place of either carbohydrates or saturated fats will help improve blood glucose control. **Sole emphasis on lowering consumption of carbohydrates or saturated fats would not be optimal**

<http://dx.doi.org/10.1371/journal.pmed.1002087>



Effects of Saturated Fat, Polyunsaturated Fat, Monounsaturated Fat, and Carbohydrate on Glucose-Insulin Homeostasis: A Systematic Review and Meta-analysis of Randomised Controlled Feeding Trials

- Translated to foods, these findings support benefits of **increasing consumption of vegetable oils and spreads, nuts, fish, and vegetables rich in unsaturated fats (e.g., avocado), in place of either animal fats or refined grains, starches, and sugars**

<http://dx.doi.org/10.1371/journal.pmed.1002087>

ADVICE

THE LANCET

Diabetes & Endocrinology

Saturated fatty acids and type 2 diabetes: more evidence to re-invent dietary guidelines

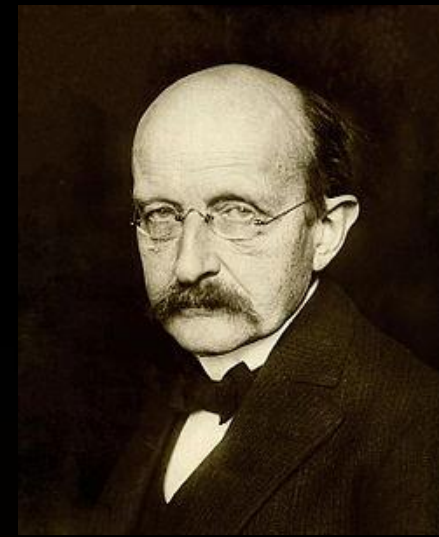
- We need to move away from **unhelpful classifications and policies** based on crude groupings of merely chemically related nutrients (eg, total saturated fat) and their predicted or postulated effects on risk—which, in addition to scientific dubiousness, **create confusion for consumers and opportunities for manipulation by industry**—and towards **food-based guidelines** that mainly consider prospective evidence for effects on clinical endpoints

Mozaffarian, Dariush

The Lancet Diabetes & Endocrinology , Volume 2 , Issue 10 , 770 – 772

[http://dx.doi.org/10.1016/S2213-8587\(14\)70166-4](http://dx.doi.org/10.1016/S2213-8587(14)70166-4)

A scientific truth does not triumph by convincing
its opponents and making them see the light,



but rather because its opponents eventually die and a
new generation grows up that is familiar with it.
- Max Planck



¡Muchas gracias
por su atención!
JRR

