

February 2023



# NEWSLETTER



Photo by Judy Doherty Photography

#### Share with Your Clients:

2. Chicken Fajitas by Judy Doherty, MPS, PC II
3. Strawberry Sparklers by Judy Doherty, MPS, PC II
4. Less Sleep Can Lead to Poor Health by Lisa Andrews, MEd, RD, LD
5. Food Label Insight: What Are Net Carbs? by Lynn Grieger, RDN, CDCES, CHWC, CPT
6. Net Carb Nuances: Fiber and Sugar Alcohols by Lynn Grieger, RDN, CDCES, CHWC, CPT
7. Sweep Your Stool Away? by Lisa Andrews, MEd, RD, LD
8. The Pros and Cons of Colonbroom by Lisa Andrews, MEd, RD, LD

#### Professional's Corner:

9. Intermittent Fasting: Is It Worth the Hype? by Lisa Andrews, MEd, RD, LD

#### Editor's Note:

Happy Heart Month! We hope you are enjoying the new website and member library.

Let us know if you need anything! Just click "Contact Us" under About at the top of [foodandhealth.com](http://foodandhealth.com)

# Chicken Fajitas, Family Style

## Ingredients:

- 1 teaspoon canola oil
- 1 cup onions (peeled and sliced)
- 1 cup bell pepper (sliced)
- 2 chicken breasts, boneless, skinless, sliced
- 1 teaspoon granulated garlic
- 1 teaspoon chili powder
- 1 teaspoon dried oregano leaves
- 2 tomatoes chopped
- 1/4 cup scallion, sliced
- 1 cup corn kernels
- 4 tablespoons fat-free sour cream
- 4 tablespoons prepared salsa
- 4 flour tortillas (whole wheat)



## Directions:

1. Heat a large non-stick skillet over medium-high heat. Sauté the onions and peppers in the oil until golden, about 3 minutes. Add the chicken and the seasonings; continue cooking until the chicken is done, about 8 minutes, stirring occasionally.
2. Serve the skillet with the chicken fajita with bowls of garnishes: chopped tomatoes, salsa, chopped scallions, sour cream, and corn.
3. Warm the tortillas.
4. Allow everyone to make their own fajitas, family style.

## Nutrition Facts:

Serves 4. Each 1/2 cup serving: Calories: 250 | Carbohydrates: 33g | Protein: 18g | Fat: 5g | Saturated Fat: 1.4g | Cholesterol: 37g | Sodium: 400mg | Fiber: 5g | Sugar: 8g

## Chef's Tip:

Garnish with sliced jalapeño, lime, and cilantro for a nice touch

# Strawberry Sparklers



Serve these fun strawberries for a snack or dessert.

## Ingredients:

- 1 pound fresh large strawberries
- 1 cup Greek yogurt, plain
- 1 tsp orange zest (grated peel)
- 2 tablespoons pistachios, chopped
- 2 tablespoons dried cranberries, chopped
- 2 tablespoons chocolate chips, chopped
- 2 tablespoons chopped dried ginger

## Directions:

1. Wash strawberries under cold running water to remove any excess dirt.
2. Pat the berries dry with paper towels.
3. Place yogurt in a glass bowl with the orange zest and stir until smooth.
4. Place chopped items in small bowls.
5. Dip strawberries in yogurt, then in one of the chopped mixtures. Place them on a small plate, then refrigerate until ready to serve.
6. Serve chilled.

You can use any chopped fruit or nuts for the "dippers" - it can also be fun to allow everyone to dip their own.

Serves 4. Each 5 ounce serving: Calories: 104 | Carbohydrates: 16g | Protein: 5g | Fat: 3g | Saturated Fat: 1g | Cholesterol: 1mg | Sodium: 13mg | Fiber: 2g | Sugar: 11g

# Less Sleep Can Lead to Poor Health

No doubt about it, sleep is good food. Did you know that poor sleep could be associated with an increased risk of at minimum two chronic illnesses? According to new research, you'd better get those ZZZs.

Using the Whitehall II Cohort study, a study published in PLOS Medicine evaluated the effects of sleep duration on health in over 7,000 women and men at the ages of 50, 60, and 70.

The connection between the time that each subject slept and mortality (as well as whether they'd been diagnosed with two or more chronic illnesses such as cancer, diabetes, or heart disease) was examined over the course of 25 years.

Individuals that reported five or fewer hours of sleep at the age of 50 were 20% more likely to have been diagnosed with a chronic illness and 40% more likely to be diagnosed with two or more chronic illnesses in 25 years, compared to individuals who got up to seven hours of sleep.

In addition, in those who slept five or less hours when aged 50, 60, or 70, a 30 to 40% increased risk of multi-morbidity was observed in comparison to those who got up to seven hours of sleep per night.

A sleep duration of five hours or less at age 50 was linked with a 25% higher risk of mortality over the 25 years of follow-up. It appears that a short sleep duration raises the risk of chronic illness(es), which in turn results in an increased risk of death.

Dr Severine Sabia, the lead author of the study, said: "Multimorbidity is on the rise in high-income countries and more than half of older adults now have at least two chronic diseases. This is proving to be a major challenge for public health, as multimorbidity is associated with high healthcare service use, hospitalizations and disability."

His research indicates that short sleep duration is linked with multimorbidity. The team emphasizes the importance of good sleep hygiene including a quiet, dark bedroom and a comfortable temperature for sleep. They also suggest avoiding big meals before bed and getting rid of electronic devices in the bedroom. Regular physical activity and light exposure during the day also support good sleep.

**"Getting enough sleep allows your body to rest. There are a host of other ways that poor sleep could increase the risk of heart disease or stroke, including by increasing inflammation and increasing blood pressure. This research adds to a growing body of research that highlights the importance of getting a good night's sleep."**

**—Jo Whitmore, RN,  
Senior Cardiac Nurse  
at the British Heart  
Foundation**



# Food Label Insight: What Are Net Carbs?

If you routinely read food labels, then you've probably come across the term "net carbs." The Food and Drug Administration (FDA), the agency responsible for what items are included on food labels, only recognizes total carbohydrate, dietary fiber, and sugars.



Nutrition Facts	
8 servings per container	
Serving size 2/3 cup (55g)	
Amount per serving	
<b>Calories</b>	<b>230</b>
% Daily Value*	
Total Fat 8g	10%
Saturated Fat 1g	5%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 100mg	7%
Total Carbohydrate 37g	13%
Dietary Fiber 4g	14%
Total Sugars 12g	
Includes 10g Added Sugars	20%
Protein 3g	

## What Are Net Carbs?

**The simple definition of net carbs is total carbohydrate.** In this usage, fiber and sugar alcohols are also net carbs. This is based on the principle that not all forms of carbohydrate affect the body in the same way.

“**Carbohydrate**” is the umbrella term for starch and sugar. It can be further divided into simple and complex carbs based on the chemical structure of the carbohydrate in the food. Foods that contain more simple carbohydrates — think white bread and white rice as well as foods that are high in sugar — are digested quickly and cause a rapid increase in blood sugar after eating. Highly refined snack foods like potato chips and pretzels also fall into this “simple carbohydrate” category.

Foods higher in **complex carbohydrate such as whole grains, fruit, vegetables and legumes are all digested more slowly**, which in turn leads to a smaller impact on blood sugar levels. Fiber in foods is only partially digested, so fiber also causes a smaller impact on blood sugar. Sugar alcohols, a.k.a. polyols are also incompletely digested and have a much lower blood sugar impact than simple sugars. Some foods (cherries, peaches, plums, mushrooms, avocado for example) naturally contain polyols, and polyols are also added to foods to replace sugar to provide the sweet taste we love with fewer calories.

However, there are nuances to fiber and sugar alcohols that make a simple net carb calculation inaccurate. Even though they are incompletely digested, sugar alcohols and fiber contain carbohydrate, which means they have some impact on blood sugar. Also, incomplete digestion can lead to side effects such as gas, bloating, and diarrhea. While eating more fiber is a healthy strategy, sometimes food manufacturers add inexpensive types of fiber to make their products look healthier. **The recommendation to consume 25-35 grams of fiber per day is based on fiber that naturally occurs in foods like vegetables, whole grains, legumes, and fruits – not on isolated forms of fiber added to highly processed foods.**

*By Lynn Grieger, RDN, CDCES, CPT, CHWC*

# Net Carb Nuances: Fiber and Sugar Alcohols

There are nuances to fiber and sugar alcohols that make a simple net carb calculation inaccurate.



The FDA definition for dietary fiber on a food label includes both naturally occurring fibers in foods as well as added isolated or synthetic non-digestible soluble and insoluble carbohydrates that have beneficial effects on our health. These effects include lowering blood sugar and cholesterol levels, reduced calorie intake, and increasing the frequency of bowel movements. Fiber is only naturally present in plants: vegetables, grains, fruit, and legumes. Food processing often removes fiber – think about the difference between white bread (fiber removed) and whole wheat bread (fiber from wheat included).

The FDA has identified the following isolated or synthetic non-digestible carbohydrates that meet the dietary fiber definition: beta-glucan soluble fiber, psyllium husk, cellulose, guar gum, pectin, locust bean gum, and hydroxypropylmethylcellulose.

You'll also find a wide range of additional types of fiber listed in the ingredients as food manufacturers look for ways to boost the fiber content of foods. It's not determined if these additional types of fiber provide the same health benefits as the fiber that is naturally present in foods, which include mixed plant cell wall fibers (a broad category that includes fibers like sugar cane fiber and apple fiber, among many others), arabinoxylan, alginate, inulin and inulin-type fructans, high-amylose starch (resistant starch 2), galactooligosaccharide, polydextrose, resistant maltodextrin/dextrin, cross-linked phosphorylated RS4, glucomannan, and acacia (gum arabic).

## **Polyol Facts:**

There are different types of polyols, including erythritol, hydrogenated starch hydrolysates (sometimes listed as maltitol syrup, hydrogenated glucose syrup, polyglycitol syrup, polyglucitol or simply "HSH"), isomalt, lactitol, maltitol, mannitol, sorbitol and xylitol.

Per FDA regulations, the name of the specific polyol may appear on the Nutrition Facts label if only one polyol is in the food. If more than one polyol is in the food, you'll see the term "sugar alcohols."

The individual polyols used in a food must be included in the ingredients list on a food label.

# Sweep Your Gut Away?

Are you looking to improve gut health with more regular bowel movements and “better” microbiota? Have you considered sweeping away your poop -- and maybe excess weight -- with ColonBroom(TM)? It is very popular on TikTok right now! So we did a little research...

## **What is ColonBroom?**

ColonBroom is a supplemental powder developed in Lithuania by Max Nutrition UAB. The manufacturers claim it improves bowel regularity and gut flora, along iwth aiding weight loss. It’s even touted to reduce bloating.

Before you order ColonBroom, the website will take you to a quiz page. The quiz asks about your gender, height, weight, poop history, and several other medical questions. It then will provide you with a metabolic age as well as a risk score for conditions such as candida.

According to my own quiz, I have a 45% chance of getting candida Albicans overgrowth and my metabolic age is 7 years older than my true age. That’s despite a normal BMI, normal bowel history, and regular exercise. This same quiz will also “prescribe” the amount of ColonBroom you should take each day.

## **Does ColonBroom Work?**

To date, there aren’t any scientific studies on ColonBroom specifically. However, I did find plenty of consumer reviews and complaints. Most positive reviews come from “Thinfluencers” that are hired or or otherwise compensated to be ambassadors for the company. For example, many ambassadors will be given a discount code for the product and receive a percentage of sales if someone orders it.

Ironically, the biggest customer complaint is bloating -- a symptom ColonBroom is supposed to relieve.

**ColonBroom's main ingredient, psyllium husk, is also found in Metamucil. There is plenty of research out there about psyllium husk and bowel regularity as well as gut microbiota. For example, a study that compared fecal microbiota after treatment with psyllium husk or a placebo (in women of reproductive age) found that psyllium husk successfully relieves constipation by altering gut microbiota.**

*By Lisa Andrews, MEd, RD, LD*

# The Pros and Cons of ColonBroom

The main con of ColonBroom is its ridiculous price. A one-month supply costs \$65.00. You can purchase Metamucil or even generic psyllium husk for less than \$15.00 in most major grocery and drug stores.

The other con of ColonBroom is the potential risk of overuse. In our weight-obsessed culture, “if one is good, two is better” is the prevailing mindset. There may be a risk for individuals to overuse ColonBroom which could lead to diarrhea and electrolyte abnormalities.

My best advice for preventing constipation and improving gut health is to eat foods naturally high in fiber. It is important to drink ample amounts of water. **The Dietary Guidelines for Americans advise 25 grams of daily dietary fiber for women and 38 grams of dietary fiber per day for men.**

**Some top foods that supply plenty of fiber are beans and lentils, bulgur, farro, quinoa, raspberries, rolled oats, and whole wheat bread or pasta. Green leafy vegetables, broccoli, Brussels sprouts, cabbage, apples, citrus fruit, peaches, pears, and melon also provide some dietary fiber as do dried fruits, nuts, and seeds.**

**In addition to consuming a variety of high-fiber foods, limiting foods that are high in added sugar can protect your gut microbiome as well as your waistline.**

Fermented foods have also been found to improve the diversity of your gut microbiome. These include cottage cheese, kefir, kimchi, kombucha, pickles, miso, natto, sauerkraut, tempeh, and yogurt.

If you’re considering ColonBroom, save your money. Following a high-fiber diet with plenty of plant-based foods, adequate water, and less sugary, ultra-processed foods will protect your health and wealth in the long run.

*By Lisa Andrews, MEd, RD, LD*

While ColonBroom may have some health benefits, its main ingredient is comparable to Metamucil and Benefiber — two over-the-counter fiber supplements that are relatively inexpensive.

The supplement is deemed safe when used according to the package label, but there’s nothing magical about it.



# Intermittent Fasting: Is It Worth the Hype?

Intermittent, 24-hour, alternate day, or 5:2? The names may vary, but each of those is a form of fasting that has been touted as the ticket for everything from anti-aging to weight loss. But what is fasting exactly? Is there any science to support its use?

Fasting has been around for years in various forms. It can be motivated by religion, health concerns, or even schedule issues. Fasting is simply not eating for a period of time. In its most basic form, the word “breakfast” means “breaking the fast” - eating after a period of being without food overnight.

Fasting is not a diet but instead is a pattern of eating and not eating.

## Intermittent Fasting

One popular form of intermittent fasting (IF) is time-restricted feeding. This involves having a window of time when you can eat and a window of time when you can't eat. An example is the 16:8 fast. In a 16:8 fast, an individual can eat within an 8-hour window (i.e. 11 AM to 7 PM) and then fast for 16 hours (7 PM to 11 AM). Water and other calorie-free liquids are allowed in the fasting time frame.

This type of fasting has the most research behind it.

## Intermittent Fasting and Weight Loss

Weight loss remains one of the top New Year's resolutions. Can IF help? A recent meta-analysis of studies evaluated the health outcomes of IF and discovered that various types of IF resulted in reduced body weight, BMI, fat mass, LDL cholesterol, total cholesterol, fasting blood sugar, and insulin.

Compared to a regular diet, alternate day fasting (every other day) for 1 to 2 months resulted in a drop in BMI in healthy adults and those who were overweight or obese. However, intermittent fasting isn't necessarily a better way to lose weight than old-fashioned calorie cutting.

A 2018 systematic review of several studies evaluating weight loss in overweight and obese patients found a weight loss of 0.8% to 13% of baseline weight without major adverse outcomes. Twelve studies comparing intermittent fasting to traditional calorie restriction found similar results. In 5 of the studies, blood sugar control was improved in subjects with type 2 diabetes.

### **Intermittent Fasting and Diabetes**

As mentioned above, time-restricted feeding may be advantageous to individuals with diabetes. A systematic review and meta-analysis of randomized controlled trials comparing the safety of IF with continuous calorie restriction on blood sugar control and weight was conducted. Both diets had similar effects on hemoglobin A1c and fasting blood sugar as well as improvements in lipid profiles but IF was shown to have a better effect on weight loss.

A similar study also found that weight loss was superior with IF than with traditional calorie-controlled diets in individuals with type 2 diabetes. A meta-analysis of seven studies found that obese subjects lost more weight using IF than calorie-controlled diets. Blood sugar control was equivalent in both groups.

### **Intermittent Fasting and Age-Related Dementia**

An area of study of particular interest to me is IF and age-related dementia. My mother suffers from dementia and prevention is key. While my mother's condition is not reversible, I've been paying greater attention to my own eating patterns and risk factors. This includes eating at regular meal times, limiting added sugars, and not eating snacks after dinner.

Since cardiovascular disease and dementia are associated with each other, reducing risk factors for cardiovascular disease could impact dementia risk. Fasting may be of benefit here.

A 4-week, randomized control trial of alternate-day fasting found improvements in cardiovascular markers including reduced abdominal fat, lower LDL cholesterol, and

reduced methionine- a pro-aging amino acid. A lower level of sICAM-1 (an age-associated inflammatory marker) was also noted. Alternate-day fasting appears safe in healthy individuals.

IF may aid in the prevention of vascular dementia as it helps reduce neuroinflammation, improves dyslipidemia in patients with Alzheimer's disease, and protects against brain damage by controlling beta-hydroxybutyrate activity. It may also increase the creation of neurotrophic factors which may improve mitochondrial function. Research also shows that fasting may improve synaptic activity in the hippocampus- the part of the brain involved in memory formation.

### **Fasting is Not for Everyone**

While fasting does show promise in improving metabolic health, it is not advised for anyone with an eating disorder, a history of an eating disorder, or those at risk for eating disorders. In addition, fasting is not advised for pregnant or lactating women. The safety of fasting should be discussed with a physician, dietitian, or another healthcare provider.

Individuals with diabetes that take insulin should not go long periods of time without food due to the risk of hypoglycemia.

Fasting may help overweight or obese individuals. Blood sugar appears to be better controlled during fasting, as do other cardiovascular risk factors including cholesterol, blood pressure, and waist circumference.

### **What Can I Eat During an Intermittent Fast?**

One advantage of IF is that calories don't need to be counted, but choosing nutritious food is obviously still important. You can't gorge on cupcakes for 8 hours and expect weight loss or improvements in blood sugar!

Below are a few ideas to get started if you would like to try intermittent fasting:

- Keep your dinner time to a reasonable hour. A recent study found that late-night dinners (10 PM) are associated with metabolic syndrome and weight gain.

- Eat breakfast if you are hungry first thing in the morning. An intermittent fast can be flexible. Most studies advise at least a 12-hour fast, which includes the 7 or 8 hours you are sleeping.
- Be mindful of snacking and overeating. Are you truly hungry or is your snack a habit?
- Choose nutritious food! Include lean protein (chicken, eggs, fish) or plant-based protein (beans, lentils, tofu) at meals.
- Add lots of vegetables and fruit to meals for adequate fiber, phytochemicals, vitamins, and minerals.
- Use whole grains (rolled oats, 100% whole grain bread or cereals, brown rice, farro, quinoa) in place of refined grains.
- Limit alcohol and added sugar intake. Both contribute to weight gain and increased risk for chronic disease.

*By Lisa Andrews, MEd, RD, LD*

### **References:**

1. Fasting | definition of fasting by Medical dictionary (thefreedictionary.com)
2. Patikorn C, Roubal K, Veettil SK, Chandran V, Pham T, Lee YY, Giovannucci EL, Varady KA, Chaiyakunapruk N. Intermittent Fasting and Obesity-Related Health Outcomes: An Umbrella Review of Meta-analyses of Randomized Clinical Trials. *JAMA Netw Open*. 2021 Dec 1;4(12):e2139558. doi: 10.1001/jamanetworkopen.2021.39558. PMID: 34919135; PMCID: PMC8683964.
3. Harris L, Hamilton S, Azevedo LB, Olajide J, De Brún C, Waller G, Whittaker V, Sharp T, Lean M, Hankey C, Ells L. Intermittent fasting interventions for treatment of overweight and obesity in adults: a systematic review and meta-analysis. *JBI Database System Rev Implement Rep*. 2018 Feb;16(2):507-547. doi: 10.11124/JBISRIR-2016-003248. PMID: 29419624.
4. Wang X, Li Q, Liu Y, Jiang H, Chen W. Intermittent fasting versus continuous energy-restricted diet for patients with type 2 diabetes mellitus and metabolic syndrome for glycemic control: A systematic review and meta-analysis of randomized controlled trials. *Diabetes Res Clin Pract*. 2021 Sep;179:109003. doi: 10.1016/j.diabres.2021.109003. Epub 2021 Aug 12. PMID: 34391831.

## References, Continued:

5. Borgundvaag E, Mak J, Kramer CK. Metabolic Impact of Intermittent Fasting in Patients With Type 2 Diabetes Mellitus: A Systematic Review and Meta-analysis of Interventional Studies. *J Clin Endocrinol Metab.* 2021 Mar 8;106(3):902-911. doi: 10.1210/clinem/dgaa926. PMID: 33319233.
6. Stekovic S, Hofer SJ, Tripolt N, Aon MA, Royer P, Pein L, Stadler JT, Pendl T, Prietl B, Url J, Schroeder S, Tadic J, Eisenberg T, Magnes C, Stumpe M, Zuegner E, Bordag N, Riedl R, Schmidt A, Kolesnik E, Verheyen N, Springer A, Madl T, Sinner F, de Cabo R, Kroemer G, Obermayer-Pietsch B, Dengjel J, Sourij H, Pieber TR, Madeo F. Alternate Day Fasting Improves Physiological and Molecular Markers of Aging in Healthy, Non-obese Humans. *Cell Metab.* 2019 Sep 3;30(3):462-476.e6. doi: 10.1016/j.cmet.2019.07.016. Epub 2019 Aug 27. Erratum in: *Cell Metab.* 2020 Apr 7;31(4):878-881. PMID: 31471173.
7. Yoon G, Song J. Intermittent Fasting: a Promising Approach for Preventing Vascular Dementia. *J Lipid Atheroscler.* 2019 May;8(1):1-7. <https://doi.org/10.12997/jla.2019.8.1.1>
8. Gu C, Brereton N, Schweitzer A, Cotter M, Duan D, Børshiem E, Wolfe RR, Pham LV, Polotsky VY, Jun JC. Metabolic Effects of Late Dinner in Healthy Volunteers-A Randomized Crossover Clinical Trial. *J Clin Endocrinol Metab.* 2020 Aug 1;105(8):2789–802. doi: 10.1210/clinem/dgaa354. PMID: 32525525; PMCID: PMC7337187.





## **foodandhealth.com**communications®

### *Food and Health Communications Premium Newsletter*

© Food and Health Communications, Inc.

ISSN 1070-1613

10582 King Street, Westminster, CO 80031

Phone: 800-462-2352 Fax: 800-433-7435

<https://foodandhealth.com>

#### **Executive Editor**

Judy Doherty, PC II

#### **Copy Editor**

Stephanie Ronco

#### **Contributing Writers**

James J. Kenney, PhD, FACN

Jill Weisenberger, MS, RDN, CDE, FAND, CHWC

Lisa Andrews, MS, RD

Hollis Bass, MEd, RD

Lynn Grieger RDN, CDE, CPT, CWC

Beth Rosen, MS

Cheryle Syracuse, MS

#### **Editorial Advisory Board**

Alice Henneman, MS, RD

Barbara Hart, MS, RD, LDN

Cheryle Syracuse, MS

James J. Kenney, PhD, FACN

Jill Eisenberg, RDH, MS, RD, CDN

Karla Logston, RN, BS, CDE, CHC

Linda Rankin, PhD, RD, LD, FADA

Stephanie Correnti, BS, RD

#### **Subscribe to Food and Health Communications Premium Membership and Newsletter**

1 year, 12 issues of *Food and Health Communications Premium eNewsletter* + online member library for thousands of articles, recipes, handouts, white label newsletters + license to reproduce for one site

1 year: \$139

Name: \_\_\_\_\_

Title/Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Mail check to Food and Health Communications, Inc.

10582 King Street, Westminster, CO 80031

Phone: 800-462-2352; Fax: 800-433-7435; [orders@foodandhealth.com](mailto:orders@foodandhealth.com)