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| **EFAD ESDN Diabetes**  **Statement Paper on:**    **The Role of the Dietitian**  **in the Prevention and Management of Gestational and Type 2 Diabetes** |
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Dietitians, as members of integrated multidisciplinary teams, have a central role to play in supporting both the prevention and management of diabetes1, 2 . Dietary and lifestyle modification are considered the cornerstones of effective diabetes prevention and self-management. Dietitians are uniquely qualified to translate the science of nutrition and apply it to nutrition counseling, promoting healthy nutrition in diabetes, and to public health initiatives, reducing the burden of preventable disease through good nutrition.

The dietitians’ roles

Dietitians play varied roles within diabetes teams. Dietitians are highly skilled educators and lifestyle coaches; supporting and empowering individuals with diabetes to make healthy food choices, lead an active lifestyle and meet their personal and medical, short and long term goals2 . Dietitians work as trained diabetes educators within diabetes self-management-education programs. They provide individualized therapy and counseling related to nutrition in both one-to-one and group-based settings with patients, taking into account personal and cultural beliefs, preferences, lifestyle and the willingness and ability of the person to change2 . Dietitians working in diabetes also play key roles advising on overweight and obesity management, encouraging increased activity, interpreting glucose self-monitoring records and advising on how best to integrate medications management with the patients’ diet and lifestyle3 . Maintaining or improving quality of life is a core patient-centered outcome in all dietetic interventions.

The dietitian and gestational diabetes

The role of the dietitian in the management of gestational diabetes is particularly important4 given that the prescription of dietary treatment can help to normalize blood glucose levels, prevent and minimize complications in pregnancy and during delivery, and support the normal development of the fetus.

The dietitian and type 2 diabetes

Diabetes interventions involving dietitians have proven efficacy for improving a range of outcomes in type 2 diabetes. Group education and care, delivered by trained dietitians, is associated with significantly lower HbA1c, decreased insulin resistance and a better quality of life than those delivered by a medically and pedagogically qualified team 5 . In sub-optimally controlled type 2 diabetes despite optimised drug treatment, a dietitian-led intervention was shown to significantly improve glycaemic control, weight and waist circumference and led to a significant decrease in saturated fat intake6 . There is also evidence that dietary interventions involving dietitians are effective in reducing progression to type 2 diabetes in pre-diabetes (58% reduced risk of developing type 2 diabetes with an intensive lifestyle intervention). Within these interventions, dietitians work as lifestyle coaches as well as case managers and active researchers2. Most importantly, dietetic interventions to prevent diabetes are proven to be cost effective7 .

References

* 1.Tuomilehto J, Schwarz P, Lindström J. **Long-Term Benefits From Lifestyle Interventions for Type 2 Diabetes Prevention. Diabetes Care**. May 1, 2011 2011;34(Supplement
* 2. S210-S214. 2.Delahanty LM. **Research charting a course for evidence-based clinical dietetic practice in diabetes**. Journal of Human Nutrition and Dietetics. 2010;23(4):360-370.
* 3.Pastors JG, Warshaw H, Daly A, Franz M, Kulkarni K. **The Evidence for the Effectiveness of Medical Nutrition Therapy in Diabetes Management. Diabetes Care**. March 2002 2002;25(3):608-613.
* 4.Reader D, Splett P, Gunderson EP. Impact of Gestational Diabetes Mellitus Nutrition Practice Guidelines Implemented by Registered Dietitians on Pregnancy Outcomes. Journal of the American Dietetic Association. 2006;106(9):1426-1433.
* 5.Trento M, Basile M, Borgo E, et al. A randomised controlled clinical trial of nurse-, dietitian- and pedagogist-led Group Care for the management of Type 2 diabetes. J Endocrinol Invest. Nov 2008;31(11):1038-1042.
* 6.Coppell KJ, Kataoka M, Williams SM, Chisholm AW, Vorgers SM, Mann JI. Nutritional intervention in patients with type 2 diabetes who are hyperglycaemic despite optimised drug treatment - Lifestyle Over and Above Drugs in Diabetes (LOADD) study: randomised controlled trial. BMJ. 2010;341.