

## Practical tips for nutritional counseling

In January 2011 the General Practice Services Committee (GPSC) Personal Health Risk Assessment Fee (G14066) came into effect, supporting physicians in providing prevention services to patients.<sup>1</sup> One of the patient populations targeted by this initiative is those with unhealthy eating behaviors, such as the consumption of excess calories, fat, or cholesterol, or low fibre intake. Family physicians can now initiate a personal health risk assessment visit with this patient population, or book an assessment in response to a patient's request for preventive care.

Physicians can have a significant impact when engaging in health promotion, and should encourage patients to focus on health goals. When addressing weight concerns with patients, physicians should avoid using stigmatizing terms. Research suggests that patients prefer terms such as "weight" or "excess weight" as opposed to "fat" and "obese."<sup>2</sup>

Outlined below are current trends and concepts physicians can discuss with patients to help them adopt healthier eating habits.

### Mindful vs mindless eating

Vancouver Coastal Health recently produced a two-page summary for healthy eating entitled "Fueling Your Mind and Body," which emphasizes that how we eat is just as important as what we eat.<sup>3</sup> Being mindful of the environmental factors of eating (rather than eating mindlessly) means that patients are more aware of both what food they are consuming and how they are consuming it. Having patients ask themselves "who, what,

when, where, why, and how" with regard to food consumption can help significantly in modifying their eating behavior and provides a useful framework for a physician-led discussion:

**Who:** Do you sit and eat with others when possible?

**What:** Do you select healthy foods in the amounts that meet your needs?

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**When:** Do you trust your body to let you know when you need food?

**Where:** Do you turn off the computer, cellphone, and TV when you eat?

**Why:** When you eat, do you eat for hunger?

**How:** When you eat, do you eat directly out of a bulk-sized box or bag or do you take a single portion and eat it from a plate or bowl?

### Why we eat

Cornell University researcher Dr Brian Wansink has written a book on changing eating behaviors entitled *Mindless Eating: Why We Eat More Than We Think*. His emphasis is on making changes to environment and routine to help people get in the habit of eating the right amount of the foods they enjoy.<sup>4</sup>

### The Healthy Eating Plate concept

The Healthy Eating Plate is a new guideline showing which foods, and

how much of them, should appear on our plates.<sup>5</sup> Created by the Harvard School of Public Health, the visual aid features a plate divided into sections for vegetables, fruits, healthy protein, and whole grains, and shows the relative portions of each. Healthy oils and water are also highlighted as important components of a healthy diet.

### The Small Plate Movement

Dish size has increased 36% since 1960.<sup>4</sup> The Small Plate Movement suggests that using a smaller plate for the largest meal of the day will help decrease the amount of food consumed.<sup>4</sup> Modifying our environments by using smaller dishes or repackaging larger food packages into smaller single-serve portions can help us avoid mindlessly overeating.<sup>4</sup>

### The 5-2-1-0 concept

Sustainable Childhood Obesity Prevention through Community Engagement (SCOPE) is a nationally recognized, community-based childhood obesity prevention plan. SCOPE has developed the 5-2-1-0 concept to provide clear messaging to families and children. This concept promotes a daily routine of five or more vegetables and fruits, no more than two hours of screen time, at least one hour of play activity, and zero sugar-sweetened drinks. For more information on SCOPE and the 5-2-1-0 concept, visit [www.childhood-obesity-prevention.org](http://www.childhood-obesity-prevention.org).

Unhealthy eating behaviors can be a sensitive topic for many patients. While there are many approaches physicians can take to address unhealthy eating, a simple and clear message that focuses on lifestyle modification should be provided. This can include

*Continued on 433*

*This article is the opinion of the Council on Health Promotion and has not been peer reviewed by the BCMJ Editorial Board.*

SafeBC, concurrent treatment may be deemed acceptable in certain circumstances. For example, the same disability may require treatment by a general practitioner and a specialist, by multiple specialists, or by a qualified practitioner (e.g., a chiropractor), with concurrent monitoring by the attending physician. If concurrent treatment is denied, patients will be paid benefits to the date of written notification, providing they have submitted appropriate medical reports.

#### For more information

For more information about chiropractic services for injured workers, contact WorkSafeBC Health Care Services at 604 232-7787, or for clinical questions, contact jeff rey.quon@worksafebc.com or 604 279-8128.

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#### References

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referrals to other community services, such as appropriate nutritional and exercise programs, counseling, and support. Patients can also contact a registered dietitian for additional information by calling 8-1-1 or visiting [www.healthlinkbc.ca/healthyeating/emaildietitian.html](http://www.healthlinkbc.ca/healthyeating/emaildietitian.html).

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#### References

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