

# GI News – March 2008



## In this issue of GI News

- Obesity – is it in your genes?
- What's great about omega-3s?
- 'Happy meals for whom?' asks Dr David Ludwig
- Coffee and diabetes

Couple up those dieting and climate change bandwagons with the Global Warming Diet, says Prof Trim explaining how increasing personal energy expenditure can decrease body fat and carbon emissions. In Busting Food Myths, Nicole Senior faces facts and shows why beauty is more than skin deep, and Catherine Saxelby explains why we need to shake the salt habit in Feedback. Also this month our chef Kate Hemphill tempts the tastebuds with Avocado, sesame and sumac quinoa in baby gem leaves and Udon noodle stir-fry with curry and coconut. Our food of the month is canned salmon. Why? Well it's low in saturated fat, rich in zinc and a great source of those essential omega-3s. It's also a handy ingredient to keep on standby to whip up low GI meals like Jennene Plummer's, Fusilli with salmon and baby spinach.

Good eating, good health and good reading.

"Middle age is when you choose your cereal for the fibre,  
not the toy."

**GI News Editor:** [Philippa Sandall](#)

**Web Design and Management:** [Scott Dickinson, PhD](#)

Posted by GI Group at [8:28 AM](#) 

## Food for Thought

### The weighty matter of genes and environment

'There's plenty of evidence to back up the idea that our body weight and shape is at least partly determined by our genes,' says Prof. Jennie Brand-Miller. 'A child born to overweight parents is much more likely to be overweight than one whose parents are not overweight. Most of this knowledge comes from twins studies. Identical twins tend to be similar in body weight even if they are raised apart. Twins adopted out as infants show the body-fat profile of their biological parents rather than their adoptive parents.'



So how much is ‘genes’ and how much ‘environment’? And how much does that matter?

University College London (UCL) researchers writing in the *American Journal of Clinical Nutrition* (February 2008, Volume 87, No. 2) report that genetics and heritability may account for 77% of obesity, while environmental factors make up less than 25%. ‘Although contemporary environments have made today’s children fatter than children 20 years ago, the primary explanation for variations within the population, then and now, is genetic difference between individual children,’ say the authors. The researchers analysed the BMI and weight circumference in a UK sample of 5,092 twin pairs (identical and sibling) aged 8 -11, born between 1994 and 1996. They found that the correlations for monozygotic (identical) twins in their study were similar in boys and girls, and greatly exceeded those of the dizygotic (sibling) twins, suggesting a strong genetic influence.

In commenting on this study, Dr David Ludwig, Associate Prof. of Pediatrics at Harvard Medical School and Director of the Optimal Weight for Life (OWL) program says: ‘One must be very cautious interpreting studies aiming to determine what proportion of a disease is genetic vs environmental. Clearly, heritable factors can affect body weight and risk for obesity. However, our genes haven’t changed much in the last half century, as obesity rates in children have tripled in the US and elsewhere.

A disease can look predominantly genetic under one set of conditions, and primarily environmental under another set. For example, among people living at high latitudes where sun exposure is limited, most cases of skin cancer may result from genetic susceptibility. However, if those people moved to the tropics, skin cancers would increase, and most cases would be directly attributable to sun exposure (an environmental factor.)

The bottom line is that we can’t change our genes, but we can change our environment, especially the home environment where we and our kids spend much of our time. ‘Protecting the home environment’ is in fact the primary parenting practice we recommend in our 9-week family weight loss program here at Children’s Hospital Boston.’



Posted by GI Group at [8:26 AM](#) 

## News Briefs

### Beans mean less diabetes

Legumes, also known as pulses, are the edible seeds found inside the mature pods of leguminous plants such as beans, chickpeas, lentils and peanuts. Yes, peanuts (GI 14) are a legume not a nut. Whether you buy legumes dried, or opt for canned convenience, you are choosing one of nature's lowest GI foods. They are high in fibre and packed with nutrients, providing protein, carbohydrate, B vitamins, folate and minerals. When you add them to meals and snacks, you reduce the overall GI of your diet because your body digests them slowly. This is primarily because their starch breaks down relatively slowly (or incompletely) during cooking and they contain tannins and enzyme inhibitors that also slow digestion.

A large study by researchers from Vanderbilt University Medical Centre and the Shanghai Cancer Institute found that Chinese women who ate legumes reduced their risk of developing type 2 diabetes. Women with a high intake of legumes reduced their risk by 38%, while those with a high intake specifically of soybeans (GI 14) nearly halved their risk - reducing it by 47%.

Using food frequency questionnaires to assess dietary intakes, the researchers led by Raquel Villegas followed 64,227 middle-aged Chinese women with no history of type 2 diabetes, cancer or cardiovascular disease at the beginning of the study for an average of four and a half years. Other than soy milk, there was no relationship between diabetes risk and eating soy foods and soy protein such as tofu and tempeh.

– *American Journal of Clinical Nutrition* January 2008



## **Berry good health**

Cardiovascular disease is still the biggest killer of men and women, and having diabetes or pre-diabetes is a major risk factor for it. High levels of glucose in the blood, even short-term spikes after a meal, can have many undesirable effects and are a predictor of future heart disease. High insulin levels also increase the tendency for blood clots to form. Heart-healthy, low GI foods can play an important part in reducing the risk. And what sweeter way to eat your way to heart health than to tuck into a bowl of berries, ‘the leader of the pack when it comes to phytochemical antioxidants which help reduce oxidation of cholesterol in the body,’ says dietitian Nicole Senior.

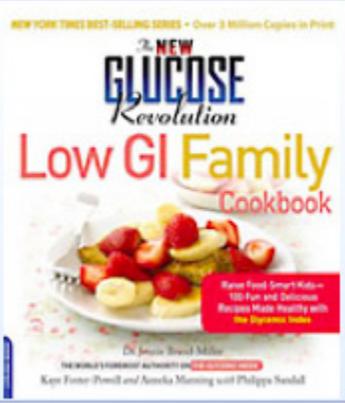
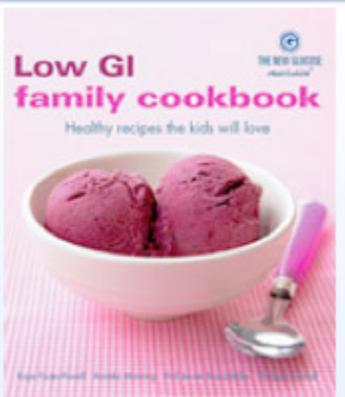
A new study from Finland has shown that eating berries can boost levels of good cholesterol and improve blood pressure. The researchers randomly assigned 72 slightly overweight (average BMI 26.2) middle-aged men and women to consume either a diet rich in berries, or a control diet containing one of four different products including sugar-water, sweet rice porridge, marmalade sweets, or sweet semolina porridge. The berry eaters consumed 100 g (3½ oz) of whole bilberries and 50 g (1¾ oz) of a lingonberry-rich nectar every second day plus 100 g of a purée of blackcurrants or strawberries and a juice of raspberry and chokeberry on the other days. ‘We found favourable changes in platelet function, blood pressure (reduction in systolic blood pressure by 7.3 mm HG), and HDL cholesterol after the consumption of berries for two months,’ wrote lead author Iris Erlund. At the end of the trial, levels of ‘good’ HDL-cholesterol rose significantly more in the berry group (by 5.2%), compared with the control group (by 0.6%). Total cholesterol and triacylglycerol levels were not altered.

– *American Journal of Clinical Nutrition*, February 2008,



## What's new?

### THE LOW GI FAMILY COOKBOOK GIVE AWAY

<p><b>US and Canadian residents</b></p> <p>We have 6 copies of <i>The Low GI Family Cookbook</i> published by Da Capo Lifelong Books to give away to US and Canadian residents only.</p> <p>The first 6 people to email will receive a free copy. <a href="mailto:new.glucose@perseusbooks.com">new.glucose@perseusbooks.com</a></p>	
<p><b>Australian residents</b></p> <p>We also have 6 copies of <i>The Low GI Family Cookbook</i> published by Hachette Livre Australia to give away to residents of Australia only.</p> <p>The first 6 people to email will receive a free copy. <a href="mailto:newglucoserevolution@hachette.com.au">newglucoserevolution@hachette.com.au</a></p>	

### Podcast: Children and the GI

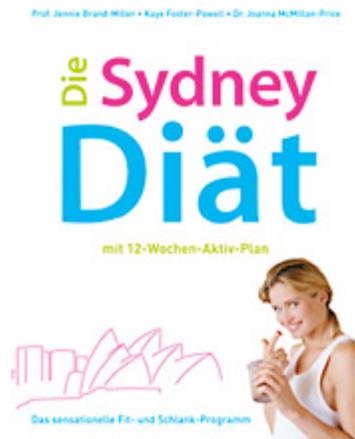
Prof. Jennie Brand-Miller discusses how to use the GI to help kids develop healthy eating habits and a love of good food for life. She talks about how to handle fussy eaters, what foods to give your kids for breakfast and for snacks, and how to add fun foods to healthy foods in order to easily encourage better nutrition. For kids or even adults who are athletes, she describes the best ways to approach diet and how the GI can be a huge help in keeping energy high and maximising performance.

### AJCN supplement: Glycemic Response and Health

The January 2008 issue of the *American Journal of Clinical Nutrition* has a supplement including a number of reports on glycemic response and health which may be of interest to researchers and health professionals. For the article abstracts, click [HERE](#).

## Die Sydney Diät

Mit 12-Wochen-Activ-Plan



Fully illustrated in colour throughout, *Die Sydney Diät*, the German edition of *The Low GI Diet*, is now available. For more information check out the ‘Die Sydney Diät’ website and newsletter [HERE](#).

Posted by GI Group at [8:24 AM](#) 

## Food of the Month

### Canned salmon and the amazing benefits of omega-3

‘Low in saturated fat, rich in zinc and a great source of omega-3s – there are plenty of reasons to eat canned salmon,’ says Foodwatch dietitian and nutritionist Catherine Saxelby. ‘It is also high in protein and full of iodine, potassium and zinc. Make sure you eat the small edible bones, one 100 g can provides 200–230 mg of calcium – 20 per cent of the recommended daily intake.’

We asked diabetes dietitian Kaye Foster Powell what’s so great about omega-3s for people with diabetes. ‘People with large amounts of omega-3 fats in their diet are less likely to have type 2 diabetes or pre-diabetes,’ says Kaye. ‘What’s more, these fats are a must for a healthy heart – and they don’t upset your blood glucose levels. There are lots of ways omega-3 fats can help you.’



- They make your platelets less sticky and lower fibrinogen levels (fibrinogen is a blood-clotting factor). This means they decrease the chance of forming blood clots throughout your body, thus reducing the likelihood of a heart attack, stroke, or embolism (clot)
- They make your red blood cells more flexible so your blood flows more easily, lowering your blood pressure and improving delivery of nutrients and oxygen to your cells
- They lower blood fats (especially triglycerides) and increase HDL (good) cholesterol levels
- They stabilise your heartbeat, preventing heartbeat abnormalities (arrhythmia) that can lead to cardiac arrest
- They may reduce microalbuminuria (an abnormally high amount of protein in the urine) and thus help patients on dialysis (a machine to filter the kidneys)
- They may elevate your mood, lift depression and improve your ability to deal with stress
- They reduce inflammation and can relieve symptoms of arthritis, and
- They may reduce the output of the stress hormone adrenaline.’

Boost your omega-3s with this delicious low GI recipe from Catherine Saxelby’s *Zest* cookbook co-authored with *Woman’s Day* food director Jennene Plummer.

### **Fusilli with salmon and baby spinach**

Serves 6



500 g fusilli, or another pasta of choice  
 spray oil  
 250 g punnet cherry tomatoes, halved  
 2 garlic cloves, sliced  
 210 g can red or pink salmon, drained and flaked  
 1/2 cup extra-light cream or light evaporated milk  
 juice 1 lemon  
 60 g baby spinach leaves  
 chopped chives and grated parmesan  
 cheese to serve

Cook the pasta in plenty of boiling water, following packet instructions. Drain the pasta well and set aside, keeping warm.

- Heat a large frying pan on high. Spray with oil. Sauté the tomatoes and garlic for a minute then stir in the salmon, cream and lemon juice. Lower the heat and simmer gently for 2–3 minutes, stirring from time to time, until the mixture has thickened slightly.
- Toss the sauce through the hot pasta with the spinach leaves. Serve topped with chives and a little parmesan. Accompany with salad.

Per serving (including a generous serve of side salad with vinaigrette dressing)  
1700 kJ/405 Cal, 9 g fat (includes 2.5 g saturated fat), 62 g carbohydrate, 5 g fibre

Posted by GI Group at [8:22 AM](#) 

## Low GI Recipes of the Month

Our chef Kate Hemphill develops deliciously simple recipes for *GI News* that showcase seasonal ingredients and make it easy for you to cook healthy, low GI meals and snacks. For more of Kate's fabulous fare, check out: [www.lovetocook.co.uk](http://www.lovetocook.co.uk). For now, prepare and share good food with family and friends.



Kate Hemphill

### **Udon noodle stir-fry with curry and coconut**

Stir-fries are generally just a combination of whatever's in the fridge. Feel free to add whatever vegetables you like to this. The problem with a lot of stir-fries is that they are overcooked. Here's a tip. To avoid doing this, keep the heat fairly high and the ingredients moving in the pan and as soon as they're cooked, slide them into a bowl and eat straight away.

Serves 2-3



1/2 brown onion, finely chopped or grated  
1 tablespoon medium or madras curry powder  
1 tablespoon (30 ml) vegetable oil  
1 large skinless chicken breast, halved horizontally and cut into pieces  
8 heads of bok choy or choy sum, washed, trimmed and cut into 5cm pieces  
100 g (3 1/2 oz) sugar snap peas, cut in half on the diagonal  
200 g (7 oz) udon or Shangahi noodles  
3/4 cup (180 ml) light coconut milk (or coconut flavoured light evaporated milk to reduce the saturated fat)  
handful of fresh coriander leaves, to garnish

- Heat a wok over medium heat and add onion. Stir for one minute, then add curry powder and vegetable oil to make a paste. Add the chicken pieces and continue to stir while cooking. After 3–4 minutes, add the vegetables, and after another 3 minutes, add the noodles and coconut milk. Keep the ingredients moving in the pan
- Season to taste and top with coriander leaves, you might want to add some Asian chilli sauce at this point if you like a bit of heat.

Per serve (based on 3 servings)

2507 kJ/597 calories; 49 g protein; 17 g fat (includes 3.7 g saturated fat); 58 g carbohydrate; 6.4 g fibre

### **Avocado, sesame and sumac quinoa in baby gem leaves**

This is a nice healthy and very versatile dish that can be eaten for lunch (you'd need a couple of leaves), or served as a canapé – it is easy finger food – when entertaining indoors or out. You can also stuff a pita pocket with the quinoa mix for a substantial sandwich or eat it on its own as a grainy salad side dish with a main meal.



Quinoa

Makes 16 lettuce 'cups'

300 g quinoa, cooked and drained

1 avocado, diced into 1 cm (1/2 inch) pieces

4 spring onions, finely sliced

2 teaspoons sesame oil

2 teaspoons soy sauce

¼ cup (4 tablespoons) lemon juice

2 tablespoons (30 ml) extra virgin olive oil

2 heads of baby gem lettuce (16 leaves), washed and drained

sesame seeds, to serve

sumac, to serve

- Place the quinoa in a bowl and combine with the avocado, spring onions, sesame oil, soy, lemon juice and oil and season to taste. Spoon into lettuce leaves and sprinkle with sesame seeds and a little sumac.

Per lettuce cup

358 kJ/85 calories; 1.4 g protein; 6.7 g fat (includes 1 g saturated fat); 5 g carbohydrate; 1 g fibre

Posted by GI Group at [8:20 AM](#) 

## Busting Food Myths with Nicole Senior

**Myth:** Staying young is skin deep as any wrinkle will tell you.



Nicole Senior

**Fact:** Despite the millions spent on lotions and potions, youth and beauty at any age comes from within.

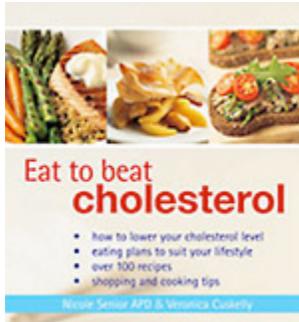
Although fruit, vegetables, herbs, green tea and omega-3s are fashionable ingredients for skin care products, you'll probably get better results by eating them. An Australian study comparing the habitual diets of mature women found those with the least skin wrinkles enjoyed a diet rich in vegetables, olive oil, fish and legumes. Eating prunes, apples and drinking tea also seemed to help. A large study of middle aged- American women found those who consumed the most vitamin C and linoleic acid (an omega-6 fatty acid found in vegetable oils) had the lowest skin-age appearance.

A common fear of getting older is 'losing our marbles' so we can't talk about healthy ageing without discussing the brain. Besides exercising your brain with memory tasks, puzzles and problem solving, you can maintain a healthy brain with the food you eat. For example, foods rich folate may decrease levels of harmful homocysteine in the body – a trouble-making substance that may increase the risk of Alzheimer's as well as cardiovascular disease. Folate rich foods include green leafy vegetables (e.g. spinach), citrus fruit, legumes (e.g. lentils) and breakfast cereals and breads with added folate.

Having high blood glucose levels can also muddy the waters of the mind. Excess glucose forms an unholy alliance with proteins in the brain to produce AGE (advanced glycosylated end products), which are implicated in degenerative diseases such as Alzheimer's. A similar process can occur with proteins in the skin leaving you looking very much your AGE. Here's where a low GI diet comes in: you can reduce the amount of glucose loitering-with-intent-to-age. Enjoy low GI foods such as grainy breads, oats, muesli, pasta, legumes, fruits and calcium-rich low fat dairy foods and your dedication to healthy eating will be written all over your face.

If all these protective foods are sounding familiar it's because they also help maintain a healthy heart. While heart disease is often associated with men, it is still the biggest killer of women. Heart-friendly foods such as vegetables, fruits, wholegrains, legumes, fish and healthy oils are also brain-friendly. Ladies, your healthy ageing strategy is simple: eat for your heart and your head (and use sunscreen).

**Dermatologists say the most important strategy for preventing premature ageing is staying out of the sun, so buying a good sunscreen is money well spent – and wearing a hat.**



Click on the cover to purchase

Dietitian Nicole Senior is author of *Eat to Beat Cholesterol* available online at: <http://www.eattobeatcholesterol.com.au/>

Posted by GI Group at [8:16 AM](#) 

## Dr David's Tips for Raising Healthy Kids

### Happy meals for whom?

Way back in the 1980s and 1990s, I was involved in a 15-year study (the CARDIA study, *Lancet* 2005, 365:36-42) that took a long, hard look at what happens when young people eat fast food on a regular basis. We found those kids eating fast food more than twice a week gained an extra 10 pounds and insulin resistance increased twice as fast as those who ate it once a week or less. And that was way back then, when eating fast food often was eating it twice a week. Today young people from toddlers to teens may be tucking into fast food four times a week or more.



Did someone say happy meals? These are sad meals indeed. Why? Most people think of fast food as being loaded with fats. Yes it is. But it is also packed with an even greater amount of high GI carbs – think of those spongy soft burger buns, fries, soda, apple pie and cookies. Not to mention the massive portion sizes, high energy density, minimal fibre, few vitamins and minerals and a heavy hand with the salt shaker. And if that isn't enough, fast food is designed to be eaten, well, fast. Children can easily consume almost an entire day's calorie requirements from such meals in a matter of minutes, long before their bodies have time to recognise and respond to the incoming calories. It takes 20–30 minutes for those 'I'm full now' satiety signals from the stomach to reach the brain.

The evidence is piling up just like those extra pounds are piling on – overweight or obesity in adolescence increases risk of heart disease in adulthood. And early data from Canada is showing that adolescents with type 2 diabetes will be at high risk of limb amputation, kidney failure and premature death.

Very sad meals indeed.

Of course, parents need to take responsibility for their children's welfare by providing high quality food, limiting television viewing and time spent in front of small screens and setting an example with a healthy lifestyle. But why should their efforts be undermined by the billions of dollars in junk food advertising from the food industry or by farm subsidies in the US for example that favor high fructose corn syrup over fruits, vegetables and other wholesome foods?

Like governments around the world, there are things that our US government needs to do. It needs to develop a comprehensive national strategy that encourages children to eat a healthy diet and be active. I am not talking good intentions and fuzzy words here. I am talking serious teeth in the form of legislation that:

- Regulates junk food advertising
- Provides adequate funding for decent school lunches and regular physical activities at school
- Restructures the (US) farm subsidy program to favour nutrient-dense rather than calorie-dense foods, and
- Mandates insurance coverage for preventing and treating pediatric obesity.

What can you do? Take a minute to promote America's health says the Center for Science in the Public Interest. Send a message to Congress. <http://cspinet.org/takeaction/index.html>



Dr David Ludwig

– Dr David Ludwig is Director of the Optimal Weight for Life (OWL) program at Children’s Hospital Boston and author of [Ending the Food Fight](#)

Dr David Ludwig discusses the impact of childhood obesity and what needs to be done.

Play the Podcast above or download here 

Posted by GI Group at [8:14 AM](#) 

## Move It & Lose It with Prof Trim

### Now it’s the ‘global warming diet’

Joining two bandwagons – dieting and climate change – US experts have come up with a caravan. They call it the ‘global warming diet’, because not only does it decrease fat on an individual’s body, it decreases carbon emissions into the atmosphere. How does it manage both feats? By increasing personal energy expenditure (e.g. through more walking), and decreasing carbon emissions from the energy of non-renewable fossil fuels (e.g. from less driving of cars).

In a typical atmosphere of global megalomania, said experts believe such a brilliant, revolutionary idea could come only from the US, thus ignoring the Professor’s earlier forays into this area in the *Australian Medical Journal* (August 2007). Still, in the words of Oscar Wilde, “tis better to be mimicked than shunned” (or something like that).

The proposal? Get out of your car and walk, or ride a bike for half an hour a day instead of driving. The average person **walking an extra half an hour a day** would lose about 6 kg a year and burn around 100 litres less fuel, or 230 kg of carbon (e.g. around 12% of the current annual Australian emission per person). And while you’re at it, eat less processed, high energy-dense food, which takes a lot of carbon creating energy to manufacture.

If you’re also kind to each other, eat your vegetables and get to bed early, the world would be a much nicer place!



Dr Garry Egger aka Prof Trim

– Click for more information on [Professor Trim](#).

Posted by GI Group at [8:12 AM](#) 

## Your Questions Answered

**I thought salt was salt, but have just bought a recipe book that tells me to use kosher salt and I now notice my supermarket has shelves groaning with packets of different types and colours of salt. Is there any difference? Are some better than others? How much is OK?**

You are right. Salt is salt. It is a compound called sodium chloride of which about 40% is sodium. We turned to Canadian food consultant, Norene Gilletz, who is a certified Culinary Professional with the IACP, a leading authority on kosher cooking and author of *Norene's*

*Healthy Kitchen* (reviewed last month in *GI News*), for some tips on the types of salt you find on your supermarket shelves.



- Table salt is the one in most salt shakers. It is fine-ground, refined salt typically from rock salt and usually with some additives to keep it free flowing (anti-caking agents such as sodium silicoaluminate or magnesium carbonate).

- Iodized salt is table salt with a minute amount of potassium iodide, sodium iodide or iodate added. The iodine is added to help reduce the chance of iodine deficiency which commonly commonly leads to thyroid problems such as goitre.
- Sea salt is produced by the evaporation of seawater and comes in flakes and crystals. It usually has no additives.
- Kosher salt is additive free and coarse grained. It's readily available in North America.

Whether you opt for table salt, iodised salt, sea salt or kosher salt, there's little difference in the sodium content by weight. The key difference is taste and texture, and iodine content. Many chefs and gourmet cooks prefer to use the coarser kosher and sea salts. If you opt for a ¼ teaspoon of a coarse grained salt like sea salt or kosher salt, you'll find that less will fit on a spoon so you'll get less sodium. But that's about it when it comes to benefits.

As for how much is enough? 'We don't need much at all,' says Foodwatch nutritionist, Catherine Saxelby. 'The body needs less than 200 mg of sodium a day, but the average Western diet supplies from 2300–4600 (equivalent to 6–12 grams or around 1–2 teaspoons of salt). The problem with too much sodium is that it attracts and retains fluid inside the body. The evidence is compelling that cutting back on salt will make a big difference to blood pressure in most cases, and for any condition where fluid retention is a feature.'

Most experts these days recommend between 1500 and 2300 mg sodium a day for healthy adults. So, how do you cut back your salt intake?

'The big problem is not so much the salt shaker, says Catherine. 'It's those everyday foods even if they don't taste salty – cheese, deli meats, butter and margarine, fast foods, sauces and spreads. In fact around 75 per cent of our salt intake comes from processed foods, which is why buying salt reduced and no added salt foods will have the biggest impact on your intake.'

Download Catherine's tips on cutting back on sodium [HERE](#).

### **I've heard that coffee is good for diabetes. Is that true?**

The jury is still out on this one. Occasional coffee drinking may actually decrease insulin sensitivity, but drinking coffee or other high caffeine foods or beverages on a regular basis does not appear to have any detrimental effects on people with diabetes in the long run. Coffee (regular and decaffeinated) contains lots of antioxidants and magnesium which may improve insulin sensitivity. Our take-home message as ever is moderation. Here are the findings of a couple of studies.



A small study reported in February 2008 *Diabetes Care* however suggests that daily consumption of caffeine in coffee, tea or soft drinks can increase blood glucose levels for people with type 2 diabetes. Dr James Lane of Duke University tracked 10 people with established type 2 diabetes who drank at least two cups of coffee every day and were trying to manage their diabetes through diet, exercise and oral medications, but not extra insulin. Each had a tiny glucose monitor embedded under their abdominal skin that continuously monitored their glucose levels over a 72-hour period. The participants took capsules containing caffeine equal to about four cups of coffee on one day and then identical capsules that contained a placebo on another day. Everyone had the same nutrition drink for breakfast, but were free to eat whatever they liked for lunch and dinner. The researchers found that when the participants consumed caffeine, their average daily sugar levels went up 8%. Caffeine also exaggerated the rise in glucose after meals: increasing by 9% after breakfast, 15% after lunch and 26% after dinner. Cathy Moulton, care advisor at Diabetes UK, said: ‘Although this is interesting research, the study only examines a sample of 10 people taking pure caffeine capsules (not real coffee) for a 72-hour period, which proves very little. More research is needed before we ask people with diabetes to stop drinking coffee. The best way to control glucose levels is through healthy eating and exercise.’

A study of the dietary habits of more than 125,000 people in the US over 20 years (*Annals of Internal Medicine* January 2004) found that men who drank more than six cups of caffeinated coffee a day reduced their chances of getting type 2 diabetes by more than 50% compared with men in the study who didn’t drink coffee. Among the women, those who drank six or more cups a day reduced their risk of type 2 diabetes by nearly 30%. These effects could not be accounted for by lifestyle factors such as smoking, exercise or obesity. Decaffeinated coffee was also beneficial, but it had less effect than regular coffee. The researchers noted that caffeine, the best-known ingredient in regular coffee, is known to raise blood sugar and increase energy expenditure in the short term, but its long-term effects are not well understood. Coffee (both regular and decaffeinated) has lots of antioxidants like chlorogenic acid (one of the compounds responsible for the coffee flavor) and magnesium. These ingredients can actually improve sensitivity to insulin and may contribute to lowering risk of type 2 diabetes.

Posted by GI Group at [8:08 AM](#) 

## Your Success Stories

**‘Success breeds success! I love the mental freedom of not having cravings as the best thing of all.’ – Diane**

‘I had never been on a diet or lost a kilo in my life. So, having reached the age of 53, weighing 102 kg and being pre-diabetic, I decided to adopt the low GI diet. I read many success stories, but never did I think I would be as successful as these people. I couldn’t imagine myself as losing weight and being lighter, I couldn’t really remember weighing less.



Well, only 12 weeks later, I weigh less than 90 kilos! I stare at the scales every morning in amazement. It has become an incentive to continue, as success breeds success. People have noticed, and are very kind with their comments, but strangely enough, I don’t notice much change, except in photographs. I never imagined I would be able to cut down my chocolate habit to next to nothing, but it has been so easy. I’d say to people, jump in, the first few days might be hard, but just go and have some lovely steak, prawns or fish and try and then try and tell yourself this diet is awful!

I upped the intensity of my exercise as well, and it is difficult fitting it all in, but hey, going out for a walk instead of watching telly or sitting at the computer ain’t so bad, is it. I also like to think that I’ll escape some of the complications of diabetes that my family suffered.’

**‘I lost 15 lb over 6 months and continue to maintain this weight loss.’ – Jini**

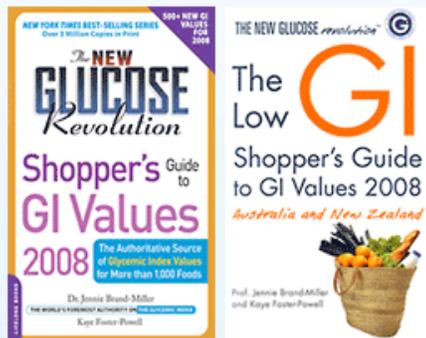
‘I wanted to safely lose the weight I had gained following 5 years of adjuvant therapy (tamoxifen) for breast cancer. I had read about the glycemic index (I am a research scientist) and decided that I would try the low GI diet. I cut out all refined and processed food from my diet and started to replace high GI foods with low GI substitutes. It is not very easy but I compiled lists of foods with a lot of help from your website. I followed the low GI diet combined with

working out at the gym 3 times a week. I lost 15 lb over a period of 6 months to return to my original weight and BMI of 21.5 and continue to maintain this weight loss.

As I and my family enjoy desserts I now create/develop low GI versions of cookies/muffins using whole wheat flour, ground almonds, fruit and small amounts of honey/maple syrup. I have also successfully encouraged several family members (some who are diabetic) to switch or to be more aware of the GI of the foods they eat.'

### Inspire Others - Share Your GI Story

*If healthy eating the GI way has made a difference to your life by helping you achieve blood glucose control or lose weight, please share your success with readers of GI News. It's the real life success stories that give people the motivation they need to get started and help them appreciate that they are not alone. Just click anywhere in this text box to share your story. As a thank you, we will send you a copy of "Shopper's Guide to GI Values 2008" if your story is published in GI News*



## GI Symbol News with Alan Barclay

### Healthy snacks for active kids

Let's face it, finding healthy nutritious pre-prepared snacks that kids also love to eat, can sometimes be a chore. The typical range of calorie-laden, high saturated fat, high GI pre-prepared snacks that have been traditionally marketed to kids generally fail to meet the nutritional targets espoused by most dietitians and nutritionists. But rapid increases in rates of childhood obesity around the globe, and increased community awareness, have spurred many of the more responsible food manufacturers to develop new ranges of delicious healthier snacks for the school lunch box, canteen or after school snack. An increasing number of healthier options for kids now carry the GI Symbol which means the food is a healthy choice for its food group. Here are some examples available in Australia that.

Sunripe School Straps and Go Fruits (GI 40)

Uncle Tobys Crunchy (GI 51) and Chewy (GI 48) muesli bars

Maggi 2 Minute Noodles (GI 52)

Nestle All Natural 99% Fat Free (GI 1 -49) and Nestle Diet (GI 10-21) Yoghurts

Brownes Diet Yoghurts (GI 24-40)

In addition to these, Nestle Australia has just brought out two new healthy low GI dairy snacks designed especially for kids:

Nestle Milo Mousse Energy Dairy Snack (GI 46)

Nestle Milo Energy Dairy Snack (GI 28)



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### Contact

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