Notes on Diabetes Group meeting 6th October 2022

We had apologies from three of our regulars but had two new members, Penny and Marion plus Alicia, Brad, Brian, Jeremy and John. Penny introduced herself and told us she had been diagnosed as pre-diabetic about a month ago. She said she has cut sugar out of her diet and tests herself every day. Marion said she had been diagnosed with type 2 diabetes this year and was prescribed metformin to control it. She said she had other health problems which may be diet related. Brad asked how they had found out about us and Penny said she worked for Kent Coast Volunteering and our group was in their online directory. She also told us that directory was closing down and we should check our listing in thanethealthcic.co.uk (which has been done).

After Brad welcomed the attendees and told the group about his meeting with AgeUK Thanet in Margate. They have expressed an interest in hosting us as a mixed Zoom and in-person meeting, possibly starting in the new year. Hopefully this would mean we would expand our membership since they are likely to have diabetes sufferers on their books. This would probably mean changing the time of the meetings since they normally close at 4.30pm, but there is a possibility of a later time if someone were available to lock up.

John read a summary of our previous meeting and Brad asked Jeremy to give his presentation on "Understanding processed food addiction - steps to recovery". Jeremy defined food addiction as 'a conscious or unconscious dependence on highly palatable processed food giving rise to an eating behaviour that some are helpless to stop in spite of negative consequences.' He reiterated a point from part 1 - Food addiction exists. It is an illness, it is chronic and usually progressive, denial is part of the illness and most people can recover. He said that to find out whether we suffer from this addiction we should take the survey. Brian asked if it was a recognised illness and Jeremy said it was not recognised by the NHS or the WHO, but the Public Health Collaboration and others were trying to get it done.

Jeremy then took us through the survey and invited us to take a note of our scores, though he did not expect us to share them with the group! The questions were:

- 1. Eat more than intended ("I wish I hadn't eaten all that")
- 2. **Tried to cut back** ("I have tried every diet out there")
- 3. **Spend a lot of time planning, getting food, eating, and recovering from eating.** ("I have food hidden everywhere; I am constantly watching to make sure I have enough.")
- 4. Experience cravings, strong desires, or urge to eat processed foods. ("I think about food even if I am not hungry or doing something else")
- 5. Eating makes it hard to fulfil obligations at home, work, or school ("I miss a lot of work going to doctor's appointments. I wish I could just clean up my diet and improve my health but I always fail.")
- 6. **Persistent or recurrent social or interpersonal problems related to eating. (**"My husband wants me to get the fattening foods out of the house and away from our overweight kids. He wants me to lose weight. We fight about it but I love sweets and bread and I love giving them to our kids. It may cost me my marriage.")
- 7. **Given up important social, occupational, or recreational activities in order to eat.** ("I know I'm isolating but I don't care")
- 8. **Eat when it is hazardous or dangerous to do so.** ("Drive-thru fast food means I pull out onto the street driving with no hands because I'm frantically digging out the fries and ketchup")
- 9. **Eat in spite of knowing about consequences.** ("My doctor just diagnosed me with diabetes. He says I need to lose weight and start taking care of myself. I know this, but I just can't seem to do it")
- 10. Need to eat a lot more than before in order to get the same feeling. ("One fizzy drink used to be enough to get me through the afternoon. Now I'm crashing before the afternoon is over.")

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11. Feel worse after cutting down or stopping over eating certain foods. ("If I stop eating sweets and bread for a few days, I am anxious and irritable, and sometimes I even feel like I have the shakes. I start eating sweets again to feel better.")

He said anyone scoring 2 or more should take action! If you were diagnosed with diabetes you would want to engage in recovery activities and treatment. The same must apply to food addiction. He listed the consequences of process food addiction – Obesity, Type 2 diabetes, Heart disease, Depression and Isolation amongst others. He warned "Do not make the assumption that inaction has no price; the cost of inaction can be high, physically, emotionally and maybe also financially.

Consider the potential consequences of action or inaction on those close to you, your family, your children, and also on the health system and health providers." He showed us a Cosmopolitan cover displaying a very overweight woman with the caption "This is Healthy". He gave this as an example of denial. He said acknowledging one has the problem is the first step to recovery. The solution is to avoid sugar, refined grains, seed oils and spreads, e.g., soft drinks, juices, smoothies, sweet or savoury packaged snacks, confectionery, cakes and biscuits, bread, breakfast cereals and many frozen products. He emphasized the importance of protein, and said the best sources of protein and fat comes from animals. He moved on to explain that processed food is scientifically tailored to make them more palatable to the consumer, and it's not a coincidence that the major food companies have a history of creating tobacco addiction.

When Jeremy concluded Brad asked for comments or questions. Penny said she was vegetarian and so used olive oil and coconut oil rather than animal fats. John said he was hoping to try a bread recipe Brian had recommended and would share the results. Penny said she ate sourdough bread since she was aiming to be gluten free, and wondered if making it was better than buying it. Jeremy didn't know and thought sourdough was still full of gluten, and recommended cutting bread out of the diet altogether. Marion said she had problems eating and was losing weight. She was about to meet a dietician. Brian said trying to control diabetes usually involved losing weight. Jeremy recommended the spreadsheets on the group's website¹ and also the infographics on the PHC website (https://phcuk.org/?s=infographics&bp_search=1&view=content). These give sugar and carb content of many common foods.

Brad gave us data on swede and dried apricots, claiming many health benefits.

Next meeting is on 3rd November at 5pm. Zoom link will be on the website and on an email before the date.

Links

Website – http://diabetesthanet.uk

Facebook - https://www.facebook.com/groups/1370586729749214

Nextdoor - https://nextdoor.co.uk/events/17592186413264/

http://www.authentik.co.uk/diabetesthanet/presentations/processed-food/

http://www.authentik.co.uk/diabetesthanet/presentations/real-food/

http://www.authentik.co.uk/diabetesthanet/presentations/pcf-data/

¹ http://www.authentik.co.uk/diabetesthanet/category/presentations/