

Member Spotlight

Linda Michele Delahanty, MS, RD, LDN is Chief Dietitian and Director of Nutrition and Behavioral Research at Massachusetts General Hospital (MGH) Diabetes Center. There she is responsible for planning, developing, implementing, and evaluating the nutrition and behavioral research initiatives in the areas of diabetes, prediabetes, obesity and hyperlipidemia. After completing her undergraduate work at the University of Massachusetts in Amherst, she moved on to receive her Master's of Science in Clinical Nutrition at Boston University. She also became an Instructor of Medicine at Harvard Medical School. Read on to find out more about Linda and how she has applied her breadth of knowledge in the nutrition and research arenas. Very impressive!

One of the key factors that allowed me to advance to the position that I have now was the opportunity I received early in my career to be involved as the study dietitian in the Diabetes Control and Complications Trial (DCCT). At the beginning of the study, dietitians were all told that this was not a diet study but rather a study comparing the effect of intensive insulin therapy to standard insulin treatment on glycemic control and other diabetes-related outcomes. Therefore, their role was to collect diet history data and provide basic diabetes education. It became quickly apparent to me that good clinical diabetes nutrition skills that improved study participant's HbA1c levels were not going to be sufficient to convince the study investigators about the importance of diet and nutrition. So, one of my nutrition colleagues and I set out to

design and conduct an ancillary study to prove that diet behaviors were key in achieving HbA1c goals. The results of this research changed the attitudes and opinions of the DCCT investigators and, ultimately, the translation message of the DCCT—intensive diabetes therapy must involve attention to diet and include the dietitian as part of the team to achieve the glycemic goals associated with reduced risk for diabetes-related complications.

Some of my research remains focused on the rich database provided by the DCCT (1983-1993) and its follow up study, the Epidemiology of Diabetes Interventions and Complications Study (EDIC). I have previously focused on the relationship of diet behaviors to diabetes-related outcomes. More recently I have focused on the analysis of nutrition data collected in DCCT/EDIC.

Another area of my research focus is within the Diabetes Prevention Program (DPP), a study designed to compare the safety and efficacy of a lifestyle intervention to metformin and a control group in the prevention of type 2 diabetes. I am currently evaluating the results of the diet and exercise intervention as it relates to my ancillary study within the DPP aimed at identifying the psychological and behavioral predictors of weight outcomes for participants in the lifestyle intervention arm. The results of this research may inform health care providers about which patient profiles would do best with a lifestyle intervention to lose weight, exercise, and prevent diabetes versus which patients may fare better with medication to prevent diabetes.

I am Co-Investigator on The Look AHEAD study as well as the National Institutes of Mental Health (NIMH) funded "Cognitive Behavioral Treatment (CBT) for Adherence and Depression in Diabetes" study. The Look AHEAD study is a multi-center study designed to

compare the long-term benefits and risks of weight loss on health, particularly on cardiovascular events, in patients with type 2 diabetes who are overweight. I also serve as the Principal Investigator on an ancillary sub-study of Look AHEAD aimed at identifying the psychological and behavioral correlates of weight outcomes in the weight loss intervention group.

The NIMH research will evaluate the effect of CBT for medical adherence and depression in patients with a depressive mood disorder and poorly controlled type 2 diabetes. Through this research we will also evaluate and define the role of MNT and the dietitian in achieving HbA1c outcomes in this population.

All of the research that I have initiated has a common theme—to prove the value of nutrition and dietitians in achieving health outcomes. Throughout my career in each clinical trial, I have typically asked myself 3 questions:

What is the outcome of interest?

How can nutrition contribute to the solution and impact the outcome?

How can I bring attention to and document the role of the RD in this process?

My career goals are to continue to contribute to the evidence base about the importance of nutrition in maximizing health outcomes and to continue to pursue opportunities to elevate the role of the dietitian on national and international levels. I plan to contribute to translational research that focuses on the areas of lifestyle interventions, obesity and diabetes. I also have a passion for helping people who are living with diabetes. I plan to continue to contribute to the research that helps improve glycemic control and quality of life for people with diabetes and make sure that I continue to spend a portion of my time counseling patients with diabetes so that I remain on the front

line (to some degree) of translating research to practice in that area.

The dietetic practice groups have been a valuable source of professional support that continuously reenergizes me to stay focused on pursuing my passions and career goals. It was my involvement in dietetic practice groups that led to my nomination and acceptance of the Excellence in Research Award in 2006. There is nothing more meaningful and reinforcing than to be recognized for excellence by a group of your peers!

The ADA funded my first research grant and acknowledged the merit of my research results with the Mary Huddleson Award in 2002. Since then I have been serving on the Board of Editors where I have met and been influenced by many outstanding nutrition researchers. This past year the ADA sponsored my attendance at the Leadership Institute which was one of the best conferences that I have ever attended. I will certainly apply many of the leadership skills that I learned there now that I have been appointed Vice Chair of the Research Committee in anticipation of my role as Chair in 2008-2009.

Although I do not have a doctoral degree, I have learned a tremendous amount about research methodology, including study design, statistics, selection of primary and secondary outcomes, recruitment and retention strategies, and the publication process through my participation on various committees on NIH clinical trials. Immersing yourself in these venues will broaden your research network and enrich your research repertoire in countless and amazing ways and bring interesting opportunities.

Research is important to the field of dietetics because it is the vital link to evidence based practice and the credibility of the profession. Dietitians in all areas of practice are striving to improve their image and many report that they do not get the respect that they feel they deserve. Dietitians need to focus on both the art and the science of nutrition when they counsel patients, when they give presentations to interdisciplinary professional audiences, and when they write consumer and peer reviewed articles. I have personally witnessed several situations in which dietitians have given seemingly state-of-the-art presentations about diabetes nutrition counseling and education, only to hear physicians criticize their presentation and their credibility

because there was no data—no evidence. I am pleased to say that the program of work for the Research Committee in the upcoming years will be to focus on helping dietitians recognize the vital link between evidence based research and their credibility and professional image.

The Member Spotlight is arranged by Stephanie Michon, RD, LDN, a Research Project Manager at the Division of General Internal Medicine and Public Health of Vanderbilt University Medical Center, Nashville, TN 37232-8300. If you would like to recommend an RDPG member for an upcoming spotlight, contact Stephanie at stephanie.michon@vanderbilt.edu.

RDPG Election Results

Congratulations to the newly elected officers for the 2008-9 RDPG. The new terms will start in June, 2008.

Chair-Elect: Jeanene Fogli, PhD, RD, LDN
Nominating Committee: Teresa T. Fung, ScD, RD, LDN
Treasurer: Valerie Episcopo, MA, RD

The outgoing officers will be:
2006-8 Treasurer: Kendra K. Kattelman, PhD, RD, LN
2007-8 Past-Chair: David H. Holben, PhD, RD, LD
2007-8 Nominating Committee Chair: Alice C. Shapiro, PhD, RD, LN

Current officers who will be returning to fill the terms of their offices:
2008-9 Chair: Stacey L. Mobley, PhD, RD, CNSD
2008-9 Past-Chair: Debra A. Krummel, PhD, RD, LD
2007-9 Secretary: Martha McMurry, MS, RD
2007-2009 Nominating Committee Members: Cynthia Thomson PhD, RD, and Judith L Weber, PhD, RD