

# wellness-cv connection

An e-newsletter from the Wellness CV RDs Subunit

Sports,  
Cardiovascular,  
and Wellness  
Nutrition  
a dietary practice group of the  
Academy of Nutrition  
and Dietetics

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## A Message From the Directors

Spring is here...finally! I encourage you to take time to look through this recent newsletter. It has some very useful information that will be helpful in your practice. In fact, I tell Ellen Aberegg that I (Judy) have a full-time job in cardiac rehabilitation (CR) thanks to her! She did an excellent webinar for the American Association of Cardiovascular and Pulmonary Rehabilitation on the role of the dietitian in cardiac rehabilitation a couple of years ago. She mentioned that insurance coverage for nutrition services could be obtained by a CR program through non-EKG billing code 93797, and that was enough to talk our CR program director into hiring me full time! (*Talking the hospital into it took a little longer...*)

- Aberegg, along with Carol Guarino, offers additional information about various nutrition assessment tools and education used within cardiac rehabilitation programs in an article in this issue. They discuss the use of this information for individual counseling and group classes; and they mention that there is a committee currently assessing the best tools, and recommendations should follow this year.
- Also included in this issue is an article on turmeric. It provides some great hands-on information for incorporating this "hot" spice into daily consumption. On the cooler side, you can also read more about the benefits of raspberries in this issue. For one of the days during CR Appreciation Week, I made yogurt parfaits with (partially) frozen raspberries on top. What a hit!

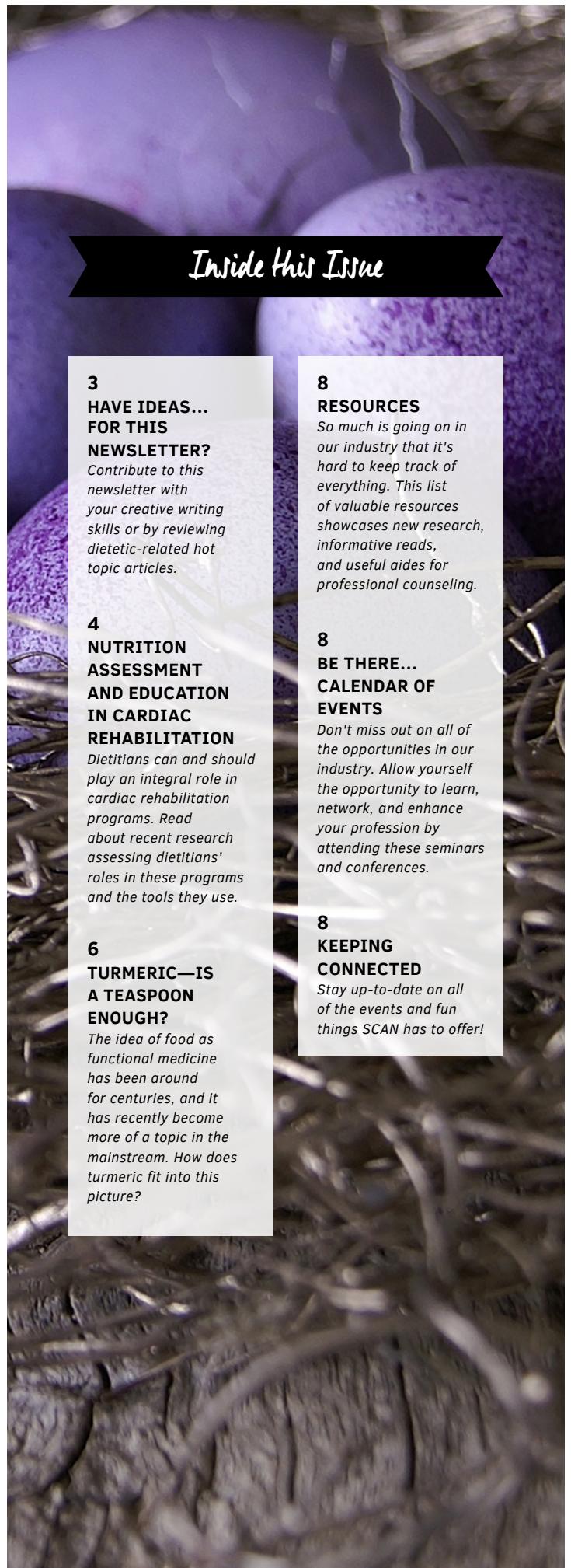
Remember to take time to check out the Resources section, to expand your educational tools, and the Calendar of Events, for opportunities to update your skills. I encourage you to also look at the SCAN website for available, up-to-date webinars. Finally, if you haven't already, please join our electronic mailing list (EML). Using the EML allows you to connect with RDNs across the country to discuss/tackle any wellness/cardiovascular nutrition challenge!

See page 3 for how to join.

Healthy Regards,

*Judy Hinderliter, MPH, RDN, LDN, CPT + Amanda Clark, MA, RDN, CHES*





## Inside this Issue

# Have Ideas...For This Newsletter?

We are always looking for talented professionals to join our team. If you feel that you have the knack for writing and would like to see your name in our newsletter, send inquiries to **Rebecca Rebmann** (managing editor) at [rebecca.a.rebmann@gmail.com](mailto:rebecca.a.rebmann@gmail.com) or **Allison Knott** (assistant editor) at [allisonknott@gmail.com](mailto:allisonknott@gmail.com). Don't want to write, but still want to contribute? We are also looking for reviewers for articles submitted to the newsletter. If you believe your experience qualifies you as an "expert" in a particular topic area, send us an e-mail describing your qualifications, and we will match you with an article when the opportunity arises. Have a topic you'd like to see covered in the newsletter? Send that along too!

*Publication in the newsletter does not indicate endorsement by SCAN or the Academy.*



If you're not already participating in our subunit electronic mailing list (EML), you can find more information about how to sign up and how to change settings here: <http://www.scandpg.org/benefits-of-scan-membership/electronic-mailing-list/>. You can also find important guidelines for the use of material posted to the EML on the SCAN website.

### 3 HAVE IDEAS... FOR THIS NEWSLETTER?

*Contribute to this newsletter with your creative writing skills or by reviewing dietetic-related hot topic articles.*

### 4 NUTRITION ASSESSMENT AND EDUCATION IN CARDIAC REHABILITATION

*Dietitians can and should play an integral role in cardiac rehabilitation programs. Read about recent research assessing dietitians' roles in these programs and the tools they use.*

### 6 TURMERIC—IS A TEASPOON ENOUGH?

*The idea of food as functional medicine has been around for centuries, and it has recently become more of a topic in the mainstream. How does turmeric fit into this picture?*

### 8 RESOURCES

*So much is going on in our industry that it's hard to keep track of everything. This list of valuable resources showcases new research, informative reads, and useful aides for professional counseling.*

### 8 BE THERE... CALENDAR OF EVENTS

*Don't miss out on all of the opportunities in our industry. Allow yourself the opportunity to learn, network, and enhance your profession by attending these seminars and conferences.*

### 8 KEEPING CONNECTED

*Stay up-to-date on all of the events and fun things SCAN has to offer!*

# Nutrition Assessment and Education in Cardiac Rehabilitation

By Ellen Schaaf Aberegg, MA, LD, RDN, and Carol Guarino, MS, RD, CDE

In September 2015, SCAN members, Ellen Aberegg, MA, LD, RDN, and Carol Guarino, MS, RD, CDE, presented "Linking Nutrition Resources to Nutrition Education in Cardiac Rehabilitation" at the 30th Annual American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR) meeting in Washington, DC. The presentation focused on describing the unique qualifications of a registered dietitian nutritionist to provide nutrition services, how to receive funding (using different billing codes), current nutrition guidelines supported by evidence-based research, and diet tools and resources non-dietitian health care providers could use. Helpful apps for mobile electronics and targeted class goals (iPEEP: interesting, Prioritize, Engaging, Essential, Practical) were described, along with other means of experiential education such as sugar, salt, and fat tubes; bulletin boards; food demos; and grocery tours.



## Preparing for the Assessment

To prepare for this presentation to an audience of primarily exercise physiologists, nurses, and physicians, a survey was sent to known dietitians working in the field of cardiac rehabilitation, members of SCAN's Cardiovascular/Wellness List Group, and members of the Ohio AACVPR (with intention for them to forward to the dietitians in their programs).

THE PRESENTATION DEMONSTRATED THE NEED FOR DIETITIANS TO BE INVOLVED WITH CARDIAC REHABILITATION PROGRAMS



## Assessment Results

Of the 37 dietitian responses received, 92% were involved currently in cardiac rehabilitation inpatient or outpatient.

- Forty-six percent used the Rate Your Plate food frequency questionnaire in their assessment of participant's diet intake, and 19% used the Diet Habit Survey.
  - Other tools used (by no more than 2 respondents each) included PNI (Prognostic Nutritional Index), USDA Super Tracker, Diet Fat Screener, MEDFICTS (Meats, Eggs, Dairy, Fried foods, fat In baked goods, Convenience foods, fats added at the Table, and Snacks), WFU (Wake Forrest University) Diet Pattern, or individualized diet history or records.
  - This information was used 78% of the time for clinical patient assessment, 27% for program certification, 27% as criteria for referral to a dietitian, 19% for use in creating an individualized treatment plan, and 8% for registry purposes. (More than one answer was allowed).
  - Eighty four percent of the time the resultant information was also used to prepare for one-on-one counseling, and 48% for group education classes.

- Within 97% of the programs, handouts were the primary mode of information communication. They were derived from original handouts (60%), downloads from the internet (57%), brand name resources (35%), and the AND Nutrition Care Manual (11%).
- Hands on resources used included nutrition models (68%), food labels (78%), food demos (38%), and grocery tours (3%).

## Insurance Information

Insurance coverage for nutrition services can be obtained by the cardiac rehabilitation program through non-EKG billing code 93797. Twenty five percent of the respondents stated that their program uses this billing code to cover dietitian services and/or education classes. Eighteen percent of respondents stated the Nutrition Services Department (NSD) charged for the services, and 6% stated the hospital billed through other means. Fifty percent stated that the resources of the cardiac rehabilitation program provided the means for nutrition consult, and the other 50% by other departments including NSD.



## Final Takeaways

Overall, the presentation demonstrated the need for dietitians to be involved with cardiac rehabilitation programs, and the response from the audience was overwhelming. Collaborative efforts are clearly needed to train health care peers in nutrition guidelines, nutrition competencies, and experiential nutrition education. The information learned from the survey responses is also being used by the SCAN/AACVPR joint committee assessing the best nutrition tools for use in cardiac rehabilitation programs, and recommendations for these tools are expected to be introduced in 2016.

## AUTHORS' BYLINES

**Ellen Schaaf Aberegg, MA, LD, RDN,** graduated from The Ohio State University and has worked in the cardiac rehabilitation field as dietitian, exercise physiologist, and/or manager for 33 years. She is active in state and national AACVPR.

**Carol Guarino, MS, RD, CDE,** conducts nutrition assessments, clinical counseling, and education at the Helen Hayes Hospital Cardiac Rehab program. She is a specialist in diabetes and child, teen, and adult weight management, and she is an adjunct professor at the University of Phoenix.

## Reference:

Aberegg E and Guarino C. Linking nutrition resources to nutrition education in cardiac rehabilitation. Presented at: 30th Annual Meeting of the American Association of Cardiovascular and Pulmonary Rehabilitation; September 11, 2015; Washington, DC.



# Get Razzed About Frozen Raspberries!



## TOP TEN FACTS ABOUT FROZEN RASPberries

- ❖ 80 calories per cup
- ❖ One of the lowest natural sugar content compared to other berries
- ❖ More fiber than any other berry: 9 grams per cup or 36% daily value
- ❖ High in vitamin C, providing 60% Daily Value per cup
- ❖ Frozen at the peak of ripeness
- ❖ Packed with phytochemicals that may help slow the aging process and may reduce the risk of certain diseases
- ❖ Offers convenience and consistent quality right out of the freezer
- ❖ No waste or spoilage
- ❖ Available year-round
- ❖ Contains no added sugar or preservatives

National Processed Raspberry Council  
[redrazz.org](http://redrazz.org)

# Turmeric—Is a teaspoon enough?

By Elizabeth Goldstein, MS, RDN, CDN

Interest and awareness in alternative medicine—including food as functional medicine—is growing at an exponential rate. Unfortunately, in the realm of functional nutrition, scientists often do not yet have a precise answer to the question “How much is enough?” Yet, as dietitians, we are often faced with answering questions about this fast growing segment of nutrition. How turmeric functions in the body is one example of this evolving, complex, and compelling aspect of dietetics.



Turmeric is made from the root of the turmeric plant, grows in India and Indonesia, and is a member of the ginger family.<sup>1,2</sup> It is often an ingredient in curry dishes from South Asia and the Middle East; is used as a yellow coloring agent in mustard, cosmetics, and other products; and has been used for centuries in India for its healing properties.<sup>2-4</sup>



The most active component in turmeric is curcumin.<sup>2,3</sup> It is this curcuminoid

that is associated with turmeric's possible healing properties. The spice may have potent anti-inflammatory and anti-cancer properties and may also decrease cramping.<sup>2-4</sup> It has been studied and/or used in disease prevention and treatment of conditions including inflammatory bowel disease, cancer, arthritis, Alzheimer's disease, asthma, cystic fibrosis, cardiovascular disease, allergies, psoriasis, and diabetes.<sup>2,3</sup>

The impact turmeric may have on different diseases poses some interesting questions. Is it safe? Are there dosing recommendations? Can a person eat enough to reap the possible rewards, and is that amount palatable to different ethnic cultures? What, if anything, affects its bioavailability?

**ALTHOUGH TURMERIC HAS BEEN USED FOR CENTURIES IN CERTAIN CULTURES AND IN AYURVEDIC AND CHINESE MEDICINE, AND RESEARCH SUGGESTS ITS POSSIBLE BENEFITS, PRESENTLY THERE ARE NO STANDARD RECOMMENDATIONS.**<sup>3-5</sup>

One set of usage guidelines, offered by the University of Maryland Medical Center Website, suggests the following servings<sup>5</sup>:

- Cut root: 1.5 to 3 g/d
- Dried, powdered root: 1 to 3 g/d
- Standardized powder (curcumin): 400 to 600 mg, TID
- Fluid extract (1:3): 30 to 90 drops/d
- Tincture (1:2): 15 to 30 drops, 4 times/d

When recommending turmeric, some potential treatments and conditions that should be considered include<sup>2,3,5,6</sup>:

- Anticoagulant/Antiplatelet drug therapy, due to turmeric's ability to decrease platelet aggregation
- Diabetic drugs, due to an increased risk of hypoglycemia

- Stomach ulcers, due to a possible increase in stomach acid
- Gallbladder disease, gallstones, or obstruction of the bile passages
- Drugs that reduce stomach acid
- Pregnant and lactating women
- Cystic fibrosis
- Chemotherapy, due to possible pro-oxidant activity
- Gastric distress with greater intakes of turmeric

Although turmeric in food is generally considered safe, it is not always well absorbed.<sup>2,7</sup> Ways to increase absorption and bioavailability include using bromelain and piperine.<sup>2,5</sup> In addition, it may be difficult to consume the suggested amounts listed earlier. Some suggestions to help your clients increase turmeric intake include choosing mustards based on their bright yellow color; adding turmeric powder to protein shakes, smoothies, juices, and drinks—Executive Chef of Edi and the Wolf, Eduard Frauneder, adds turmeric juice to his mulled wine<sup>8</sup>—and using portable items that contain turmeric. Additionally, providing clients with simple recipes for sauces and dishes, in addition to curry recipes, is an excellent starting point. While clients may have preconceived notions about turmeric, with some creativity—one of the many skills required of dietitians—an increase in turmeric consumption is possible.

AS DIETITIANS, WE ARE OFTEN FACED WITH ANSWERING QUESTIONS ABOUT THIS FAST GROWING SEGMENT OF NUTRITION. HOW TURMERIC FUNCTIONS IN THE BODY IS ONE EXAMPLE OF THIS EVOLVING, COMPLEX, AND COMPELLING ASPECT OF DIETETICS.

## AUTHOR'S BYLINE

**Elizabeth Goldstein, MS, RDN, CDN,** received her Master of Science in Clinical Nutrition from New York University and a Geriatric Scholar Certificate from Columbia University. She is the owner of EG Nutrition in New York City, where she specializes in weight management and wellness. Elizabeth can be reached at egnutrition@yahoo.com.

## References:

1. Arthritis Foundation. Turmeric. <http://www.arthritis.org/living-with-arthritis/treatments/natural/supplements-herbs/guide/turmeric.php>. Accessed February 1, 2016.
2. Oregon State University Linus Pauling Institute Micronutrient Information Center. <http://lpi.oregonstate.edu/mic/dietary-factors/phytochemicals/curcumin>. Accessed February 1, 2016.
3. Aggarwal B, Harikumar K. Potential therapeutic effects of curcumin, the anti-inflammatory agent, against neurodegenerative, cardiovascular, pulmonary, metabolic, autoimmune and neoplastic diseases. *Int J Biochem Cell Biol.* 2009;41(1):40-59.
4. Prasad S, Aggarwal BB. Chapter 13. Turmeric, the golden spice. From traditional medicine to modern medicine. In: Benzie IFF, Wachtel-Galor S, eds. *Herbal Medicine: Biomolecular and Clinical Aspects*. 2nd ed. Boca Raton, FL: CRC Press/Taylor & Francis; 2011.
5. University of Maryland Medical Center. Turmeric. <https://umm.edu/health/medical/altmed/herb/turmeric>. Accessed February 1, 2016.
6. Nebille K, Ecker M. Spice interactions. *Food & Nutrition.* 2015;19-20.
7. Gupta S, Patchva S, Aggarwal B. Therapeutic roles of curcumin: lessons learned from clinical trials. *AAPS J.* 2013;15(1):195-218.
8. Arter N. Top chefs share their favorite holiday cocktails. Delicious ingredients and surprising mixes. *Observer.* <http://observer.com/2015/12/top-chefs-share-their-favorite-holiday-cocktails/#slide6>. Accessed February 1, 2016.



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Tate & Lyle, a global provider of ingredients and solutions to food, beverage and other industries, invests in research and innovation to help meet today's nutrition, health and wellness needs by addressing sodium and calorie reduction as well as fiber and protein enrichment in food and beverages. Tate & Lyle works with its customers to make food healthier and tastier, creating extraordinary food for consumers. To learn more about Tate & Lyle, visit [www.tateandlyle.com](http://www.tateandlyle.com) or [www.foodnutritionknowledge.info](http://www.foodnutritionknowledge.info).

## Resources

by Crystelle Fogle, MBA, MS, RD



### American Diabetes Association (ADA) ([www.diabetes.org](http://www.diabetes.org))

Ever heard of National Get Fit Don't Sit Day, which is May 4, 2016? To celebrate this awareness day, check <http://www.diabetes.org/in-my-community/wellness-lives-here/mission-engagement-days/> for information on ADA's free e-Toolkit.

### American Heart Association (AHA)/ American Stroke Association (ASA) ([www.heart.org](http://www.heart.org))

Everything your patients want to know about cardiovascular conditions, treatment and tests, and risk reduction—all in downloadable, easy-to-read fact sheets. Search "Answers by Heart Fact Sheets."

### CardioSmart ([www.cardiosmart.org](http://www.cardiosmart.org))

For online resources to help patients with smoking cessation, click on the Healthy Living tab and scroll down to Stop Smoking. If patients need an incentive to focus on cardiovascular prevention, they can earn CardioSmart points and then redeem their points for fitness items at the online CardioSmart Store. For details, see <https://www.cardiosmart.org/Help/CardioSmart-Dollars/How-can-I-earn-points>.

### Measure Up Pressure Down ([www.measureuppressuredown.com](http://www.measureuppressuredown.com))

If your clinic is interested in best practices for blood pressure control, see the online Provider Toolkit created by the American Medical Group Foundation and the American Medical Group Association. From the home page, click the FIND Tools & Resources tab and select Provider Toolkit. The website also offers recorded webinars and success stories.

### National Diabetes Education Program (NDEP) (<http://ndep.nih.gov>)

NDEP offers numerous plain-language online materials for patients with diabetes. For a listing, search on the phrase "This publication has been reviewed by NDEP for plain language principles."

### National Stroke Association (NSA) ([www.stroke.org](http://www.stroke.org))

Stroke survivors can join the National Stroke Association's Come Back Strong movement and sign up for monthly updates. See [www.comebackstrong.org](http://www.comebackstrong.org) for more information.

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## Be There... Calendar of Events



### APRIL 2-6, 2016

Experimental Biology (EB) 2016  
San Diego, CA

For information: [experimentalbiology.org/2015/Home.aspx](http://experimentalbiology.org/2015/Home.aspx)

### APRIL 8-10, 2016

Don't miss the exciting 32nd Annual SCAN Symposium, *Prescription for Sustainable Health, Performance and Practice*, at the Hilton Portland and Executive Tower, Portland, OR. Register today!



For information: [www.scandpg.org/2016-symposium](http://www.scandpg.org/2016-symposium)

### MAY 31-JUNE 4, 2016

ACSM Annual Meeting, World Congress on Exercise is Medicine®, and World Congress on the Basic Sciences of Exercise Fatigue Boston, MA

For information: [www.acsannualmeeting.org](http://www.acsannualmeeting.org)

### JUNE 25-29, 2016

National Wellness Conference  
St. Paul, MN

For information: [National Wellness Institute](http://NationalWellnessInstitute.org), [www.nationalwellness.org](http://www.nationalwellness.org)

### JULY 6-24, 2016

CDR Sports Dietetics Specialty Examination (at various US sites). Postmark deadlines for applications are **April 22-May 31, 2016** (application fee rises with later postmark).

For information: [Commission on Dietetic Registration](http://CommissiononDieteticRegistration.org): [www cdrnet.org](http://www cdrnet.org)

## Keeping Connected



Join the Wellness/Cardiovascular subunit! This subunit was created to provide enhanced member involvement, networking, visibility, professional growth, and leadership development in the practice areas of wellness and cardiovascular nutrition. The concerted efforts of the Wellness/CV RDs will serve to expand our expertise and give SCAN members a broader scope of recognition. You can join the subunit free of charge as a benefit of SCAN membership.

Visit [www.scandpg.org](http://www.scandpg.org); sign in to the Members Only section; click on My Profile; under Subunits, check the Wellness and Cardiovascular RDs (Wellness/CV) box. While you are signed in, please join our electronic mailing list! Go to About Us; click on Benefits of SCAN Membership; and click "here" on the third item. This is a great way to connect with other Wellness/CV RDs. If you wish to volunteer, visit this link [www.tinyurl.com/277ms2x](http://www.tinyurl.com/277ms2x). We would love to have you!

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