

**DIET MANUAL
FOR THE
CARIBBEAN**

*Caribbean Food and Nutrition Institute
Kingston 7, Jamaica.*

*Pan American Health Organization
Pan American Sanitary Bureau
Regional Office of the World Health Organization*

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Caribbean Food and Nutrition Institute
1980

The Caribbean Food and Nutrition Institute (CFNI), founded in 1967, has as its goal the improvement of the food and nutrition situation in the seventeen member countries¹ through five types of activity: service; education and training; information dissemination; coordination and research. Each activity is carried out in close collaboration with the Governments.

CFNI is a Pan American Health Organization (PAHO) Centre. PAHO represents the World Health Organization in the Region of the Americas. The Institute is responsible to an Advisory Committee on Policy, on which the member Governments form the majority.

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INTRODUCTION TO INDIVIDUAL DIET PLANS

Notes to the Diet Counselor

Meal plans must be based on needs of individuals such as weight, occupation and activity. Wherever possible a diet history should be taken prior to distribution of the diet plan and every effort made to individualize the diet. Typical questions might be "Do you eat all your meals at home? Do you carry a lunch from home? Do you eat in restaurants? What do you eat when you are ill?" The diet counselor also needs to know the foods the patient prefers, the food the family eats, shopping habits and how much money the patient budgets for food.

Meal plans should reflect current concepts in the dietary management of diabetes, i.e., concern for total caloric intake and for modifications of fat intake. Saturated fat has been associated with an increase in blood cholesterol - a possible risk factor in coronary heart disease. The doctor may advise a reduction of foods high in this kind of fat. You then may advise substituting foods containing this kind of fat.

The following are presented as *SAMPLES ONLY* and should never be given without prior consultation with the attending physician. The importance of adapting the plan to suit the patient's lifestyle cannot be overemphasized.

1,000 CALORIE DIABETIC DIET

YOUR MORNING MEAL

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	1 tsp.
Coffee or tea with		1 cup
Skim milk	List 5	½ cup (2 level tbsp. pwd. skim milk)

YOUR EVENING MEAL

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	1 serving
Margarine/butter/fat	List 6	1 tsp.
Dark green leafy vegetables	List 3A	As desired
Skim milk	List 5	½ cup (2 level tbsp. pwd. skim milk)

YOUR NOON MEAL

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	1 tsp.
Rice or substitute	List 1A	1 serving
Yellow and other vegetables	List 3B	1 serving
Dark green leafy vegetables	List 3A	As desired
Juice (unsweetened) or fruit	List 4	1 serving

YOUR BEDTIME SNACK

Juice (unsweetened) or fruit	List 4	1 serving
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NOTE:

Please check pages 17 - 34 of your booklet for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that ½ cup cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 1 cup of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

YOUR MID-AFTERNOON SNACK

Juice (unsweetened) or fruit	List 4	1 serving
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1,200 CALORIE DIABETIC DIET

YOUR MORNING MEAL

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	1 tsp.
Coffee or tea with		1 cup
Milk	List 5	2 tbsp. pwd. or ½ reg. milk

YOUR MID-MORNING SNACK

Fruit juice (unsweetened)	List 4	1 serving
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YOUR NOON MEAL

Meat or substitute	List 5	1 serving
Oil for cooking	List 6	2 tsp.
Rice	List 1A	½ cup
Dark green leafy vegetables	List 3A	As desired
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

YOUR MID-AFTERNOON SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

YOUR EVENING MEAL

Meat or substitute	List 5	1 serving
Bread or substitute	List 1A	1 serving
Margarine/butter/fat	List 6	1 tsp.
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Coffee or tea with		1 cup
Milk	List 5	3 tbsp. pwd. or ¾ cup reg. milk.

YOUR BEDTIME SNACK

Hot beverage with		1 cup
Milk	List 5	2 tbsp. pwd. or ½ cup reg. milk

NOTE:

Please check pages 17 - 34 of your booklet for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that ½ cup cooked rice and 1 serving of ground provisions, e.g. yam, can be replaced by 1 cup of rice or 2 servings of ground provisions, e.g. yam and sweet potato.

1,500 CALORIE DIABETIC DIET

YOUR MORNING MEAL

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	2 tsp.
Coffee or tea with		1 cup
Milk	List 5	3 tbsp. pwd. milk or $\frac{3}{4}$ cup reg. milk

YOUR MID-MORNING SNACK

Fruit e.g. banana or other fresh fruit - e.g. orange	List 4	$\frac{1}{2}$ only 1 small
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YOUR NOON MEAL

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	1 tsp.
Green banana or substitute	List 1B	1 serving
Rice or substitute	List 1A	1 serving
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

YOUR MID-AFTERNOON SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuit (water type)	List 1A	3 only

YOUR EVENING MEAL

Meat or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	2 tsp.
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Coffee or tea with		1 cup
Milk	List 5	2 tbsp. pwd. or $\frac{1}{2}$ cup reg. milk

YOUR BEDTIME SNACK

Milk	List 5	$\frac{1}{2}$ cup regular
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NOTE:

Please check pages 17 - 34 of your booklet for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that $\frac{1}{2}$ cup cooked rice and 1 serving of ground provisions, e.g. yam, can be replaced by 1 cup of rice or 2 servings of ground provisions, e.g. yam and sweet potato.

1,800 CALORIE DIABETIC DIET

YOUR MORNING MEAL

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	3 servings
Butter or other fat	List 6	1 tbsp.
Coffee or tea with		1 cup
Milk	List 5	2 tbsp. pwd. or $\frac{1}{4}$ cup reg. milk

YOUR MID-MORNING SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

YOUR NOON MEAL

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	2 tsp.
Green banana or substitute	List 1B	1 serving
Rice	List 1A	$\frac{1}{4}$ cup
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

YOUR MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

YOUR EVENING MEAL

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	2 tsp.
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	$\frac{1}{4}$ cup
Coffee or tea with		1 cup
Milk	List 5	2 tbsp. pwd. or $\frac{1}{4}$ cup reg. milk

YOUR BEDTIME SNACK

Milk	List 5	1 cup
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NOTE:

Please check pages 17 - 34 of your booklet for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that $\frac{1}{4}$ cup cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 1 cup of rice *or* 2 servings of ground provisions, e.g., yam and sweet potato.

2,000 CALORIE DIABETIC DIET

YOUR MORNING MEAL

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	3 servings
Margarine/butter/fat	List 6	1 tbsp.
Coffee or tea with		1 cup
Milk	List 5	$\frac{3}{4}$ cup or 3 tbsp. pwd. milk

YOUR MID-MORNING SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type)	List 1A	3 only

YOUR NOON MEAL

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	1 tbsp.
Ground provisions	List 1B	1 serving
Rice or substitute	List 1A	1 serving
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Juice (unsweetened)	List 4	1 serving

YOUR MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	1 serving
Biscuits (water type or cream cracker type)	List 1A List 1A	6 only or 3 only

YOUR EVENING MEAL

Meat or substitute	List 5	2 servings
Bread	List 1A	2 slices
Margarine/butter/fat	List 6	1 tbsp.
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	$\frac{1}{2}$ cup
Coffee or tea with		1 cup
Milk	List 5	$\frac{1}{2}$ cup reg. or 2 tbsp. pwd.

YOUR BEDTIME SNACK

Milk	List 5	1 cup regular
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NOTE:

Please check pages 17 - 34 of your booklet for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that $\frac{1}{2}$ cup cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 1 cup of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

2,000 CALORIE DIABETIC DIET

East Indian (Sample)

YOUR MORNING MEAL

Salt fish choka	List 5	¼ cup
Roti	List 1A	1 only
Ghee	List 6	1 tbsp.
Coffee or tea with Milk	List 5	¼ cup

YOUR MID-MORNING SNACK

Fresh fruit or unsweetened juice	List 4	1 cup
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YOUR NOON MEAL

Meat	List 5	2 servings
Dhal (thick)	List 2	2/3 cup
Oil for cooking	List 6	1 tbsp.
Rice	List 1A	2/3 cup
Curry Melongene/baigan	List 3A	¼ cup
Mango Anchar		As desired
Juice (unsweetened)	List 4	1 cup

YOUR MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	1 cup
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YOUR EVENING MEAL

Curry meat	List 5	2 tbsp.
Roti	List 1A	1 only
Oil for cooking	List 6	1 tbsp.
Baghi	List 3A	¼ cup
Coffee or tea with Milk	List 5	¼ cup

YOUR BEDTIME SNACK

Milk	List 5	1 cup
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NOTE:

Please check pages 17 - 34 of your booklet for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that ½ cup cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 1 cup of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

2,200 CALORIE DIABETIC DIET

YOUR MORNING MEAL

Fruit or substitute	List 4	1 serving
Egg or substitute	List 5	2 servings
Bread or substitute	List 1A	3 servings
Margarine/butter/fat	List 6	1 tbsp.
Coffee or tea with		1 cup
Milk	List 5	$\frac{1}{2}$ cup or 2 tbsp. pwd.

YOUR MID-MORNING SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type or cream cracker type)	List 1A List 1A	6 only or 3 only

YOUR NOON MEAL

Meat or substitute	List 5	3 servings
Oil for cooking	List 6	1 tbsp.
Ground provisions	List 1B	1 serving
Rice	List 1A	$\frac{1}{2}$ cup
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Juice (unsweetened)	List 4	1 serving

YOUR MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type or cream cracker type)	List 1A List 1A	6 only or 3 only

YOUR EVENING MEAL

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	1 tbsp.
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Fruit	List 4	1 serving
Coffee or tea with		1 cup
Milk	List 5	$\frac{1}{2}$ cup

YOUR BEDTIME SNACK

Milk	List 5	1 cup
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NOTE:

Please check pages 17 - 34 of your booklet for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that $\frac{1}{2}$ cup cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 1 cup of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

2,500 CALORIE DIABETIC DIET

YOUR MORNING MEAL

Egg or substitute	List 5	2 servings
Bread or substitute	List 1A	3 servings
Margarine/butter/fat	List 6	1 tbsp.
Coffee or tea with Milk	List 5	1 cup or 4 tbsp. pwd.

YOUR MID-MORNING SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type)	List 1A	6 only

YOUR NOON MEAL

Meat or substitute	List 5	3 servings
Oil for cooking	List 6	1 tbsp.
Ground provisions	List 1B	1 serving
Rice	List 1A	1 cup
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Juice (unsweetened)	List 4	2 servings

YOUR MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type)	List 1A	6 only

YOUR EVENING MEAL

Meat or substitute	List 5	3 servings
Bread or substitute	List 1A	3 servings
Margarine/butter/fat	List 6	1 tbsp.
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Coffee or tea with Milk	List 5	1 cup ½ cup or 2 tbsp.

YOUR BEDTIME SNACK

Milk	List 5	1 cup
Biscuits (water type)	List 1A	3 only

NOTE:

Please check pages 17 - 34 of your booklet for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that ½ cup cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 1 cup of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

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PREFACE

A period of sustained and concentrated effort by dietitians in the Commonwealth Caribbean has culminated in this Diet Manual which reflects the nutritional circumstances and requirements of Commonwealth Caribbean countries. This Diet Manual is intended to be a handbook to medical practitioners, professional dietitians, nutritionists, nurses and other health professionals in clinical practice in health care facilities. It is not designed for lay use.

The project was initiated in Jamaica in 1977 with the establishment of a Jamaica Committee consisting of nutritionists, dietitians, medical practitioners and the CFNI Public Health Nutritionist/Dietitian. Since all countries were in need of such a document, the project was expanded to include dietitians and physicians in other Caribbean territories and in 1978 a similar committee was formed in Trinidad.

Production of this Manual was co-ordinated by Miss Manuelita Zephirin, CFNI Public Health Nutritionist and Dietitian. The Manual aims to present diets relevant to the nutritional needs and dietary patterns of the Caribbean people. The focus is on major (nutrition-related) diseases in the Region and on those indigenous foods which can be utilized in normal nutrition and diet therapy. It is based on a recognition of the importance of diet therapy in overall patient care and on the crucial role played by diet in the management and control of identified diseases.

Dietitians welcome opportunities for consultation. It is hoped that this Manual will encourage more communication and greater co-operation between physicians, nutritionists, dietitians and other health care practitioners and that it will serve to bridge the "knowledge gap" concerning the appropriate utilization of diets in preventive and therapeutic health care.

The Manual was reviewed by an eighteen-member group (Appendix G) which met at the Caribbean Food and Nutrition Institute, Trinidad Centre, on 5-6 December 1978. These nutritionists, dietitians and physicians with specialized knowledge of the subject, considered the diets included in the draft manual and made recommendations regarding its content and organization.

We trust that this Handbook will be of value to dietitians in implementing diet orders, to physicians in prescribing diets and ultimately to the patient in modifying his diet.

Users of this Diet Manual are invited to make constructive criticism and suggestions which will greatly assist the committee whenever a revision of this document is being considered.

J. M. Gurney
Director
Caribbean Food & Nutrition Institute

ACKNOWLEDGEMENT

The co-ordinator of this project wishes to express deep appreciation to these Committee members who diligently carried out their tasks in the development of the different diets. The assistance of the participants in the December 1978 Workshop (Appendix G) in revising and refining the final document is also very much appreciated.

The initiative and enthusiasm of Mrs. Beverly Spaulding, Dietitian at the Kingston Public Hospital, Jamaica, is most gratefully acknowledged. Her vision and commitment were a source of inspiration to the co-ordinator of this project.

For comments on various drafts of the manual and for helpful advice and guidance throughout the project, the co-ordinator wishes to thank members of the Caribbean Association of Nutritionists and Dietitians whose active collaboration is always remembered with gratitude.

Appreciation is also expressed to Dr. Nancy Schwartz of the University of British Columbia, Canada, for editing the Manual.

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NORMAL NUTRITION

DAILY FOOD GUIDE

PRINCIPLES OF NORMAL NUTRITION

There are certain nutrients which are recognized as being essential for normal health and development. Any diet which is continued for a long period of time must supply these nutrients or the health of the individual may be affected. This principle applies to normal diets and to diets modified for illness. Only in acute conditions, for a short period of time, should this principle be ignored.

The Caribbean Food and Nutrition Institute has made recommendations on the daily intake of 14 nutrients in the publication Recommended Dietary Allowances for the Caribbean. In order to make the RDA a practical guide, a Daily Food Guide has been developed. Foods are grouped according to their major nutrient sources; this basic pattern forms a foundation for planning a good diet. Additional quantities of the listed foods, fats and sugars are used to meet energy requirements and to add palatability to the diet. This Daily Food Guide is used to plan menus for all diets in the Diet Manual. Modifications are made where necessary to meet specific requirements of the diet. These amounts are considered adequate for practically all healthy persons and may be excessive for many. A complete analysis of the diet to ensure that all of the recommendations of the RDA are being met is informative and valuable, but is practical only in a research setting. It is therefore necessary to consider the diet in terms of actual food eaten.

The suggested allowances are intended to meet the needs of ordinary life situations and each allowance is applicable only when the needs for energy and all other nutrients are met. They do not cover additional needs that may result from stress, drug treatment, or from pathological conditions such as severe infections, parasitism or malabsorption. They do not apply to persons recovering from malnutrition.

FOOD GROUPS

A nutritionally adequate diet is based on a wise selection of a variety of foods in moderate amounts. Nutrients required to maintain health are provided by selecting foods from the following groups to approximate the recommended number of servings.

1. STAPLE FOODS
 - i) Cereals: Bread (from whole grain or enriched flour), flour, cornmeal, cereals, macaroni, spaghetti, rice.

2.

Nutrients contributed: protein, carbohydrate, B complex vitamins.

- ii) Starchy fruits, roots, tubers and their products: "banana porridge", plantain, breadfruit, yam, Irish potato, sweet potato.

Nutrients contributed: carbohydrates, vitamins, minerals and fibre.

2. LEGUMES

Red peas, gungo/pigeon peas, black eye peas, cow peas, other dried peas and beans, peanuts.

Nutrients contributed: protein, carbohydrate, calcium and iron.

The protein in dried peas, dried beans and nuts is more efficiently utilized by the body if a cereal such as rice or protein food from an animal source is included in the same meal.

3. DARK GREEN LEAFY, YELLOW AND OTHER NON-STARCHY VEGETABLES

Callaloo, spinach, watercress, pakchoy/patchoi, string beans, pumpkin, carrot.

Nutrients contributed: carbohydrate, vitamin A, vitamin C, B complex vitamins, minerals and fibre.

Good sources of vitamin A are dark green or dark yellow vegetables.

4. FRUITS

Mango, guava, orange, grapefruit, West Indian cherry, pawpaw.

Nutrients contributed: carbohydrate, vitamin C, vitamin A (yellow fruits), B complex vitamins, minerals and fibre.

5. FOODS FROM ANIMALS

- i) Lean meat, fish, poultry, eggs, cheese, ham, sausages, sardines, liver, heart, kidney, tripe, etc.

Nutrients contributed: protein, iron, B complex vitamins and fat.

ii) Milk, fresh milk, evaporated milk, skim milk, yogurt, cheese.

250 ml (1 cup) yogurt = 250 ml (1 cup) milk

2.5 cm (1 inch) cube cheddar cheese = 125 ml ($\frac{1}{2}$ cup) milk

Nutrients contributed: calcium, protein, vitamins A & D, thiamine, riboflavin, carbohydrate and fat.

Protein equivalents:

The following are approximately equal in the amount of protein provided:

30 g (1 oz.)	lean meat, poultry, fish
1	egg
125 ml ($\frac{1}{2}$ cup)	peas, beans or lentils
30 ml (2 tbsp.)	peanut butter
60 ml ($\frac{1}{4}$ cup)	roasted peanuts, shelled
30 g (1 oz.)	cheddar cheese

6. FATS

Polyunsaturated: vegetable oils (except coconut oil), salad dressings.

Saturated: butter, margarine, bacon, salt prok, coconut oil, fat on meat, fat in whole milk

Nutrients contributed: Fat, vitamins A, D and E.

It is recommended that total fat intake be reduced and that polyunsaturated fats be consumed in place of saturated fats.

FOOD GROUP	NO. OF SERVINGS/DAY	EXAMPLES OF 1 SERVING
Staple Foods	4 or more	1 slice bread (30 g or 1 oz) 125 ml ($\frac{1}{2}$ cup) cooked cereals 125 ml ($\frac{1}{2}$ cup) starchy fruit, root or tuber
Legumes	1 or more	90 g (3 oz) cooked legumes
Dark Green leafy, yellow and other non-starchy vegetable	2 or more	125 ml ($\frac{1}{2}$ cup) cooked or 120 g (4 oz) raw
Fruits	2 or more	1 medium mango, orange, guava $\frac{1}{2}$ grapefruit, banana 125 ml ($\frac{1}{2}$ cup) juice
Foods from Animals	2 or more	60 - 90 g (2 - 3 oz) cooked meat, fish or poultry 2 eggs 60 g (2 oz) cheese 250 ml (8 oz) milk
Fats	1 or more	5 g (1 tsp) margarine, butter, oil or other fat

REGULAR DIET

DESCRIPTION

Regularly scheduled meals are planned according to the Daily Food Guide to contain the nutrients needed by the average healthy adult. The diet should be well balanced to provide nourishment and be appealing in colour, texture and flavour to encourage the patient's appetite.

INDICATIONS

The Regular Diet is indicated for patients who do not require any modifications of diet.

ADEQUACY

The diet will be adequate if the Daily Food Guide is followed. Energy needs are related to body size, age and activity level. These needs may be decreased due to lessened activity or they may be increased due to a high expenditure or to stress caused by illness, undernutrition or other factors. To decrease the energy intake, smaller portions may be offered and the amount of fats, oils and sugar used in cooking may be reduced. To increase energy, a large or second serving may be provided at meal time or as between meal snacks and additional butter, margarine, oils or sugar may be used for flavouring and in cooking.

SUGGESTED MEAL PLAN

MORNING	NOON	EVENING
Fruit or juice	Stewed Chicken	Fried Fish
Sardines	Rice & Peas	Crushed Yam
Bread	Pumpkin	Lettuce & Tomato
Margarine or Butter	Stewed Fruit	Bread Pudding
Milk		Beverage
Coffee or Tea		

ALL FOODS ARE ALLOWED; NO FOODS ARE EXCLUDED.

RECOMMENDED AMOUNTS

- Staples: Four or more servings daily; count as one serving:
125 ml ($\frac{1}{2}$ cup) cooked rice or ground provisions;
1 slice bread (30 g or 1 oz.)
- Legumes: One or more servings daily; count as one serving:
90 g (3 oz.) cooked dry beans, dry peas or lentils.
- Dark Green Leafy Vegetables: Two or more servings daily; count as one serving:
125 ml ($\frac{1}{2}$ cup) cooked or 120 g (4 oz.).
- Fruit: Two or more servings daily, count as one serving:
1 mango, $\frac{1}{2}$ grapefruit, 1 orange, 125 ml ($\frac{1}{2}$ cup) juice.
- Food from Animals: Two or more servings daily; count as one serving:
60 g (2 oz.) meat, fish or poultry, 1 egg, 30 g (1 oz.) cheese, 125 ml (4 oz.) milk.
- Fats: One or more servings daily; count as one serving:
5 ml margarine, butter, oil or other fats.

The following foods are used mainly for flavouring and contribute energy: sugar, sweets, butter, margarine, oils and other fats. These foods should be limited to amounts that will maintain ideal body weight. Spices may be used for flavouring without adding extra energy.

Iron deficiency, anemia, is a common problem among women of child bearing ages in the Caribbean. In order for women to meet the Recommended Dietary Allowance for iron, the following foods should be routinely included in the diet: legumes, meat, liver, eggs, dark green leafy vegetables, enriched bread and cereals, dried fruit, molasses and dark brown sugar.

VEGETARIAN DIET

DESCRIPTION

Vegetarian Diets may be classified as:

1. Lacto-ovo vegetarian (plant foods, dairy products and eggs)
2. Lacto-vegetarian (plant foods and dairy products)
3. Pure vegetarian or vegan (plant foods only)

INDICATION

Various forms of vegetarianism are becoming increasingly popular, especially among adolescents and young adults, and may be used for reasons based on religion, economy, life style and ecology.

ADEQUACY

Many individuals and population groups have practised vegetarianism on a long term basis and have demonstrated excellent health. Plant-based diets supplemented with milk or with milk and eggs, tend to be nutritionally similar to diets containing meats. However, the pure vegetarian diet needs careful planning to meet nutritional requirements especially in iron, calcium, riboflavin and vitamin B₁₂. Vitamin B₁₂ supplementation is indicated since there is no known plant source of this vitamin. Cooked dark green leafy vegetables can replace milk on an equal volume basis for calcium and riboflavin content. It is important to eat a wide variety of foods and to give particular attention to the combination eaten at each meal in order to supply a balanced combination of amino acids. Cereals such as rice, corn, wheat and oats complement legumes such as peas, beans and nuts. Foods which complement each other should be eaten at the same meal.

Adequate energy intake should be provided so that protein will not have to be used to meet energy needs.

The high fibre content of a well-balanced vegetarian diet is appealing to many because of the possible role of fibre in the prevention of certain diseases of the colon.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Whole grain bread and cereals, enriched rice, flour, macaroni, noodles. Starchy fruits, roots and tubers in moderation.	Refined cereals. Unenriched white rice and excesses of ground provisions.
LEGUMES	All in increased amounts especially nuts and nut-like seeds - almonds, peanuts, cashews, soy beans. Peanut butter, textured vegetable protein.	None.
DARK GREEN LEAFY, YELLOW AND OTHER NON-STARCHY VEGETABLES	All, especially large quantities of callaloo, turnip greens, cabbage, cauliflower, bhagi, spinach, mustard greens, patchoi.	None.
FRUIT	All fruits and fruit juices in increased amounts, including dried fruit.	None.
FOODS FROM ANIMALS	Increased amounts of milk, cheese, yogurt (Lacto-veg.), and eggs (Lacto-ovo veg.).	All meats, fish and poultry. All foods of animal origin, including milk, cheese and eggs (vegan).
FATS	Fortified margarine, vegetable oils, ghee and butter (Lacto-ovo-veg.), Peanut butter.	None (Lacto-ovo-veg.) Ghee (clarified butter), butter (vegan).
MISCELLANEOUS	Sweets in general, brown sugar, molasses, syrup, jelly, jam, spices and condiments. Pure vegetable soups (no meat base). Coffee, tea, carbonated beverages.	

SUGGESTED MEAL PLAN

MORNING	NOON	EVENING
Fruit	Legumes	Legumes
Staple	Staple	Staple
*Foods from Animals and/or legume	Dark Green, Leafy or Yellow Vegetable (2 servings min.)	Dark Green, Leafy or Yellow Vegetable (2 servings min.)
Fat	Fruit	Fruit
Beverage	Fat	Fat
Miscellaneous	Beverage	Beverage
	*Foods from Animals	*Foods from animals

ANYTIME SNACK: Legumes, Fruit

*LACTO VEGETARIANS may add milk and milk products as desired.

*LACTO-OVO VEGETARIANS may add milk and eggs to their diets as desired.

Vegetarian Diet

SAMPLE MENU (VEGAN)

MORNING

Fresh Orange
 Wholewheat Dhalpourri
 Bhagi
 Coffee

NOON

Split peas
 Rice/Eddoes
 Dasheen leaves
 Cabbage/carrot salad on
 watercress
 Grapefruit juice

EVENING

Curried channa (chick peas)
 and potatoes
 Wholewheat Dhalpourri
 Pumpkin
 Banana

SNACK: Peanuts and orange juice

SAMPLE MENU (VEGAN)

MORNING

Stewed prunes
 Wholewheat bread
 Peanut butter
 Honey
 Coffee

NOON

Split peas
 Spinach and rice
 Tossed salad - cabbage,
 tomato, cucumber on cress
 Pumpkin
 Grapefruit juice

EVENING

Lentil croquettes
 Potato salad with oil,
 vinegar, mustard dressing
 Dasheen leaves
 Sliced tomatoes
 Banana slices

SNACK: Peanut butter and crackers and orange juice

DIET FOR PREGNANCY

DESCRIPTION

During pregnancy there is an increased requirement for energy, protein, minerals and vitamins. This diet is designed to provide a nutrient intake to meet these needs.

INDICATIONS

This diet is indicated for the pregnant woman who requires no other dietary modifications.

Available evidence suggests that the course and outcome of pregnancy are more favourable when nutritional practices provide both mother and unborn child with adequate nutrients. Women who enter pregnancy at high nutritional risk will need additional diet counseling. Women are considered at high nutritional risk if they fall into one or more of the following categories:

1. Less than 18 years of age.
2. Intervals of less than 18 months between pregnancies.
3. Underweight or overweight prior to pregnancy.
4. Inadequate weight gain during pregnancy.
5. Low income.
6. Limited food selection.
7. Pre-existing medical complications such as diabetes mellitus, cardiovascular disease, kidney disease.
8. Restricted dietary intake for religious, social, cultural or other reasons.

WEIGHT GAIN

The average weight gain in normal pregnancy is 10.5 to 12.5 kg. This represents a gain of 0.7 to 1.3 kg. (1 to 3 lb) during the first trimester followed by a gain of 0.35 kg (0.8 lb) per week thereafter. Severe restriction of energy (intake of less than 1500 kilocalories or 6.3 MJ per day) is potentially harmful to both the mother and developing baby. It is important, however, that after pregnancy women strive to return to normal weight.

IRON AND FOLIC ACID

During pregnancy, most women need prophylactic supplementation of iron and folic acid in the recommended amounts:

Iron	60 milligrams e.g. 180 mg ferrous sulfate daily
Folic Acid	0.1 milligrams daily

SUGGESTED MEAL PLAN

The Regular Diet with the addition of one serving legumes and two servings of foods from animals.

PREGNANCY DURING ADOLESCENCE

There is increased risk when pregnancy occurs during adolescence, before growth has been completed. Special attention must be paid to meeting the individual's nutritional needs when the nutrient requirements of pregnancy are superimposed on the special demands of growth and maturation.

DIET FOR NAUSEA AND VOMITING

Women experiencing nausea and vomiting, "morning sickness", during pregnancy should be counseled to eat small, frequent, dry meals and to eat promptly when hunger is first felt. Women should be instructed to keep crackers, or other dry high carbohydrate foods near their beds to eat before rising.

Additional recommendations are:

- Eliminate fats and fatty foods until vomiting ceases.
- Avoid highly seasoned foods.
- Eat dry food separately from fluids.
- Take small frequent feedings of alternate dry and fluid foods.
- Skim milk may be substituted for whole milk when whole milk is not tolerated.
- Take fluid feeding only if previous dry feeding has been tolerated.
- Avoid any food causing nausea and/or vomiting.
- As tolerance for food increases, larger meals eaten several hours apart should be taken until the normal three meals per day pattern is re-established.

The following is a suggested daily intake plan; food should be added as tolerated to meet the recommended amounts listed in the Daily Food Guide:

SUGGESTED MEAL PLAN

Before Rising	1 or 2 plain crackers
8.00 a.m.	1 Slice toast with jelly
10.00 a.m.	Cereal with sugar and 125 ml (4 oz.) milk.
11.00 a.m.	125 ml (4 oz.) juice
12.00 noon	Lean chicken, fish or meat - small serving, baked, broiled or boiled; baked sweet or Irish potato or yam; toast and jelly - 1 slice.
2.00 p.m.	250 ml (8 oz.) milk
4.00 p.m.	125 ml (4 oz.) juice)
6.00 p.m.	Lean chicken, fish or meat - small servings, baked, broiled or boiled; rice - 125 ml ($\frac{1}{2}$ cup) cooked; toast - 1 slice
8.00 p.m.	250 ml (8 oz.) milk
10.00 p.m.	1 fruit - ripe if raw, or cooked.

If nausea and vomiting become severe and prolonged, the patient should be referred to her physician to avoid complications from lack of nutrient intake.

CONSTIPATION

If the patient complains of chronic constipation, a common discomfort of pregnancy, a high fibre diet should be recommended. Fresh, uncooked fruits and vegetables, juices, whole grain breads and cereals, plenty of water and frequent light exercise, such as walking, may be recommended. Highly refined foods, such as candy, refined breads and cereals and soft low fibre vegetables and fruits should be avoided.

DIET FOR LACTATION

DESCRIPTION

To meet the extra nutritional demands for milk production, the diet during lactation must include additional energy, protein, minerals and vitamins. This diet is adequate in all nutrients.

INDICATION

This diet is ordered during lactation.

IRON AND FOLIC ACID

During lactation, most women need prophylactic supplementation of iron and folic acid in the recommended amounts:

Iron	60 milligrams e.g. 180 mg ferrous sulfate daily
Folic Acid	300 micrograms daily

SUGGESTED MEAL PATTERN

The Regular Diet with the addition of four servings of foods from animals and/or legumes and two servings of fruit juice. Weight gain should be avoided.

DIET FOR INFANCY

a) NUTRITION FOR THE NEWBORN

DESCRIPTION

The best diet for the newborn is breast milk.

INDICATION

The diet for the newborn is breast milk unless specific contra-indications exist and are identified by the physician.

The publication "Guidelines to Young Child Feeding In The Contemporary Caribbean" states the following about breast milk:

- 1) It is adapted to the precise metabolic needs of the infant.
- 2) It is readily available and convenient.
- 3) It is low-cost. It is cheaper to provide a nutritious diet for the lactating mother than to feed the infant on artificial milk.
- 4) It possesses, in addition to its relative sterility, specific unique anti-infective properties.
- 5) It promotes an ideal, close initial mother-child relationship.
- 6) It could have a protective effect against the development of breast cancer in mothers.
- 7) To ensure acceptance of the concept of breast feeding and successful lactation among all newly delivered mothers, there should be a continuum of education on breast feeding by highly motivated health staff - including doctors, nurses and auxiliary personnel - in schools, antenatal and child welfare clinics and maternity and post-natal hospital wards. Special emphasis should be paid to the nutrition education of primiparae and vulnerable teenage mothers.
- 8) Mothers delivered in hospital are often the victims of conflicting advice received from doctors, nurses, "commercial milk" nurses, other patients, visiting relatives and friends. Concerted efforts should be made to standardize the advice given by hospital and maternal and child health clinic staff.

- 9) Following delivery, the infant should be offered breast feeding as early and at as frequent intervals as possible, using both breasts. Ideally, the infant's cot should be placed by the side of the mother's bed.
- 10) The newborn infant requires only to be breast fed to obtain necessary nutrients and water. The high protein content, excellent nutritive value, and anti-infective properties (immunoglobulins, etc.) of colostrum must be emphasized to hospital health staff and newly delivered mothers. There is no need for routine early supplementation with either milk or glucose feeds, as they decrease the baby's appetite and the vigorousness of sucking. If really indicated, boiled water can be given by spoon feeding and not by bottle.
- 11) Practicing doctors, midwives, ward sisters and all other nursing personnel, should receive intensive education in the psycho-physiology and anatomy of lactation, and in breast feeding methods. They should also be made aware that breast engorgement and mastitis are not indications for stopping breast feeding. This reorientation is especially needed in training schools for medical students, nurses, midwives and auxiliaries.
- 12) The services of successful lactation mothers should be enlisted in prenatal clinics, health centres and hospital wards, since they are more experienced with the practical aspect of breast feeding and are thus more likely to be convincing.
- 13) Breast milk alone is sufficient for the adequate nutrition of the infant up to the age of 4 to 6 months. The introduction of semi-solid foods between 4 and 6 months should be individualized, depending on the infant's requirements and the home situation.

ARTIFICIAL FEEDING

- 1) The use of glucose and water for feeding healthy infants should be discontinued. Glucose is costly and has no significant, relevant qualities compared with the cheaper cane sugar (sucrose) in cases where an addition to the energy value of a feed is desired.
- 2) Bush teas should not be used as a substitute for food. Some bush teas are harmful. Health personnel in each territory should know these and advise mothers accordingly.

- 3) Considerable emphasis should be given in all clinics to the importance of cleanliness in infant feeding. Cup and spoon are recommended but where considered necessary, the use of transparent pyrex-type thick plastic bottles is recommended, as they are easier to clean and less likely to warp with repeated boilings. Ideally, terminal sterilization (boiling bottle, containing milk mixture and with teat and cover on, for 15 minutes) should be practiced. If circumstances do not permit this method, feeds should be mixed in cooled boiled water in a previously boiled bottle and teat and used immediately after preparation. Chemical sterilization with hypochlorite solution is not recommended.
- 4) Careful serial weighing is the best way of assessing a young child's growth and nutrition. A frequently checked beam-balance scale and weight charts are essential equipment at all health centres. All health staff need training in weighing procedures, charting of weights and the interpretation of results. It should also be appreciated that an excessively fat baby is not healthy and this excess may lead to a permanent tendency to obesity in later life.
- 5) When artificial feeding of the infant up to 4 months of age has to be undertaken, the use of the lowest cost, adequately nutritious and acceptable milk-based products should be encouraged, with added sugar. This will often be a less advertised dried whole milk. It should be selected and actively promoted by those concerned with infant feeding, who should at the same time be thoroughly familiar with its use. Particular emphasis should be placed on the need for proper strength of the product and provision of adequate amounts to meet the infant's daily nutrient requirements.

VITAMIN AND MINERAL SUPPLEMENTATION

- 1) In order to increase iron stores in the infant, late clamping of the umbilical cord should be encouraged.
- 2) If the child is fed only from the breast, no vitamin or mineral supplementation is required during the first 4 months.
- 3) The use of fruit and vegetable sources of ascorbic acid, preferably home-produced, should be encouraged, although emphasis must be given to cleanliness in preparation. These include citrus fruits, guava, mango, West Indian cherry, tomato, callaloo, etc.

- 4) Distribution of low-cost iron and folic acid supplements through health clinics is recommended for all infants from 4 months to 2 years of age. Recommended intakes are 20 mg of elemental iron (approximately 60 mg of ferrous sulfate) and 0.1 mg of folic acid per day.
- 5) Flouride is a normal component of the diet and flouridation of the community water supply up to a level of 1 part per million of flourine is recommended to prevent dental caries in areas where the water contains little or none of this mineral and where the practice is feasible and safe.

ADEQUACY

Breast feeding is desirable - this is amply shown by all recent scientific data. It supplies all nutrients needed for the first 4 months of life, including water. Studies have shown that even inadequately nourished mothers provide milk of sufficient quantity and quality (protein and energy), although the vitamin levels may be low if the mothers are themselves vitamin deficient.

b) WEANING AND TRANSITION TO FAMILY DIET

- 1) Breast feeding may be continued with benefit for as long as possible and preferably for one year.
- 2) In addition to milk, human or animal, other foods should be introduced from 4 - 6 months onwards. Fruit juice would have already been introduced for the bottle-fed child.
- 3) Cereal porridges (cornmeal, rice) reinforced with milk or other available animal protein are recommended as the first semi-solid food to be given. They should be given by cup and spoon and not by bottle.
- 4) Smooth, well-cooked mixtures of other solid foods such as staple, animal products, peas and beans and dark-green and yellow vegetables should be added in gradually increasing range and quantity.
- 5) As far as possible, these ingredients should be taken from the family meal before the addition of irritant condiments, especially hot pepper. The ingredients should be soft, digestible, clean and of a fairly thick consistency.
- 6) Attention should be given to the use of pulpy, soft-fleshed foods, requiring no cooking and preferably supplying compact energy (e.g. ripe banana, avocado, etc.) and/or vitamins (pawpaw, mango, etc.).
- 7) Mothers should be advised on (a) including all food groups in the family diet, (b) using ingredients of high nutritional value in relation to cost and (c) utilizing whenever possible, produce from the home gardens.
- 8) Mothers should be convinced as to the desirability of using the entire edible portion of egg, meat, fish and sieved peas and beans rather than only selected portions such as gravies, teas or broth.
- 9) It is desirable that children by the age of one year share largely in the general family diet and generously so in reference to their special needs.

DIET FOR GERIATRICS

DESCRIPTION

Nutrition for the elderly should be, as much as possible, the same as for young adults. There is little evidence that requirements for specific essential nutrients change with advancing age.

There are special considerations in planning meals for older adults, however. The basal metabolic rate declines with age and infirmities tend to reduce activity. As a result, less food is needed to meet energy requirements and unless food choices are made with great care, the amounts of essential nutrients consumed are likely to be less than in the more active years.

Foods should be selected, using suggested meal plan for the Regular Diet as a guide in quantities indicated with the following kept in mind:

1. Food for the older person should be attractively prepared and served in such a manner as to stimulate appetites.
2. Foods may be modified in consistency to facilitate chewing. The diet must be individualized to the person's need, i.e. chopped, ground or blended.
3. Older people have well established food habits, likes and dislikes and must be encouraged to eat a balanced diet.
4. Some older people need extra fibre to prevent constipation.
5. Some older people have lost taste buds and need foods more highly seasoned than other adults.
6. Three or more meals should be served daily with no more than 14 hours between a substantial evening meal and breakfast.
7. Bedtime snacks are usually well received by most older persons.

Some foods may cause discomfort to geriatric patients. In preparing meals for them, it is important to consider each patient individually and eliminate only those foods that cause distress to him or her.

ENERGY EXPENDITURE

Energy expenditure alters with age because of changes in body weight or body composition, decrease in the basal metabolic rate, decline in physical activity and increased prevalence of disease and disabilities. Several of these changes may occur from age 40 onwards. Therefore, the level of requirements for the older age group was determined as the following percentages of the requirements of adults 20 - 39 years of age:

<u>Age</u>	<u>Percentage Adjustment</u>
40 - 49 years	95
50 - 59 years	90
60 - 69 years	80
70 years and over	70

CONSISTENCY

AND

TEXTURE MODIFICATIONS

CLEAR FLUID DIET

DESCRIPTION

The Clear Fluid Diet provides nourishment in the fluid state, which will leave little residue in the colon, is non-irritating and will be easily absorbed with a minimum of digestive activity.

No milk products are included.

The foods are liquid or will become liquid at room and body temperature.

A Clear Fluid Diet is used only for short periods of time during acute conditions or post-operatively. This diet is inadequate in all nutrients except Vitamin C and should not be used over extended periods of time without supplementation.

INDICATIONS

This diet is used pre-operatively, post-operatively in the acute stages of many illnesses, especially in febrile conditions and in conditions where it is necessary to minimize the amount of fecal materials in the colon.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	None	All kinds
LEGUMES	None	All kinds
DARK GREEN, LEAFY AND YELLOW VEGETABLES	None	All kinds
FRUITS	Apple juice and strained fruit juices	Fruit juices with pulp, all fruit
FOODS FROM ANIMALS	Consomme or clear broth (beef, chicken or fish)	All other including milk and milk drinks
FATS	None	All kinds

FOOD GROUP

FOODS ALLOWED

FOODS TO AVOID

MISCELLANEOUS

Weak tea and coffee,
decaffeinated coffee,
cereal beverages,
clear fruit flavoured
beverages, strained
lemonade, clear
gelatin, carbonated
beverages.

All puddings, all
other beverages,
ice cream, etc.

SAMPLE MENU

MORNING

Juice
Weak tea or
Coffee

Mid-morning: Juice

NOON

Juice
Clear broth
Gelatin
Tea

Mid-afternoon: Tea

NIGHT

Juice
Clear broth
Gelatin
Tea

Bedtime: Juice

FULL FLUID DIET

DESCRIPTION

The Full Fluid Diet provides nourishment in the fluid state and consists of a variety of foods which are liquid or semi-liquid at room and body temperature and are easily digested and non-irritating.

Milk and milk products are included but will provide a moderate amount of residue in the colon.

INDICATIONS

The Full Fluid Diet may be used following surgery, for conditions of acute infections and for any patient who has difficulty chewing or swallowing or is too ill to eat solid or semi-solid foods.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Strained thin porridge	All other
LEGUMES	None	All
DARK GREEN LEAFY AND YELLOW VEGETABLES	Vegetable juice, pureed vegetables in soups	All other
FRUITS	All fruit juices	All other
FOODS FROM ANIMALS	Milk, milk drinks, plain yogurt, eggs in custards and egnogs, consomme, clear broth (beef, chicken or fish)	All other
FATS	Butter, margarine, oil	All other

Full Fluid Diet

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FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
MISCELLANEOUS	Coffee, tea, decaffeinated coffee, cereal beverages, carbonated beverages, fruit flavoured beverages, gelatin desserts, smooth ice cream, cornstarch puddings, popsicles, sugar, salt, flavourings, e.g. chocolate syrup, cocoa, nutmeg.	All other beverages, puddings

SAMPLE MENU

MORNING

Juice
Cereal
Milk
Cocoa

NOON

Juice
Strained soup
Ice cream
Tea

NIGHT

Juice
Strained soup
Gelatin with
cream
Milk
Coffee

Mid-morning: Eggnog

Mid-afternoon: Yogurt

Bedtime: Milk

Full Fluid Diet

SOFT DIET

DESCRIPTION

The Soft Diet is composed of foods which are lightly seasoned, easy to chew, swallow and digest. All meats are minced and soft textured vegetables and fruits are served.

INDICATIONS

This diet can be used as a transitional diet, between the Liquid Diet and the Regular Diet, during convalescence.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Porridge such as corn-meal, banana, cream of wheat, farina, oatmeal, white bread, crix, mashed well cooked white or sweet potatoes, tannia, yam, spaghetti, macaroni, noodles, rice	All other porridge. Whole wheat bread or biscuits, roti. All other ground provisions.
LEGUMES	None	All kinds
DARK GREEN LEAFY AND YELLOW VEGETABLES	All vegetable juices, well cooked pumpkin, carrots, christophene/ chocho	All raw vegetables All other cooked vegetables.
FRUITS	All fruit juices. All soft low fibre fruits, e.g. raw ripe banana, pawpaw. All other fruit should be well cooked and pureed or mashed	All other raw fruit, dried fruit.
FOODS FROM ANIMALS	All meat and poultry should be finely minced. All fish should be flaked. Egg - soft or hard cooked, poached, scrambled. Milk, milk beverages, cheese	Any meat, fish or poultry not prepared as indicated, shell fish. All fatty meat. Fried eggs.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FATS	Butter, margarine, oil, lard, vegetable shortening, salad dressing. Coffee, tea, decaffeinated coffee, cereal beverages, plain cornstarch puddings, custards, ice cream, gelatin desserts, plain soft cakes and cookies, popsicles, sugar, ketchup, cream soups, consomme, broth (beef, chicken or fish), salt, mild flavourings, chocolate, cocoa.	Fried foods. All other beverages and pastries. Any dessert containing nuts, raisins, coconut or fruit not allowed. Pepper, nuts, coconut, mustard.

SUGGESTED MEAL PLAN

MORNING

1 Serving Fruit or Juice
Bread or cereal
1 Egg or Substitute
10 ml butter or margarine
10 ml Jelly
Beverage

NOON AND EVENING

60 g Meat or Substitute
Staple foods as allowed
Dark green leafy and yellow
vegetables as allowed
Fruit or dessert as allowed
Beverage

Soft Diet

SAMPLE MENU

MORNING

Juice
Poached/boiled egg
Bread (no crust)
Margarine
Coffee
Milk

NOON

Minced beef
Steamed Pumpkin
Mashed tannia
Custard
Lemonade or juice

EVENING

Steamed fish
Carrots
Bread (no crust)
Margarine
Gelatin
Milk

LIGHT DIET

DESCRIPTION

The Light Diet consists of foods which are tender, but not ground or pureed. Whole meats, cooked vegetables and fruits of moderate fibre content are allowed.

INDICATIONS

The diet is suitable for patients who cannot tolerate highly seasoned, fried or raw foods. It is sometimes used as a transition between the Full Fluid or Soft Diet and the Regular Diet.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	White or brown bread, salt biscuits, porridge, white or sweet potatoes, yam, tannia, spaghetti, macaroni, noodles, rice	Sweet bread with raisins and nuts, nut bread, all other staples.
LEGUMES	None	All
DARK GREEN LEAFY, YELLOW AND OTHER NON-STARCHY VEGETABLES	All vegetable juices, tender, cooked or canned vegetables including beets, carrots, pumpkin, christophene	All other raw or cooked vegetables
FRUITS	All fruit juices; raw ripe banana and pawpaw. All other fruit should be well cooked and seedless	All other raw and dried fruit
FOODS FROM ANIMALS	Baked, broiled, roasted or stewed tender beef, lamb, veal, liver, chicken, turkey; all canned fresh or frozen fish; cheese; eggs - baked, poached, scrambled, soft or hard cooked. Milk and milk beverages.	Fried, highly seasoned or pickled meats. Fatty meats; fried eggs.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FATS	Butter, margarine, vegetable shortening, oils, lard, mild salad dressings, avocado	Fried foods
MISCELLANEOUS	Coffee, tea, decaffeinated coffee, cereal beverages Plain cake or cookies. Plain puddings, smooth ice cream, gelatin desserts, pastries made with foods allowed, sugar Salt, mild flavourings cocoa, smooth peanut butter	Desserts containing nuts, coconut, dried fruit or fruits with small seeds Pepper, mustard, nuts, coconut, popcorn

SUGGESTED MEAL PLAN

MORNING

1 Serving fruit or juice
 Bread or cereal
 Egg or substitute
 Butter or margarine
 Coffee

NOON AND EVENING

60 g Meat or substitute
 Staple foods as allowed
 Dark green leafy or yellow
 vegetable as allowed
 Fruit or dessert as allowed
 Tea

SAMPLE MENU

MORNING

Juice
 Poached Egg
 Bread
 Margarine
 Jelly
 Beverage

NOON

Sliced steamed chicken
 Carrots
 Mashed ground
 provisions
 Gelatin
 Beverage

EVENING

Hamburger Pattie
 Green beans
 Bread
 Margarine
 Beverage

BLAND DIET

DESCRIPTION

Dietary management of patients with chronic ulcer disease has been the subject of much controversy. In 1971, the American Dietetic Association, recognizing that the rationale for this diet is not supported by sufficient scientific evidence, published a Position Paper which discussed several controversies. This is reprinted below.

INDICATION

Results of experiments have shown that there is no significant difference in the response of patients with active duodenal ulcer to a Bland or a Regular diet.

SUGGESTED MEAL PATTERN

Regular Diet or Soft Diet may be used according to patient tolerance; frequent, small-volume feedings should be offered.

Foods which are known gastric irritants should be avoided: black pepper, cayenne, chili powder, coffee, tea, cocoa and alcohol.

INDIVIDUALIZATION OF THE DIETARY PLAN IS RECOMMENDED.

THE AMERICAN DIETETIC ASSOCIATION POSITION PAPER ON:

BLAND DIET IN THE TREATMENT OF CHRONIC DUODENAL ULCER DISEASE*

The Bland Diet and its modifications have been used for many years as part of the treatment for duodenal ulcer and other gastrointestinal disorders. It has most often been defined as one which is chemically and mechanically non-irritating; however, there is considerable lack of agreement as to which foods are actually non-irritating. Review of diet manuals from many states reveals regional differences as to foods allowed. In reviewing the literature, it is noted that much of the rationale for the bland diet is based on tradition and even folklore.

The American Dietetic Association, in its commitment to interpret and apply the science of nutrition in the promotion of individual

* Approved by the Executive Board of the American Dietetic Association, May 21, 1971, as Position Paper No. 0000H. J. Amer. Dietet. Assoc. 59: 244, 1971

group and community health:

- I. Recognizes that the rationale (chemically and mechanically non-irritating) for the bland diet is not sufficiently supported by scientific evidence.
 - A. Spices, condiments and highly seasoned foods are usually omitted on the basis that they irritate the gastric mucosa. However, experiments have indicated that no significant irritation occurs, even when most condiments are applied directly on the gastric mucosa. Exceptions are those items which do cause gastric irritation, including black pepper, chili powder, caffeine, coffee, tea, cocoa, alcohol and drugs.
 - B. Milk has been the basis of diets for duodenal ulcer for many years. One of the primary aims in dietary management of duodenal ulcer disease is to reduce acid secretion and neutralize the acid present. While milk does relieve duodenal ulcer pain, the acid neutralizing effect is slight. Its buffering action could be outweighed by its ability to stimulate acid production. Most foods stimulate acid secretion to some extent; protein provides the greatest buffering action and is also the most powerful stimulus to acid secretion. The use of milk therapy has been greatly reduced over the past decade, owing to a better knowledge of its side effects and allergic reactions. The controversy regarding use of milk still continues. There are those who still advocate the regular use of milk, primarily during the active stage of acute duodenal ulcer; however, strict insistence on its use during remission is unwarranted.
 - C. Roughage, or coarse food, has been excluded from the diet on the basis that it aggravates the inflamed mucosal area. There is no evidence that such foods as fruit skins, lettuce, nuts and celery, when they are well masticated and mixed with saliva will scrape or irritate the duodenal ulcer. Grinding or pureeing of foods is necessary only when the teeth are in poor condition or missing.
 - D. The effect of a bland diet on the healing of duodenal ulcer has been studied extensively. Investigations have compared various bland diets with regular or free choice diets. The results indicate that a bland diet made no significant difference in healing the ulcer. One such study demonstrated that the

acidity of the gastric contents was frequently lower when a free-choice diet was taken. Many foods have been incriminated as the cause of gastric discomfort and are subsequently eliminated from a patient's diet. Studies done on patients with and without documented gastrointestinal disease indicate that those with gastrointestinal disease cannot be distinguished by food intolerance. Symptoms of intolerance were more related to individual response than to intake of specific food or the presence of disease.

- II. Believes that scientific investigation supports the validity of frequent, small feedings in the management of patients with duodenal ulcer disease. These have been found to offer the most comfort to the patient; additionally, acidity of the gastric contents is lower with small-volume, frequent feedings. It must also be recognized that rest, preferably in bed, rapidly reduces duodenal ulcer symptoms. This is a specially important factor in the healing of the ulcer.
- III. Believes the following points should be of major consideration in developing a dietary plan for duodenal ulcer patients.
 - A. Individualization of the dietary plan, since patients differ as to specific food intolerances, living patterns, life styles, work hours and education.
 - B. Utilization of small volume, frequent feedings.
 - C. Provision of educational materials relative to dietary support.
- IV. Advocates the continued pursuit of current research and recommends that valid information be utilized in updating dietary regimens.
- V. Suggests that dietetic practitioners be cognizant of the possible harmful effects of a milk-rice bland diet in patients who have a tendency towards hypercalcemia and/or atherosclerosis.

LIBERAL BLAND DIET

The recommended dietary treatment of patients with chronic disorders of the upper gastrointestinal tract is based on the following principles:

1. Avoid: Blackpepper, cayenne
Chili powder
Alcohol
Cocoa, Chocolate
Caffeine (coffee, tea, colas)
2. Eat slowly and chew thoroughly. Relax before and after each meal.
3. Eat three small meals and three between meal snacks. Plan regular meal and snack times.
4. Take medication only as prescribed by the physician.
5. Omit foods which cause discomfort and add them back into the diet at a later date.
6. The diet should be adopted to the patient's individual food tolerances and will provide adequate nutrition, if planned according to the Daily Food Guide (see Regular Diet).

LOW RESIDUE DIET

DESCRIPTION

The Low Residue Diet provides food which will result in a reduced amount of residue in the bowel. Foods containing a small amount of indigestible carbohydrate, such as cooked fruit and vegetables from which skin and seeds have been removed, are allowed. Milk and milk products are limited to 480 ml (2 cups) per day since they produce a bulky residue in the colon.

INDICATIONS

The Low Residue Diet may be indicated following lower bowel surgery and for patients with incurable partial bowel obstruction. This diet is contraindicated for diverticular disease and irritable bowel syndrome.*

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Potatoes, boiled or baked without skin, green bananas, yam, rice, macaroni, spaghetti, all breads and crackers made with refined flour, refined cereals, noodles.	Potatoes with skin, fried potatoes, potato chips, brown rice, whole grain breads or rolls, whole grain cereal bran, cassava.
LEGUMES	None	Peas and beans and nuts.
FOOD FROM ANIMALS	Tender lean beef, mutton, liver, fish, poultry, corned beef, frankfurters. Cheddar cheese, eggs. Milk: fresh, evaporated, condensed sweetened, limit to one pint, including milk used in cooking.	Tough cuts of meat, fried, pickled or spicy meats. More than 500 ml (2 cups) of milk per day

* Oddstein, F.: Diet and Colonic Disease. J. Amer. Dietet. Assoc. 60: 499-503, 1972.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
DARK GREEN LEAFY AND YELLOW VEGETABLES	Mild vegetables, such as carrots, pumpkin, chocho/christophene, string beans and tomatoes (without skin).	Raw vegetables, cabbage, onion, egg plant, dark green leafy vegetables.
FRUITS	Ripe bananas, grapefruit and orange segments without membrane, custard apple, papaya, naseberry/sapodilla without skin, watermelon.	Dried fruits, berries, any others not listed.
FATS & OILS	Crisp bacon, butter, margarine, all cooking fats and oils. Avocado.	None
SUGAR & SWEETS	Honey, jelly, sugar, syrup and/or preserves without seeds, plain cake, candy without nuts.	Marmalade, jam with seeds.
MISCELLANEOUS	Salt, ketchup, cinnamon, nutmeg, gelatin desserts and puddings made with allowed milk, plain ice cream.	Olives, pickles, salad dressing with seeds.
BEVERAGES	Coffee, tea, fruit juices, carbonated beverages, fruit flavoured beverages.	

SUGGESTED MEAL PLAN

MORNING

1 Serving fruit/fruit juice
 Bread and/or cereal
 1 egg or substitute
 5 ml (1 tsp) butter or margarine
 Milk
 Beverage

NOON AND EVENING

60 g (2 oz) meat or substitute
 Staple food, rice, yam or substitute
 as allowed
 Yellow vegetable as allowed
 Fruit or allowed dessert

SAMPLE MENU

MORNING

Orange juice
 125 ml (½ cup) cream of
 wheat porridge
 1 scrambled egg
 1 slice toast with
 margarine
 125 ml (4 oz) milk
 Coffee

LUNCH

Chicken broth
 Baked fish
 125 ml (½ cup) mashed
 potatoes
 125 ml (½ cup) carrot
 coins
 125 ml (½ cup) fruit
 juice

DINNER

90 g (3 oz) baked
 chicken
 2 slices toast with
 butter/margarine
 125 ml (½ cup) beets
 125 ml (4 oz) milk
 Gelatin

SNACK

250 ml (8 oz) milk
 2 crackers

HIGH FIBRE, HIGH RESIDUE DIET

DESCRIPTION

The High Fibre, High Residue Diet is a modification of the Regular Diet. This diet provides for the addition of fibre in the form of whole grain breads and cereals, raw fruits and vegetables, and dried fruits, resulting in large amounts of undigested fibre and bulk. Four to six glasses of water daily are recommended.

This diet is designed for use in the treatment of constipation, diverticulosis and irritable bowel syndrome. To increase fibre content above 10 grams may require more food than the patient can consume. Fibre from other than food sources would have to be prescribed, e.g. commercial preparations of methyl cellulose.

INDICATIONS

The High Fibre, High Residue Diet is used for atonic constipation, irritable bowel syndrome and in diverticular disease, to decrease the colonic pressure.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	All are allowed but whole grain products, bran, raisin or whole wheat bread, corn, oatmeal, sweet and white potato with skin, brown rice, breadfruit and cassava are highest in fibre. (Bread - 5 or more servings, cereal - 1 or more servings.)	None
LEGUMES	All are allowed but dried peas, beans, lima beans, butter beans, broad beans, cashew nuts and peanuts are highest in fibre. (4 servings)	None
DARK GREEN LEAFY, YELLOW AND OTHER NON-STARCHY VEGETABLES	All are allowed, especially raw.	

High Fibre, High Residue Diet

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FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FRUIT AND FRUIT JUICES	Although all are allowed, raw, dried or cooked with skins are highest in fibre (3 or more servings)	None
FOODS FROM ANIMALS	All	None
FATS & OILS	All	None
SUGARS AND SWEETS	All are allowed but marmalade and jam with seeds are highest in fibre.	None
MISCELLANEOUS	All condiments and seasonings; nuts, especially peanuts in skin; raisins, dried fruits, seeds, fruit cake, carrot cake, nut and fruit cookies and coconut. "Meat" products are high in fibre.	None

SUGGESTED MENU PATTERN

MORNING

125 ml (4 oz) fruit juice
 200 ml (6 oz) whole grain
 cooked cereal
 1 egg or substitute
 250 ml (8 oz) beverage

NOON

200 ml (6 oz.) vegetable
 soup
 2 slices wholewheat bread
 with margarine/butter
 60 g (2 oz) meat or
 substitute
 100 g (3½ oz) staple foods
 60 g (2 oz) vegetable
 (cooked or raw)
 60 g (2 oz) vegetable salad
 with dressing
 1 serving fruit or dessert

EVENING

90 g (3 oz) meat or substitute
 100 g (3½ oz) staple foods
 60 g (2 oz) vegetable (cooked or
 raw)
 60 g (2 oz) tossed salad with
 dressing
 2 slices bran bread with
 margarine/butter
 250 ml (8 oz) milk

MID-MORNING SNACK

2 slices wholewheat
 bread
 10 ml (2 tsp) margarine/
 butter
 15 ml (1 tbsp) jam
 250 ml (8 oz) milk

MID-AFTERNOON SNACK

1 coconut tart
 250 ml (8 oz) beverage

BEDTIME SNACK

250 ml (8 oz) milk
 1 serving fruit or dessert

SAMPLE MENU

MORNING

Fresh pineapple
Oatmeal porridge
Scramble egg
Wholewheat toast
Margarine

NOON

Callaloo Soup
Wholewheat bread with
butter
Hamburger meat pattie
Rice and peas
Cabbage and carrot salad
Stewed prunes and cream

EVENING

Fried fish
Yam
Pumpkin
Tossed salad with dressing
2 slices bran bread with
margarine
250 ml (8 oz.) milk

MID-MORNING SNACK

2 slices wholewheat bread
with butter and guava
jam
250 ml (8 oz.) chocolate
flavoured milk

MID-AFTERNOON SNACK

Coconut tart
Cherry drink

BEDTIME SNACK

Stewed guavas
250 ml (8 oz.) Milk

High Fibre, High Residue Diet

TUBE FEEDING

DESCRIPTION

Tube feedings are prepared from a mixture of foods modified in consistency so that they may be passed through a tube. They must be nutritionally adequate, well tolerated and easily digested. They should not cause distension, diarrhoea, hyperosmotic syndrome (dumping), constipation or dehydration. Commercial products made from a variety of food and supplemented with various nutrients may also be available.

INDICATIONS

Feedings suitable for administration by tube may be prepared for patients unable or unwilling to consume an adequate diet by mouth.

The order for tube feeding must specify:

1. Total energy/24 hours.
2. Total volume/24 hours.
3. Frequency, e.g. Blenderized Meal Tube Feeding 50 cc with 50 cc water q2h.
4. Additional nutrient modifications.
5. Blenderized or brand of commercial formula desired.

Few patients will tolerate the total amount of tube feeding required at full strength the first day. To avoid adverse reactions to tube feedings, it is suggested to start at half strength (0.5 kilocalories/ml). Volume may also have to be increased gradually until the desired total is achieved. Unless otherwise specified, the ratio of carbohydrate to protein and fat should be similar to a regular diet and the concentration should be one kilocalorie/ml. Large amounts of simple sugars should be avoided because they increase undesirable side effects. Attention should be paid to fluid requirements. Tube feedings high in protein or sodium can contribute to dehydration. Blenderized meal tube feedings offer the advantage of a greater variety of ingredients and control of nutrients. To decrease risk of foodborne infection, the following procedures should be followed:

1. Use only freshly prepared food.
2. Do not use raw foods.
3. Sanitize all equipment used.
4. Refrigerate feedings 35° - 45°F (1.67°C - 7.22°C)
5. Label prepared feedings and include date when made.

TYPES OF TUBE FEEDING

Blenderized Meal Tube Feedings: These are prepared from a variety of common foods, mixed in a blender and strained. All foods of a normal diet which are liquids or which can be liquified in a blender may be used.

Commercial Tube Feeding: A variety of commercially prepared tube feedings are available; they are easier to prepare but may be more expensive.

STANDARD TUBE FEEDINGS

1000 Kilocalories (4.2MJ)	Measure	Weight g	Kcal	Prot. g	Fat g	CHO g	Na mg	K mg
High Protein Supplement	250 ml (1 cup)	150	494	35.0	5.2	99.7	660	1768
Milk	180 ml (3/4 cup)	180	119	6.5	6.5	9.0	92	264
Carrots	250 ml (1 cup)	150	46	1.5	0.3	10.7	50	333
Orange Juice	250 ml (1 cup)	250	113	1.8	0.3	26.8	3	435
Oil	15 ml (1 tbsp)	14	124	-	14.0	-	-	-
Eggs	1	48	78	6.2	5.5	0.4	59	62
Meat	15 g (1/2 oz.)	15	60	8.2	2.5	1.5	295	28
TOTALS			1034	59.2	34.3	148.1	1159	2890

1500 Kilocalories (6.3MJ)	Measure	Weight g	Kcal	Prot. g	Fat g	CHO g	Na mg	K mg
High Protein Supplement	250 ml (1 cup)	150	494	35.0	5.2	99.7	660	1768
Milk	500 ml (2 cups)	488	318	17.0	17.2	24.0	244	704
Potato, cooked	125 ml (1/2 cup)	100	65	1.9	0.1	14.5	2	285
Carrots, cooked	250 ml (1 cup)	150	46	1.5	0.3	10.7	50	333
Orange Juice	300 ml (1 1/4 cup)	312	141	2.25	0.4	33.5	4	544
Oil	45 ml (3 tbsp)	42	372	-	42.0	-	-	-
Meat	15 g (1/2 oz.)	15	60	8.2	2.5	1.5	295	28
TOTALS			1496	65.85	67.7	183.9	1255	3662

2000 KiloCalories (8.4MJ)	Measure	Weight g	Kcal.	Prot. g	Fat g	CHO g	Na mg	K mg
High Protein Supplement	375 ml (1½ cups)	225	741	52.5	7.8	149.0	990	2652
Milk	500 ml (2 cups)	488	318	17.0	17.2	24.0	244	704
Potato, cooked	125 ml (½ cup)	100	65	1.9	0.1	14.5	2	285
Carrots, cooked	250 ml (1 cup)	150	46	1.5	0.3	10.7	50	333
Orange Juice	250 ml (1 cup)	250	112	1.8	0.3	26.8	3	435
Oil	65 ml (4 tbsps + 1 tsp)	60	533	-	60.2	-	-	-
Egg	1	48	78	6.2	5.5	0.4	59	62
Meat	30 g (1 oz.)	30	120	16.4	5.0	3.0	590	56
TOTALS			2012	97.3	96.4	228.4	1938	4527

2500 KiloCalories (10.5 MJ)	Measures g	Weight g	Kcal	Prot. g	Fat g	CHO g	Na mg	K mg
High Protein Supplement	375 ml (1½ cup)	225	741	52.5	7.8	149.0	990	2652
Milk	500 ml (2 cups)	488	318	17.0	17.2	24.0	244	704
Potato, cooked	125 ml (½ cup)	100	65	1.9	0.1	14.5	2	285
Carrots, cooked	250 ml (1 cup)	150	46	1.5	0.3	10.7	50	333
Orange Juice	125 ml (½ cup)	125	56	0.9	0.15	13.4	1.5	217.5
Oil	125 ml (½ cup)	112	992	-	111.6	-	-	-
Eggs	1	48	78	6.2	5.5	0.4	59	62
Meat	45 g (1½ oz.)	45	180	24.6	7.5	4.5	885	84
Syrup	5 ml (1 tsp.)	7	20	-	-	5.0	-	-
TOTALS			2496	104.6	150.15	221.5	2231.5	4337.5

3000 Kilocories (12.6MJ)	Measures	Weight g	Kcal	Prot. g	Fat g	CHO g	Na mg	K mg
High Protein Supplement	375 ml (1½ cups)	225	741	52.5	7.8	149.0	990	2652
Milk	500 ml (2 cups)	488	318	17.0	17.2	24.0	244	704
Potato, cooked	125 ml (1½ cups)	100	65	1.9	0.1	14.5	2	285
Carrots, cooked	250 ml (1 cup)	150	46	1.5	0.3	10.7	50	333
Orange Juice	875 ml (3½ cups)	875	395	6.3	1.05	93.8	10.5	1522.5
Oil	145 ml (9 tbsp + 2 tsp)	136	1199	-	135.6	-	-	-
Eggs	1	48	72	6.2	5.5	0.4	59.0	62
Meat	30 g (1 oz.)	30	120	16.4	5.0	3	590	56
Syrup	10 ml (2 tsp.)	14	40	-	-	10	-	-
TOTALS			2996	101.8	172.5	305.4	1945.5	5614.5

NUTRIENT

MODIFICATIONS

ENERGY RESTRICTED DIET

DESCRIPTION

The Energy Restricted Diet is planned to provide an energy intake below the level necessary to maintain the present body weight, thus providing for depletion of fat stores. A weight loss of approximately 1 kg (2.2 lbs) per week is considered the maximum compatible with maintenance of health and normal activity. One pound of body fat contains approximately 3,500 kilocalories. If the patient's intake is reduced 500 kilocalories per day below maintenance requirements, a weight loss of one pound per week should result. An alternate method for estimating the level of caloric restriction is to multiply the patient's ideal weight by a factor of 10 kilocalories. Carbohydrate intake should be at least 5 g/100 kilocalories in order to prevent ketosis.

INDICATIONS

The Energy Restricted Diet is prescribed for weight reduction and may be used as a basis for weight control. The 600 kilocalorie diet may be inadequate in certain nutrients. It is therefore essential that patients on this diet be closely monitored.

Weight reduction is not recommended during pregnancy.

The success of any weight reduction programme is dependent upon many variables. Physical condition, activity, emotional status, food intake and food habit awareness all must be evaluated and the findings used to best advantage by the dietitian-patient-physician team in planning an appropriate diet and in creating positive motivation, the key success factor. Improvement of physical abilities, appearance, mental outlook or medical problems directly related to obesity can be individually influential forces in this regard. Reinforcement of motivation with behavioural modification techniques frequently produces good results.

600 Kilocalorie (2.5 MJ) DietMorning

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	1 serving
Margarine/butter	List 6	½ tsp.
Skim milk	List 5	½ cup
Coffee or tea		

Noon

Meat or substitute	List 5	1 serving (low fat)
Bread or substitute	List 1	1 serving
Dark green leafy vegetables	List 3A	As desired
Yellow vegetable	List 3B	1 serving
Fruit	List 4	1 serving

Evening

Meat or substitute	List 5	1 serving (low fat)
Bread or substitute	List 1	1 serving
Dark green leafy vegetables	List 3A	As desired
Fruit	List 4	1 serving

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600 Kilocalorie (2.5 MJ) DietMorning

Egg or substitute	List 5	1 serving
Bread or substitute	Lits 1A	1 serving
Margarine/butter	List 6	½ tsp.
Skim milk	List 5	½ cup
Coffee or tea		

Noon

Meat or substitute	List 5	1 serving (low fat)
Bread or substitute	List 1	1 serving
Dark green leafy vegetables	List 3A	As desired
Yellow vegetable	List 3B	1 serving
Fruit	List 4	1 serving'

Evening

Meat or substitute	List 5	1 serving (low fat)
Bread or substitute	List 1	1 serving
Dark green leafy vegetables	List 3A	As desired
Fruit	List 4	1 serving

800 Kilocalorie (3.4 MJ) DietMorning

Fruit	List 4	1 serving
Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	1 serving
Margarine/butter/fat	List 6	½ serving
Skim milk	List 5	½ serving

Noon

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	1 serving
Dark green leafy vegetables	List 3A	As desired
Yellow vegetables	List 3B	1 serving
Fat or substitute	List 6	½ serving
Fruit or substitute	List 4	1 serving

Evening

Meat or substitute	List 5	2 servings
Dark green leafy vegetables	List 3A	As desired
Bread or substitute	List 1A	1 serving
Fruit or substitute	List 4	1 serving

1,000 KILOCALORIE (4.2 MJ) DIET

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MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	5 ml (1 tsp.)
Coffee or tea		250 ml (1 cup)
with		
Skim milk	List 5	125 ml (½ cup) (or 30 ml (2 level tbsp. pwd. skim milk)

EVENING

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	1 serving
Margarine/butter/fat	List 6	5 ml (1 tsp)
Dark green leafy vegetables	List 3A	As desired
Skim milk	List 5	125 ml (½ cup) (30 ml - 2 level tbsp. pwd. skim milk

NOON

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	5 ml (1 tsp.)
Rice or substitute	List 1A	1 serving
Yellow or other vegetables	List 3B	1 serving
Dark green leafy vegetables	List 3A	As desired
Juice (unsweetened) or fruit	List 4	1 serving

BEDTIME SNACK

Juice (unsweetened) or fruit	List 4	1 serving
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NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.

MID-AFTERNOON SNACK

Juice (unsweetened) or fruit	List 4	1 serving
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Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

* CFNI, 1977

Energy Restricted Diets

1,200 KILOCALORIE (5.0 MJ) DIET

MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	5 ml (1 tsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk

MID-MORNING SNACK

Fruit juice (unsweetened)	List 4	1 serving
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NOON

Meat or substitute	List 5	1 serving
Oil for cooking	List 6	10 ml (2 tsp.)
Rice	List 1A	125 ml (½ cup)
Dark green leafy vegetables	List 3A	As desired
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

MID-AFTERNOON SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

EVENING

Meat or substitute	List 5	1 serving
Bread or substitute	List 1A	1 serving
Margarine/butter/fat	List 6	5 ml (1 tsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	45 ml (3 tbsp.) pwd. or 200 ml (¾ cup) reg. milk

BEDTIME SNACK

Hot beverage		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk

NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics"* for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

* CFNI, 1977

1,500 KILOCALORIE (6.3 MJ) DIET

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MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	10 ml (2 tsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	45 ml (3 tbsp.) pwd. milk or 200 ml (3/4 cup) reg. milk

MID-MORNING SNACK

Fruit, e.g., banana or other fresh fruit - e.g., orange	List 4	½ only 1 small
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NOON

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	5 ml (1 tsp.)
Green banana or substitute	List 1B	1 serving
Rice or substitute	List 1A	1 serving
Dark green leafy vegetables	List 3A	1 serving
Yellow and other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

MID-AFTERNOON SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuit (water type)	List 1A	3 only

EVENING

Meat or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	10 ml (2 tsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk

BEDTIME SNACK

Milk	List 5	125 ml (½ cup) regular
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NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

* CFNI, 1977

1,800 KILOCALORIE (7.6 MJ) DIET

MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	3 servings
Butter or other fat	List 6	15 ml (1 tbsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk

MID-MORNING SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

NOON

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	10 ml (2 tsp.)
Green banana or substitute	List 1B	1 serving
Rice	List 1A	125 ml (½ cup)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

EVENING

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	10 ml (2 tsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	125 ml (½ cup)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk

BEDTIME SNACK

Milk	List 5	250 ml (1 cup)
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NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.*

Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 250 ml (1 cup) rice or 2 servings of ground provisions, e.g., yam and sweet potato.

* CFNI, 1977

DIETS FOR DIABETES MELLITUS

DESCRIPTION

The Diabetic Diet, which is used for diet control in diabetes, is intended to maintain the patient at a desired weight and to maintain the blood sugar within normal limits. It is important that the intake of energy from protein, fat and carbohydrate be the same every day. The size of meals and time lapse between meals should also be the same. The kinds and exact amounts of food eaten are important because this effects energy level.

Meal plans must meet individual needs based on such factors as weight, occupation and activity. Wherever possible, a diet history should be taken prior to preparing the diet plan and every effort made to individualize the diet. Typical questions might be "Do you eat all your meals at home? Do you carry a lunch from home? Do you eat in restaurants? What do you eat when you are ill?" The diet counselor also needs to know the foods the patient prefers, the food the family eats, shopping habits and how much money the patient budgets for food.

Meal plans should reflect current concepts in the dietary management of diabetes, i.e., concern for total energy intake and for modifications of fat intake. Saturated fat intake has been associated with an increase in blood cholesterol, a possible risk factor in coronary heart disease. The doctor may advise a reduction of foods high in this kind of fat.

GENERAL RULES:

1. Meals are served at approximately the same time every day. This is particularly important when patients are receiving insulin or other medications for diabetes.
2. The diet must be followed exactly at every meal. Extra foods between meals are not allowed. Any between-meal snack must be subtracted from the noon or evening meal or must be a "no-value" or "free" food such as tea, coffee or broth. Bedtime feedings, however, are part of the standard diabetic diet. If the physician does not want the patient to have a bedtime feeding, this food should be added to the noon or evening meal, or can be served as an afternoon snack.
3. No sugar may be used on foods or in cooking. No honey, molasses, syrup, jelly, jam, other sugar products or fruits canned with sugar are included. An acceptable artificial sweetener may be used as directed by the physician.

4. Food is measured with standard measuring equipment (measuring cups, measuring spoons and a ruler) until amounts can be accurately estimated. Checks should be made from time to time to make certain that measurements are accurate. Food is to be measured after it is cooked, and all measurements are made level.

The following diets are presented as SAMPLES ONLY and should never be given without prior consultation with the attending physician. The importance of adapting the meal plan to suit the patient's lifestyle cannot be overemphasized.

1,000 KILOCALORIE (4.2 MJ) DIABETIC DIET

MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	5 ml (1 tsp.)
Coffee or tea		250 ml (1 cup)
with		
Skim milk	List 5	125 ml (½ cup) (30 ml or 2 level tbsp.) pwd. skim milk)

NOON

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	5 ml (1 tsp.)
Rice or substitute	List 1A	1 serving
Yellow and other vegetables	List 3B	1 serving
Dark green leafy vegetables	List 3A	As desired
Juice (unsweetened) or fruit	List 4	1 serving

MID-AFTERNOON SNACK

Juice (unsweetened) or fruit	List 4	1 serving
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EVENING

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	1 serving
Margarine/butter/fat	List 6	5 ml (1 tsp.)
Dark green leafy vegetables	List 3A	As desired
Skim milk	List 5	125 ml (½ cup) (30 ml or 2 level tbsp.) pwd. skim milk)

BEDTIME SNACK

Juice (unsweetened) or fruit	List 4	1 serving
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NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

* CFNI, 1977

1,200 KILOCALORIE (5.0 MJ) DIABETIC DIET

MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	5 ml (1 tsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk

MID-MORNING SNACK

Fruit juice (unsweetened)	List 4	1 serving
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NOON

Meat or substitute	List 5	1 serving
Oil for cooking	List 6	10 ml (2 tsp.)
Rice	List 1A	125 ml (½ cup)
Dark green leafy vegetables	List 3A	As desired
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

MID-AFTERNOON SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

EVENING

Meat or substitute	List 5	1 serving
Bread or substitute	List 1A	1 serving
Margarine/butter/fat	List 6	5 ml (1 tsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	45 ml (3 tbsp.) pwd. or 200 ml (¾ cup) reg. milk

BEDTIME SNACK

Hot beverage		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk

NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.*

Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g., yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g., yam and sweet potato.

* CFNI, 1977

1,500 KILOCALORIE (6.3 MJ) DIABETIC DIET

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MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	10 ml (2 tsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	45 ml (3 tbsp.)
		pwd. milk or
		200 ml (3/4 cup)
		reg. milk

MID-MORNING SNACK

Fruit, e.g. banana	List 4	½ only
or other fresh		
fruit, e.g. orange		1 small

NOON

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	5 ml (1 tsp.)
Green banana or substitute	List 1B	1 serving
Rice or substitute	List 1A	1 serving
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

MID-AFTERNOON SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuit (water type)	List 1A	3 only

EVENING

Meat or substitute	List 5	1 serving
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	10 ml (2 tsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.)
		pwd. or 125 ml
		(½ cup) reg.
		milk

BEDTIME SNACK

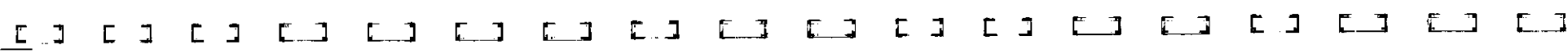
Milk	List 5	125 ml (½ cup)
		reg.

NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.*

Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g. yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g. yam and sweet potato.

* CFNI, 1977



1,800 KILOCALORIE (7.6 MJ) DIABETIC DIET

MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	3 servings
Butter or other fat	List 6	15 ml (1 tbsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk.

MID-MORNING SNACK

Fruit juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

NOON

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	10 ml (2 tsp.)
Green bananas or substitute	List 1B	1 serving
Rice	List 1A	125 ml (½ cup)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Fruit juice (unsweetened)	List 4	1 serving

MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	1 serving
Biscuits (water type)	List 1A	3 only

EVENING

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	10 ml (2 tsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	125 ml (½ cup) 250 ml (1 cup)
Coffee or tea		
with		
Milk	List 5	30 ml (2 tbsp.) pwd. or 125 ml (½ cup) reg. milk.

BEDTIME SNACK

Milk	List 5	250 ml (1 cup)
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NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g. yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g. yam and sweet potato.

* CFNI, 1977

2,000 KILOCALORIE (8.4 MJ) DIABETIC DIET

64

MORNING

Egg or substitute	List 5	1 serving
Bread or substitute	List 1A	3 servings
Margarine/butter/fat	List 6	15 ml (1 tbsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	200 ml (3/4 cup) or 45 ml (3 tbsp.) pwd. milk.

MID-MORNING SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type)	List 1A	3 only

NOON

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	15 ml (1 tbsp.)
Ground provisions	List 1B	1 serving
Rice or substitute	List 1A	1 serving
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Juice (unsweetened)	List 4	1 serving

MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	1 serving
Biscuits (water type or cream cracker type)	List 1A	6 only or 3 only

EVENING

Meat or substitute	List 5	2 servings
Bread	List 1A	2 slices
Margarine/butter/fat	List 6	15 ml (1 tbsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	125 ml (1/2 cup) 250 ml (1 cup)
Coffee or tea		
with		
Milk	List 5	125 ml (1/2 cup) reg. or 30 ml (2 tbsp.) pwd.

BEDTIME SNACK

Milk	List 5	250 ml (1 cup) regular
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NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.*

Please note that 125 ml (1/2 cup) cooked rice and 1 serving of ground provisions, e.g. yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g. yam and sweet potato.

* CFNI, 1977

2,000 KILOCALORIE (8.4 MJ) DIABETIC DIET

East Indian (Sample)

MORNING

Salt fish choka	List 5	60 ml ($\frac{1}{4}$ cup)
Roti	List 1A	1 only
Ghee	List 6	15 ml (1 tbsp.)
Coffee or tea with		250 ml (1 cup)
Milk	List 5	125 ml ($\frac{1}{2}$ cup)

MID-MORNING SNACK

Fresh fruit or unsweetened juice	List 4	250 ml (1 cup)
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NOON

Meat	List 5	2 servings
Dhal (thick)	List 2	175 ml ($\frac{2}{3}$ cup)
Oil for cooking	List 6	15 ml (1 tbsp.)
Rice	List 1A	175 ml ($\frac{2}{3}$ cup)
Curry Melongene/baigan	List 3A	125 ml ($\frac{1}{2}$ cup)
Mango Anchar		As desired
Juice (unsweetened)	List 4	250 ml (1 cup)

MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	250 ml (1 cup)
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EVENING

Curry meat	List 5	30 ml (2 tbsp.)
Roti	List 1A	1 only
Oil for cooking	List 6	15 ml (1 tbsp.)
Baghi	List 3A	125 ml ($\frac{1}{2}$ cup)
Coffee or tea with		250 ml (1 cup)
Milk	List 5	125 ml ($\frac{1}{2}$ cup)

BEDTIME SNACK

Milk	List 5	250 ml (1 cup)
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NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.

Please note that 125 ml ($\frac{1}{2}$ cup) cooked rice and 1 serving of ground provisions, e.g. yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g. yam and sweet potato.

* CFNI, 1977

2,200 KILOCALORIE (9.2 MJ) DIABETIC DIET

66

MORNING

Fruit or substitute	List 4	1 serving
Egg or substitute	List 5	2 servings
Bread or substitute	List 1A	3 servings
Margarine/butter/fat	List 6	15 ml (1 tbsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	125 ml (½ cup) or 30 ml (2 tbsp.) pwd.

EVENING

Meat or substitute	List 5	2 servings
Bread or substitute	List 1A	2 servings
Margarine/butter/fat	List 6	15 ml (1 tbsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Fruit	List 4	1 serving
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	125 ml (½ cup)

MID-MORNING SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type or cream cracker type)	List 1A	6 only or List 1A 3 only

BEDTIME SNACK

Milk	List 5	250 ml (1 cup)
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NOON

Meat or substitute	List 5	2 servings
Oil for cooking	List 6	15 ml (1 tbsp.)
Ground provisions	List 1B	1 serving
Rice	List 1A	125 ml (½ cup)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Juice (unsweetened)	List 4	1 serving

NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.*

Please note that 125 ml (½ cup) cooked rice and 1 serving of ground provisions, e.g. yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g. yam and sweet potato.

* CFNI, 1977

MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type or cream cracker type)	List 1A	6 only or List 1A 3 only



2,500 KILOCALORIE (10.5 MJ) DIABETIC DIET

MORNING

Egg or substitute	List 5	2 servings
Bread or substitute	List 1A	3 servings
Margarine/butter/fat	List 6	15 ml (1 tbsp.)
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	250 ml (1 cup) or 60 ml (4 tbsp.) pwd.

MID-MORNING SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type)	List 1A	6 only

NOON

Meat or substitute	List 5	3 servings
Oil for cooking	List 6	15 ml (1 tbsp.)
Ground provisions	List 1B	1 serving
Rice	List 1A	250 ml (1 cup)
Dark green leafy vegetables	List 3A	As desired
Yellow and other vegetables	List 3B	1 serving
Legumes	List 2	1 serving
Juice (unsweetened)	List 4	1 serving

MID-AFTERNOON SNACK

Juice (unsweetened)	List 4	2 servings
Biscuits (water type)	List 1A	6 only

EVENING

Meat or substitute	List 5	3 servings
Bread or substitute	List 1A	3 servings
Margarine/butter/fat	List 6	15 ml (1 tbsp.)
Dark green leafy vegetables	List 3A	As desired
Yellow or other vegetables	List 3B	1 serving
Coffee or tea		250 ml (1 cup)
with		
Milk	List 5	125 ml ($\frac{1}{2}$ cup) or 30 ml (2 tbsp.)

BEDTIME SNACK

Milk	List 5	250 ml (1 cup)
Biscuits (water type)	List 1A	3 only

NOTE:

Please check pages 17 - 34 of "Meal Planning for Diabetics" for foods that you may substitute. Remember there are several choices you can make at each meal.*

Please note that 125 ml ($\frac{1}{2}$ cup) cooked rice and 1 serving of ground provisions, e.g. yam, can be replaced by 250 ml (1 cup) of rice or 2 servings of ground provisions, e.g. yam and sweet potato.

* CFNI, 1977

PROTEIN RESTRICTED DIET

DESCRIPTION

The Protein Restricted Diet is a modification of the Regular Diet with protein level prescribed as required, in order to reduce the level of serum nitrogenous waste products. The restricted protein levels are arbitrarily set at 10 gram levels of progression. In impending hepatic coma, the level of protein is severely restricted to 10 - 20 grams daily and increased in increments of 10 grams as the patient improves. If coma does occur, the protein intake should be reduced to zero and an adequate energy intake should be given in the form of carbohydrate and fat, to prevent catabolism of protein for energy. These diets are also indicated for patients suffering from kidney disorders. Protein used in these diets should be of high quality.

INDICATIONS

The Protein Restricted Diet is prescribed for hepatic disease related to ammonia intoxication. This diet may also be used for chronic renal failure, to control blood urea nitrogen levels (BUN) when no dietary restrictions are necessary. In the presence of ascites, edema or hypertension, a sodium restriction may be indicated. (See pages 90 -102 for Sodium Restricted Diets.)

PROTEIN RESTRICTED DIET

(20 grams protein)

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Rice, macaroni, noodles, spaghetti, yam, potato, breadfruit and other starchy foods; whole grain or enriched breads and cereals. (4 servings only)	None

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
LEGUMES	125 ml ($\frac{1}{2}$ cup) cooked legumes or 75 ml ($\frac{1}{3}$ cup) nuts or 30 ml (2 tbsp) peanut butter may be substituted for 1 serving animal foods.	None
DARK GREEN LEAFY AND YELLOW VEGETABLES	All fresh, frozen or canned vegetables, or 4 125 ml ($\frac{1}{2}$ cup) servings.	None
FRUITS	All fresh, frozen or canned fruit or juices, (3 servings)	None
FOODS FROM ANIMALS	1 egg or 250 ml (1 cup) milk, or 30 g (1 oz.) meat only if egg or milk cannot be tolerated by patient.	All other animal foods and substitutes.
FATS	All fats, butter, margarine, shortening, cooking oil and salad dressings to provide additional calories	Gravies thickened with flour.
BEVERAGES	Coffee, tea, fruitades, carbonated beverages.	Milk beverages except made with allowance
DESSERTS	Fruit ices, popsicles	All others
MISCELLANEOUS	Herbs, spices, sugar, jams, jellies, syrup, honey, hard candy to provide additional energy.	

SUGGESTED MEAL PLAN

MORNING	NOON	EVENING
1 serving fruit	1 serving staple food	1 egg
2 slices bread or substitute	3 servings dark green leafy or yellow vegetables	1 serving green or yellow vegetable
10 ml (2 tsp) butter	Oil or salad dressing	1 slice bread or substitute
Jelly or jam	1 serving fruit	Oil or salad dressing
Sweetened beverage	Beverages	1 serving fruit
		Beverage

SAMPLE MENU

MORNING	NOON	EVENING
1 orange	125 ml ($\frac{1}{2}$ cup) mashed potatoes with butter	Egg fried rice made with 1 egg
125 ml ($\frac{1}{2}$ cup) oatmeal porridge with honey	125 ml ($\frac{1}{2}$ cup) buttered carrots	125 ml ($\frac{1}{2}$ cup) cooked rice
1 slice bread with	125 ml ($\frac{1}{2}$ cup) callaloo	125 ml ($\frac{1}{2}$ cup) chopped vegetables
10 ml (2 tsp) butter and jelly	250 ml (1 cup) tossed salad with	Oil for frying
Black coffee with sugar	30 ml (2 tbsp) mayonnaise	1 serving fruit salad
	1 slice pineapple	Tea or lemonade
	Lemonade with syrup	

PROTEIN RESTRICTED DIET
(40 grams protein)

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Rice, macaroni, noodles, spaghetti, yam, potato, breadfruit and other starchy foods, whole grain or enriched breads and cereals. (7 servings)	None
LEGUMES	125 ml ($\frac{1}{2}$ cup) cooked legumes or 75 ml ($\frac{1}{3}$ cup) nuts or 30 ml (2 tbsp) peanut butter may be substituted for 1 serving animal foods.	None
DARK GREEN LEAFY AND YELLOW VEGETABLES	All fresh, frozen or canned vegetables, 4 (125 ml or $\frac{1}{2}$ cup) servings	None
FRUITS	Fresh, frozen or canned fruit or juices	None
FOODS FROM ANIMALS	Meat, fish, poultry, liver, eggs, cheese, milk (3 servings only)	None
FATS	All fats, butter, margarine, shortening, cooking oil and salad dressings to provide additional calories	
BEVERAGES	Coffee, tea, fruit ades, carbonated beverages	Milk beverage except made with allowance
DESSERTS	Fruit ices, popsicles (125 ml or $\frac{1}{2}$ cup ice cream or one 40 g piece of plain iced cake may be substituted for one serving of staple foods)	None
MISCELLANEOUS	Herbs, spices, sugar, jams and jellies, syrup, honey, hard candy to provide additional calories	None

INCREASED PROTEIN AND ENERGY DIET

DESCRIPTION

The Increased Protein Diet is designed to provide additional amounts of protein and energy in conditions where the protein requirements of the individual have been increased or when there have been excessive protein losses from the body. This diet is based on the Regular Diet and provides approximately one and one-half to two grams of protein per kilogram of ideal body weight.

This diet contains approximately 100 - 125 grams protein and at least 2,500 kilocalories (10.5 MJ).

INDICATIONS

This diet may be used before and after surgery, following immobilization, bone fractures, injury and burns, in some cases of nephrotic syndrome and some cases of chronic liver diseases, hyperthyroidism, anemia, fevers, ulcerative colitis and for the grossly undernourished adult patient.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Rice, macaroni, noodles, spaghetti, yam, potato, breadfruit and other starchy foods, bread and flour products (8 - 10 servings)	None
LEGUMES	Fresh or dried peas and beans, baked beans, nuts, peanut butter. (1 or more servings)	None
DARK GREEN LEAFY AND YELLOW VEGETABLES	Pumpkin, carrots, beets and other starchy vegetables, cabbage, callaloo, string beans, and all other non-starchy vegetables; avocado and ackee. (2 or more servings)	None

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FRUITS	Include at least one citrus fruit (2 or more servings)	None
FOODS FROM ANIMALS	Fresh, frozen or canned meats, fish, poultry, liver, milk, eggs, cheese. 125 ml ($\frac{1}{2}$ cup) legumes may be substituted for 30 g (1 oz.) meat. (2 servings)	None
FATS	Butter, margarine, shortening, oils and salad dressings, salt pork, bacon and bacon fat. (8 or more servings)	None
BEVERAGES	Tea, coffee, cocoa, chocolate drinks, malted milk, fruit drinks include 500 ml (2 cups) daily of a high protein beverage. Choose from any of the recipes listed.	None
SUGARS & SWEETS	All	None

SUGGESTED MEAL PLAN

MORNING	NOON	EVENING
1 serving fruit	120 g (4 oz.) meat or substitute	60 g (2 oz.) meat or substitute
Bread and/or cereal	2 servings staple foods	Staple foods (bread, etc.)
1 egg or substitute	20 ml (4 tsp) oil or butter	1 serving legumes
10 ml (2 tsp) butter or margarine	Beverage	10 ml (2 tsp) oil or butter
250 ml (1 cup) milk		1 fruit
Beverage		250 ml (1 cup) milk or milk beverage

Snacks: 500 ml (2 cups) high protein drink (select from recipes)

SAMPLE MENU

MORNING	NOON	EVENING
1 orange	120 g (4 oz.) baked chicken	1 medium fried fish
1 fried egg	125 ml ($\frac{1}{2}$ cup) rice	125 ml ($\frac{1}{2}$ cup) baked beans
250 ml (1 cup) oats porridge	1 slice breadfruit	3 slices bread
2 slices bread	125 ml ($\frac{1}{2}$ cup) carrots	10 ml (2 tsp) butter
10 ml (2 tsp) butter	Sliced tomato and lettuce	1 slice pineapple
250 ml (1 cup) cocoa with milk	15 ml (1 tbsp) mayonnaise	250 ml (1 cup) milk beverage
	Fruit drink	
MID-MORNING SNACK		MID-AFTERNOON SNACK
250 ml (1 cup) high protein drink		250 ml (1 cup) high protein eggnog

INGREDIENTS PER SERVING OF SOME
HIGH PROTEIN BEVERAGES

Ingredients	Eggnog	High Protein Eggnog	High Protein Drink	High Energy Drink
Eggs	1	1	1	1
Milk	200 ml (3/4 cup)	200 ml (3/4 cup)	200 ml (3/4 cup)	200 ml (3/4 cup)
Sugar	10 ml (2 tsp)	10 ml (2 tsp)	10 ml (2 tsp)	10 ml (2 tsp)
Vanilla	3 drops	3 drops	-	-
Powdered non-fat milk	-	45 ml (3 tbsp)	45 ml (3 tbsp)	-
Ice cream	-	-	-	-
Chocolate Flavouring	-	-	30 ml (2 tbsp)	30 ml (2 tbsp)
High Protein Supplement	-	-	30 ml (2 tbsp)	-

NUTRIENTS PER SERVING OF ABOVE FOOD SUPPLEMENTS

Nutrients	Eggnog	High Protein Eggnog	High Protein Drink	High Energy Drink
Carbohydrate	19	31	44	45
Protein	13	21	17	18
Fat	13	13	8	20
Kilocalories	245	325	316	432

FAT RESTRICTED DIET

DESCRIPTION

The total daily fat content of the Fat Restricted Diet is limited to 40 - 45 grams by omitting foods with a high fat content.

The amount of fat in this diet is of primary importance. Attention to the kind of fat ingested, whether saturated or polyunsaturated may be regarded as unnecessary unless specified by the physician. For patients with severe abnormalities requiring modifications in the type as well as the amount of dietary fat, one of the diets for hyperlipoproteinemia should be prescribed.

Traditionally, those foods considered to be gas forming have been restricted in Low Fat Diets prescribed for patients with gallbladder disorders. Based on available evidence which indicates a highly individual response to various foods, gas forming foods are not routinely eliminated from this diet. The patient should be interviewed to determine if certain foods cause discomfort. If so, those foods should be avoided or used in moderation.

This diet is restricted in fat but not necessarily in total energy. It should not be used as an Energy Restricted Diet for weight reduction.

INDICATIONS

The Low Fat Diet may be used with patients who have disorders involving the pancreas, gallbladder, liver or other diseases resulting in impaired digestion or absorption of fat.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Rice, macaroni, noodles, spaghetti, yam, potato, breadfruit and other starchy foods; bread and flour products. All prepared without fat.	Fried foods and food prepared with oil or fat.
LEGUMES	Peas and beans, if tolerated.	Nuts, peanut butter.
DARK GREEN LEAFY AND YELLOW VEGETABLES	All kinds prepared without fat or oil.	All fried or creamed vegetables.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FRUITS	All fruits and fruit juices.	None
FOODS FROM ANIMALS	Lean fresh meats, fish, poultry without skin and trimmed of visible fat; shellfish boiled, stewed or simmered.	All fried or sauteed meats, fish and poultry. All meats not included under foods allowed, e.g. corned beef, tinned meats, fish in oil, duck.
	Skim milk, yogurt and cheese made from skim milk.	Regular milk, evaporated milk, full cream sweetened condensed milk. Regular cheese.
	Egg (no more than 1 yolk daily) prepared without fat; egg whites as desired.	
FATS *	10 g (2 tsp) only: margarine, oil, butter, shortening, cream cheese, mayonnaise.	Gravy, bacon, bacon drippings, salt pork; all visible fat. Butter, margarine, cream cheese, mayonnaise (except as allowed in the meal pattern). Avocado and ackee.
MISCELLANEOUS	Sugar, syrup, jelly, jam, preserves, sweets without nuts or chocolate; gelatin desserts and puddings made with skim milk and half cream condensed milk. Spices and condiments such as ketchup, mustard, vinegar, salt, pepper.	Chocolate, nuts, coconut, cream, salad dressings with oil. Gravies, rich sauces, olives, chips, buttered popcorn. Ice cream, custard, desserts with egg yolks.
	Fat free broth and soups.	Soups made with evaporated milk, cream or whole milk.
	Coffee, tea, fruit juices, fruit flavoured drinks, carbonated beverages.	Chocolate drinks, egg-nogs, milkshakes, malted milk.

* If fat restriction is less than 40 grams, do not use any fats.

SUGGESTED MEAL PLAN

MORNING	NOON AND EVENING
1 serving fruit or juice	60 g (2 oz.) meat or substitute
1 Egg or substitute	Staple food, rice, yam or substitute
Bread and/or cereal	Dark green leafy or yellow vegetable
5 ml (1 tsp) butter or margarine	Fruit or allowed dessert
Skim milk	2.5 ml ($\frac{1}{2}$ tsp) fat
Beverage	Skim milk or other beverage

SAMPLE MENU

MORNING	NOON	EVENING
Orange juice	60 g (2 oz.) Baked Chicken (no skin)	60 g (2 oz.) Steamed Fish
Boiled egg	FF* Crushed yam	FF* Rice
Bread	FF* String Beans	FF* Carrots
2.5 ml ($\frac{1}{2}$ tsp) margarine	Sliced Tomato & Lettuce	Fruit
Jelly	5 ml (1 tsp) Mayonnaise	2.5 ml ($\frac{1}{2}$ tsp) margarine
Skim Milk	Stewed Guavas	Tea with skim milk
Coffee	Fruit Drink	

*FF means Fat Free or cooked without fat.

NOTE: Restricted quantities apply only to foods containing significant amounts of fats, amounts of other foods may vary according to individual needs.

FAT CONTROLLED LOW CHOLESTEROL DIET

DESCRIPTION

The Fat Controlled Low Cholesterol Diet presents a prudent approach that combines reduced intake of total fat, cholesterol and saturated fat with increased ratio of polyunsaturated to saturated fats. This diet is designed for individuals who are at ideal body weight. When weight reduction is required, a well-balanced Energy Restricted Diet, low in cholesterol and controlled in both amount and type of fat, should be followed.

A low cholesterol, fat controlled diet, is appropriate for preventing an elevation of blood cholesterol which is often correlated with an increased risk of heart disease. Polyunsaturated fats (those fats liquid at room temperature) are substituted for saturated (hard) fats in the diet. Major dietary sources of cholesterol are restricted and the total amount of fat in the diet is reduced.

INDICATIONS

This diet is used: (1) when there is a history of cardiovascular disease suggesting a need for some alterations in the constituents of the diet; (2) in moderate hypercholesterolemia.

The principal objectives of this diet are to provide daily menu patterns that:

1. Reduce total fat to 30 - 35% of total energy intake.
2. Restrict saturated fat to less than 10% of total energy intake.
3. Increase polyunsaturated fat to 11 - 14% of total energy intake.
4. Reduce dietary cholesterol to less than 300 mg a day.

To meet these objectives, the following changes in the diet are observed:

1. Saturated fats are reduced by limiting the intake of animal fats including cheese, whole milk, evaporated milk, butter, cream and meat. All cuts of meat should be lean with all visible fat removed. The use of lean beef, lamb, pork and ham should be limited to 3 servings of 90 g (3 oz.) portions (cooked weight) per week.

2. Foods high in cholesterol are restricted, including organ meats (brain, kidney, sweetbreads, heart, fish roe and liver), shellfish and eggs. Egg yolks are limited to three a week.
3. The vegetable oil in the diet is one of the most important foods that must be consumed daily in order to meet the recommended per cent of energy from polyunsaturated fat.

Olive and peanut oils should be restricted to not more than 30 ml (2 tbsp) per day. Coconut oil and palm oil should be avoided because of high content of saturated fats.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	All without animal fats.	Fried unless in allowed oil
LEGUMES Peas, Beans	All	Pork and Beans and any prepared with animal fats or shortening.
Nuts	Nuts except those under foods to avoid.	Cashew and Macadamia.
DARK GREEN LEAFY AND YELLOW VEGETABLES	All	Those in sauces made with egg; those cooked with meat fat or shortening.
FRUITS	All	
FOODS FROM ANIMALS		
Milk	Skim milk, low fat yogurt, skim milk cheese.	Whole milk, cream, butter, regular cheeses.
Eggs	Three egg yolks a week including those used in cooking; egg whites as desired.	More than 3 egg yolks a week.
Meat, Fish & Poultry	Lean, well-trimmed cuts of meat baked, broiled, roasted or stewed. Discard fat which cooks out	Fried meats unless fried in allowed oils; heavily marbled and fatty meats, bacon,

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FOODS FROM ANIMALS Meat, Fish & Poultry (cont'd.)	of meat. Chicken and Turkey (no skin), fish shellfish. Shrimp is low in fat but high in cholesterol. Use a 60 g (2 oz.) serving as a meat substitute no more than twice a week. 60 g (2 oz.) liver no more than once a week.	spare ribs, fatty corned beef, duck, goose, mutton, frankfurters, sausage, luncheon meats. Organ meats; since liver is rich in iron it should not be eliminated completely.
FATS	Oil and margarine made from polyunsaturated fats such as corn, cottonseed, soybean, sunflower, safflower - no limitation include at least 30 - 60 ml (2 - 4 tbsp) daily. Gravy, sauces, mayonnaise and salad dressings made with allowed oils. Olive and peanut oil not more than 30 ml (2 tbsp) daily.	Butter, regular margarine, coconut oil, palm oil, solid shortening; lard, bacon "drippings"; suet, regular gravies. Avocado pear.
MISCELLANEOUS		
Soups	Fat free broths	Soups made with cream, evaporated milk, whole milk or meat fat.
Beverages	Coffee, tea, cocoa powder in allowed milk, carbonated drinks, fruit juices, fruit flavoured drinks, vegetable juices.	Hot chocolate, eggnog, regular milkshakes, yogurt made from whole milk.
Condiments	Salt, pepper, herbs and other seasonings, ketchup, pickles, olives; spices (all kinds)	

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
MISCELLANEOUS		
Dessert	Fruit whips, fruit ices, gelatin desserts, plain puddings prepared with skim milk and eggs from allowance.	Patties
Sweets	In moderation: Honey, jam, marmalade, molasses, preserves, syrup, sugar, jellies.	Chocolate, coconut, sweets made with butter, cream, evaporated milk, coconut oil.

SUGGESTED MEAL PLAN

MORNING	NOON AND EVENING
Fruit or juice	Meat or fish (as allowed)
Cereal	Rice or substitute
Bread	Dark green leafy or yellow
Polyunsaturated fat	vegetable
Beverage	Polyunsaturated fat
	Fruit or Dessert
	Beverage

SAMPLE MENU

MORNING	NOON	EVENING
Orange juice	Baked chicken (no skin)	Steamed fish
Cornmeal porridge	Rice	Mashed potato
Skim milk	String beans	Lettuce and tomato
Bread	Carrots	Stewed fruit
Guava jelly	Fruit salad	Tea
Coffee	Cherry drink	

DIETS FOR HYPERLIPOPROTEINEMIAS

DESCRIPTION

The five diets for Hyperlipoproteinemia are highly specific regimens designed to control intake of nutrients involved in lipid metabolism. These include total fat, ratio of polyunsaturated to saturated fat, cholesterol, type and amount of carbohydrate, alcohol, and if weight reduction is indicated, total energy intake.

INDICATIONS

These diets are indicated for Types I and V Hyperlipoproteinemia and for moderate to severe cases of Types IIA, IIB, III and IV. If the patient is at ideal weight, the initial diet prescription is usually for the diet bearing the same number as the Hyperlipoproteinemia phenotype.

TYPE I

The diet is restricted to 25 - 35 grams of fat and may be a modification of the Fat Restricted (40 g fat) Diet. Omit the entire fat group to achieve a diet restricted to 25 grams of fat. Each 5 ml or teaspoon of fat added to the diet increases the total fat in the diet by 5 grams: therefore if "30 g fat" is ordered, 5 ml or 1 teaspoon of fat from the fat group may be used daily. Alcohol is not recommended. All other principles of the diet apply. All vegetables and fruits are usually tolerated well.

TYPE IIA

Use the Fat Controlled Low Cholesterol Diet as a basis with the following modifications:

1. Omit all egg yolk and organ meats (brain, kidney, sweetbread, liver, heart).
2. Limit beef, lamb, pork and ham to 90 g (3 oz.) 3 times a week.
3. Use up to 270 g (9 oz.) of poultry, veal, fish and shellfish per day.
4. Consume 5 ml (1 tsp.) polyunsaturated fat for each ounce of meat eaten.
5. Omit completely those foods listed under "Foods to Avoid" on the Fat Controlled Low Cholesterol Diet, page 81 - 83.
6. Alcohol may be used with discretion.

The National Heart and Lung Institute prints a series of publications under the general title "The Dietary Management of Hyperlipoproteinemia". A handbook for physicians and dietitians accompanies this series. These may be obtained by writing:

Office of Information
National Heart and Lung Institute
National Institutes of Health
Bethesda, Maryland 20014
U.S.A.

The following table taken from the handbook for physicians and dietitians summarizes the NIH series:

SUMMARY OF DIETS FOR TYPES I - V
HYPERLIPOPROTEINEMIA

	TYPE I	TYPE IIA	TYPE IIB & TYPE III	TYPE IV	TYPE V
DIET PRESCRIPTION	Low Fat 25-35 g	Low cholesterol Polyunsaturated fat increased	Low cholesterol approximately: 20% Cal. Pro 40% Cal. Fat 40% Cal. CHO	Controlled CHO, approximately 45% of Calories; Moderately re- stricted cho- lesterol	Restricted fat, 30% Calories; Controlled CHO, 50% of Calories Moderately re- stricted cholesterol
CALORIES	Not Restricted	Not Restricted	Achieve and maintain "ideal" weight, i.e., reduction diet if necessary	Achieve and main- tain "ideal" weight, i.e., reduction diet if necessary	Achieve and maintain "ideal" weight, i.e., reduction diet if necessary
PROTEIN	Total Protein intake is not limited	Total protein intake is not limited	High protein	Not limited other than control of patient's weight	High protein
FAT	Restricted to 25-35 g; Kind of fat not important	Saturated fat intake limited; Polyunsaturated fat intake increased	Controlled to 40% calories (polyunsatura- ted fats recom- mended in preference to saturated fats)	Not limited other than control of patient's weight (polyunsaturated fats recommended in preference to saturated fats)	Restricted to 30% of Calories (polyunsaturated fats recommended in preference to saturated fats)
CHOLESTEROL	Not Restricted	As low as possible; the only source of cholesterol is the meat in the diet	Less than 300 mg - the only source of cholesterol is the meat in the diet	Moderately restricted to 300 - 500 mg	Moderately restricted to 300 - 500 mg
CARBOHYDRATE	Not Limited	Not Limited	Controlled - Concentrated sweets are restricted	Controlled - Concentrated sweets are restricted	Controlled - Concentrated sweets are restricted
ALCOHOL	Not Recommended	May be used with discretion	Limited to 2 servings (substituted for carbo- hydrate)	Limited to 2 servings (substituted for carbo- hydrate)	Not recommended

NUTRITIONAL GUIDELINES FOR USE IN CORONARY CARE UNITS

The following nutritional pattern for use in the Coronary Care Unit is suggested for short-term use, i.e., the initial five to ten day period, following acute myocardial infarction.

- a) Nothing by mouth prior to evaluation by the physician. In most instances, intravenous solution started to facilitate administration of drugs required if arrhythmias and shock ensue.
- b) Patient to be re-evaluated for dietetic progression every 24 hours.
- c) For the first 24 hours, 500 to 800 kilocalories (1000 to 1500 ml) liquid diet, with only small amounts of liquid taken at a time. Foods which may be offered include: clear soups, broth, skim milk, fruit juices, weak tea, ginger ale and water.
- d) Energy level of 1000 to 1500 kilocalories to meet patient's metabolic requirements. Nutritional proportions should be, approximately: 20 per cent protein, 45 per cent carbohydrate and 30 to 35 per cent fat (low saturated fat; polyunsaturates as the primary source of dietary fat) with cholesterol limited to 300 mg per day.

Physicians should be alert to the risk of carbohydrate intolerance which may require reduction in carbohydrate and proportionate increase in protein.

- e) Beverages and other liquids served at body temperatures. Non-caffeine and decaffeinated beverages are preferred. Stimulants and extremes in temperature to be avoided.
- f) Small, frequent meals consisting of foods which are easily digested, free of gastric irritants, soft and low in roughage.
- g) Foods to be included: tender, lean cuts of meat; fish and poultry; tender, cooked or canned vegetables and fruits; plain breads; cooked cereals; simple puddings and gelatin desserts. Egg yolks limited to three a week.

* Source: Christakis, G., and Winston, M., Nutritional therapy in acute myocardial infarction. J. Amer. Dietet. Assoc. 63:233, 1973.

- h) Nutritional plan to be individualized on basis of patient's clinical status, physiologic and psychologic needs. Areas usually requiring modification are: carbohydrates, protein, fat, total energy, electrolytes and fluids.

SODIUM RESTRICTED DIETS

DESCRIPTION

The four levels of Sodium Restricted Diets are:

- a) 500 mg Sodium (strict) (22 mEq)
- b) 1 g Sodium (moderate) (43.5 mEq)
- c) 2 g Sodium (mild) (87 mEq)
- d) 3 - 4 g No added salt (130 - 180 mEq)

Diets should be prescribed in terms of milligrams (mg) or grams (g) of Sodium. Such terms as low salt, salt free or low sodium are non-descriptive and will be considered as a 2 g Sodium Restricted Diet.

A Sodium Restricted Diet may be calculated by adding the amounts of sodium in each food allowed per day. General guidelines for amounts of food allowed in each level of Sodium Restricted Diet may also be followed. Levels below 500 mg are not recommended but could be used for short term or tests only. Severe sodium restrictions are not necessary with the advent of anti-hypertensive medication. The effectiveness of the medication is enhanced by a mild restriction of sodium.

Salt substitutes contain potassium or ammonia bases and may be contra-indicated in some conditions. The physician may order a salt substitute but one should be used which contains no sodium.

Many convenience foods contain sodium and should not be used on a Low Sodium Diet. Salt is added to processed foods in the form of MSG (monosodium glutamate), sodium bicarbonate and other compounds containing sodium. With the wide variety of frozen foods and packaged mixes available to the consumer plus the sodium containing additives found in foods, it is extremely difficult for patients to follow less than a 2 g Sodium Restricted Diet. A 4 g Sodium Restricted or No Added Salt Diet is a practical level for home use. Labels should be read carefully.

INDICATION

Sodium Restricted Diets are indicated in congestive heart failure, hypertension, edema and kidney disease. Restricting sodium in the diet promotes loss of body water by reducing the sodium content in body tissues.

Sodium Restricted Diets are frequently accompanied by a high or low potassium diet. A list of sodium and potassium content of foods appears in Appendix C.

500 mg SODIUM DIET (22 mEq)

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS		
Bread and Cereals	Low sodium bread, biscuits, pancakes, cornbread and waffles made with low sodium baking powder, Cooked cereals prepared without salt. Puffed rice, puffed wheat, shredded wheat.	Sweet rolls, salted crackers, pretzels. Products made from commercial mixes, self raising flour and corn meal, salt, baking powder or soda. Instant and quick cooking hot cereals, and dry cereal containing sodium compounds.
Starchy Fruits, Roots and Tubers	White or sweet potatoes, yam, eddoes and other ground provisions, rice, noodles, spaghetti and other pasta, corn.	Instant potatoes and yam with sodium added. Potato chips, corn chips, plantain and breadfruit chips, salted popcorn.
LEGUMES	Dried peas and beans, unsalted nuts and unsalted peanut butter.	Salted nuts, salted peanut butter.
DARK GREEN LEAFY AND YELLOW VEGETABLES 125 ml ($\frac{1}{2}$ cup) = 9 mg sodium	Fresh, unsalted, low sodium canned, except those listed under Foods to avoid. Low sodium tomato juice. (Greens limited to only 125 ml or $\frac{1}{2}$ cup serving daily.)	Vegetables, canned or frozen with salt, frozen peas, lima beans, mixed vegetables, corn, sauerkraut, pickles and others in brine. Beets, beet greens, carrots, spinach, celery, tomato juice and other vegetable juice to which sodium has been added.
FRUITS	All allowed except dried fruit.	

500 mg SODIUM DIET (22 mEq)

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FOODS FROM ANIMALS Milk 250 ml (1 cup) = 120 mg sodium Meats 30 g (1 oz.) = 25 mg sodium	500 ml (2 cups) milk or milk products except those listed under foods to avoid, home cultured buttermilk. All fresh or fresh frozen meats, poultry and fish.	Commercial buttermilk, malted milk, instant milk mixes. Cured, salted, canned or smoked meats, poultry or fish such as bacon, ham, corned beef, luncheon meat, frankfurters, sausage, sardines, regular peanut butter and regular cheese. Meat substitutes to which sodium has been added.
Eggs 1 = 70 mg sodium	One egg daily	More than one egg per day
FATS	Unsalted butter or margarine, vegetable oils. Avocado. Unsalted nuts.	Bacon fat, salt pork, regular margarine or butter. Regular commercial salad dressings or mayonnaise, olives, salted nuts.
BEVERAGES	Coffee, instant coffee, decaffeinated coffee, tea, carbonated beverages.	Beverage mixes, including instant cocoa and fruit flavoured powders.
DESSERTS & SWEETS	Desserts made with plain gelatin and fruit juice. Unsalted bakery goods. Ice cream, pudding and custard made from milk and egg allowance. Hard candy.	Desserts made with salt, baking powder, soda, prepared pudding mixes, gelatin, commercial sweets (candy) other than those allowed.
MISCELLANEOUS	Sugar, syrup, honey, jelly, jam, sugar substitutes, Pepper, spices, garlic and onion powder, dry mustard. Lemon juice, bay leaf, sage, all spice, cinnamon, nutmeg, vinegar, chili powder, parsley, curry powder.	Salt, regular ketchup, mustard, pickles, horse-radish, celery salt, onion salt, garlic salt and monosodium glutamate (MSG), meat sauce, barbecue sauce. All commercially prepared or convenience foods. Baking powder, baking soda.

BASIC 500 mg SODIUM DIET (22 mEq)

500 ml (2 cups) Milk	120 mg x 2	=	240 mg
1 Egg		=	70 mg
150 g (5 oz.) Meat	25 mg x 5	=	125 mg
4 Vegetables	9 mg x 4	=	36 mg
Low Sodium Bread	5 mg x 3	=	15 mg
3 Fruits	2 mg x 3	=	6 mg
	TOTAL		<u>492 mg</u> =====

SUGGESTED MEAL PLAN

MORNING	NOON	EVENING
Fruit	60 g (2 oz.) Meat or	90 g (3 oz.) Meat or
Cereal	Substitute	Substitute
Meat or Substitute	Potato or Substitute	Potato or Substitute
Low Sodium Bread	Vegetable	Vegetable
Low Sodium Margarine/ Butter	Low Sodium Bread	Low Sodium Bread
Beverage	Low Sodium Margarine/ Butter	Low Sodium Margarine/ Butter
	Fruit	Fruit
	Beverage	Beverage

SAMPLE MENU

MORNING	NOON	EVENING
Orange juice	60 g (2 oz.) Baked Chicken	90 g (3 oz.) Roast Beef
Unsalted Cream of Wheat	Rice	Baked Potato
1 Scrambled Egg	Unsalted Green Beans	Unsalted Pumpkin
Low Sodium Toast	Tossed Salad	Sliced Tomato
Low Sodium Margarine	Unsalted Salad Dressing	Pineapple
250 ml (1 cup) Milk	Low Sodium Bread	250 ml (1 cup) Milk
Coffee	Low Sodium Margarine	
	Fruit Salad	
	Iced Tea	

1 GRAM (1000 mg) SODIUM DIET (43.5 mEq)

Use the basic 500 mg Sodium Diet with the following additions:

1. Three slices of regular bread are used in place of low sodium bread. 1 slice of regular bread = 125 mg sodium.
2. 15 ml (3 tsp) regular butter or margarine is used.
5 ml (1 tsp) butter = 50 mg sodium.

1000 mg SODIUM DIET

500 ml (2 cups) milk	120 mg x 2	=	240 mg
1 Egg		=	70 mg
150 g (5 oz.) meat	25 mg x 5	=	125 mg
3 slices regular bread	125 mg x 3	=	375 mg
15 ml (3 tsp) regular butter or margarine	50 mg x 3	=	150 mg
4 vegetables	9 mg x 4	=	36 mg
3 fruits	2 mg x 3	=	6 mg
	TOTAL		<u>1002 mg</u> =====

SAMPLE MENU

MORNING

Fruit juice
Unsalted Cornmeal
porridge
1 Scrambled Egg
1 Slice Regular Toast
5 ml (1 tsp) Regular
Margarine
Coffee
250 ml (1 cup) Milk

NOON

90 g (3 oz.) Baked Chicken
120 ml ($\frac{1}{2}$ cup) Mashed Yam
Steamed Pumpkin
Stewed Guavas
Lemonade

EVENING

60 g (2 oz.) Hamburger
Pattie
Sliced Tomato
1 Slice Regular Bread
5 ml (1 tsp) Regular
Margarine
Tea
250 ml (1 cup) Milk

2 GRAM (2000 mg) SODIUM DIET (87 mEq)

1. Foods may be cooked or canned with salt but no salt is added after food is cooked. Salt used in preparation of food should be limited to 5 ml (1 tsp) daily.
2. Omit the following foods with high sodium content: Ham, bacon, corned beef, luncheon meat, frankfurters, sausage, salt pork, pigtail, salt meat, smoked or canned fish or meat. Ketchup, chili sauce, mustard, soya sauce, Monosodium Glutamate (Vte-Sin, Accent), celery salt, onion salt, garlic salt and seasonings containing salt, Worcester sauce, bouillon cubes, canned soups, tomato or vegetable juices, pickles, olives, processed cheese, cheese spreads, salted crackers, potato chips, plantain chips, breadfruit chips, salted nuts.
3. Several spices may be used for flavour. See those listed under "Flavouring Ideas".

SAMPLE MENU

MORNING

1 Serving fruit
1 Boiled Egg
2 Slices Regular Bread
10 ml (2 tsp) Margarine
Coffee
250 ml (1 cup) Milk

NOON

90 g (3 oz.) Beef Stew
1 Serving Rice & Peas
1 Slice Sweet Potato
1 Serving Carrots
Stewed Fruits
Lemonade

EVENING

60 g (2 oz.) Baked Fish
Sliced Tomatoes
1 Slice Bread
5 ml (1 tsp) Margarine
Tea
250 ml (1 cup) Milk

NO ADDED SALT (Approximately 3 - 4 g Sodium) DIET

All foods are allowed as on a regular diet, with a moderate amount of salt permitted in preparation of food. No salt should be added after the food is cooked.

LOW SODIUM BAKING POWDER

The following recipe can be prepared by a pharmacist:

Potassium Bicarbonate	39.8 g
Cornstarch	28.0 g
Tartaric Acid	7.5 g
Potassium Bitartrate	56.1 g

5 ml (1 tsp) regular baking powder = 7.5 ml (1½ tsp)
sodium-free baking powder. Cream of tartar and yeast may be
used without restriction.

FLAVOURING IDEAS

SEASONINGS AND FLAVOURING AIDS ALLOWED ON SODIUM RESTRICTED DIETS

All Spice	Mustard, dry, or mustard seed
Almond extract	Nutmeg
Anise seed	Onion, onion juice or onion powder
Basil	Orange extract
Bay leaf	Oregano
Bouillon cube, low sodium	Paprika
dietetic if less than 5 mg	Parsley or parsley flakes
sodium per cube	Pepper, fresh green or red
Caraway seed	Pepper, black, red or white
Cardamon	Peppermint extract
Catsup, dietetic	Pimento peppers for garnish
Chili powder	Poppy seed
Chives	Poultry seasoning
Cinnamon	Purslane
Cloves	Rosemary
Cocoa (5 - 10 ml or 1 - 2 tsp	Saffron
daily)	Sage
Coconut	Salt Substitutes*
Cumin	Savory
Curry	Sesame seeds
Dill	Sorrel
Fennel	Sugar
Garlic, garlic juice or	Sugar substitutes*
garlic powder	Tarragon
Ginger	Thyme
Horseradish root or horseradish	Turmeric
prepared without salt	Vanilla extract
Juniper	Vinegar
Lemon juice or extract	Wine if allowed
Mace	Walnut extract
Maple extract	
Marjoram	
Mint	

* Without sodium, and if approved by physician

FLAVOURING IDEAS

FOR MEAT, POULTRY, FISH, EGGS

- BEEF: Bay leaf, dry mustard, green pepper, garlic powder, marjoram, nutmeg, onion, sage, thyme.
- CHICKEN AND TURKEY: Paprika, parsley, poultry seasoning, sage, saffron, tarragon, thyme.
- LAMB: Basil, curry, garlic, marjoram, mint, rosemary, sage.
- PORK: Garlic, marjoram, onion, oregano, rosemary, sage, thyme.
- VEAL: Basil, bay leaf, curry, ginger, marjoram, mint, oregano, rosemary, sage, tarragon.
- FISH: Bay leaf, curry, dry mustard, green pepper, lemon juice, marjoram, mushrooms, paprika, saffron, sage, tarragon, thyme.
- EGGS: Basil, curry, dry mustard, green pepper, marjoram, onion, paprika, parsley, rosemary, saffron, thyme.

FOR VEGETABLES

- BEETS: Cloves, ginger, lemon juice, tarragon, thyme.
- CARROTS: Cinnamon, ginger, marjoram, mint, nutmeg, parsley, sage, thyme.
- CORN: Green pepper, pimento.
- CABBAGE: Cumin, marjoram, mint, oregano, tarragon, turmeric.
- GREEN BEANS: Lemon juices, marjoram, mint, nutmeg, oregano, rosemary, tarragon, thyme.
- EGGPLANT: Marjoram, sage, thyme.
- ONIONS: Sage, thyme.
- PEAS: Green pepper, marjoram, onion, rosemary, sage, thyme.
- POTATOES: Green pepper, mace, mint, onion, parsley, paprika, rosemary, thyme.
- SQUASH: Basil, cinnamon, ginger, mace, nutmeg, onion.
- TOMATOES: Basil, bay leaf, marjoram, onion, oregano, sage, thyme.

SEASONINGS AND FLAVOURINGS NOT ALLOWED
ON SODIUM RESTRICTED DIETS

- SALTS: regular, flavoured or seasoned such as celery, garlic, onion.
- MEAT
FLAVOURINGS: A-1 Sauce, Kitchen Bouquet, meat tenderizers, soya sauce, Tabasco sauce, other bottled meat sauces and barbecue sauces.
- MISCELLANEOUS: Bouillon cubes, ketchup, chili sauce, horseradish (prepared with salt), monosodium glutamate, canned mushrooms, prepared mustard, olives, pickles, celery flakes or leaves, celery seed.

SODIUM COMPOUNDS TO AVOID

These are the most common sodium compounds added to foods. The words "soda", "sodium" or the symbol 'Na' on labels will indicate products that must be avoided. Do not use foods that contain the following:

Salt
Baking Soda (bicarbonate of soda, Sodium bicarbonate)
Baking powder
Monosodium glutamate (MSG)
Brine (salt and water)
Sodium cyclamate
Sodium saccharin
Sodium propionate
Sodium sulfite
Di-Sodium benzoate

PURINE RESTRICTED DIET

DESCRIPTION

This diet is designed to provide a reduced intake of purine nitrogen. The metabolism of purines results in the formation of uric acid. In the past dietary restriction alone was used in the management of elevated blood uric acid levels. Medications have proved effective in controlling serum urate levels.

INDICATIONS

This diet may be used as an adjunct to drug therapy for patients with gout or for the evaluation of serum uric acid levels and uric acid excretion. Fasting or excessive intake of alcohol increase serum uric acid levels and thus are to be avoided. Weight reduction is beneficial for overweight individuals with gout.

ADEQUACY

This diet meets the RDA for adults for all nutrients except iron for females.

SUGGESTED MEAL PATTERN

Since there is much controversy in current literature concerning the value of restricting purine nitrogen in the dietary treatment of gout, only those foods known to be very high in purine are eliminated from the diet. Fluid intake should never be drastically reduced. See Appendix E for a table of purine content of foods.

FOODS TO AVOID

- All organ meats (heart, kidney, liver, sweetbreads, brains)
- Anchovies
- Herring
- Mackerel
- Fish Roe
- Meat extractives (broths and gravies)
- Sardines
- Alcohol - avoid excessive intake

LACTOSE RESTRICTED DIET

DESCRIPTION

The Lactose Restricted Diet is based on the Regular Diet with the omission of unfermented milk and milk products. All milk products contain lactose; however, those which are fermented are often tolerated by individuals who cannot tolerate whole milk. All labels should be read carefully for the addition of lactose milk or milk solids. When these are listed as major ingredients the food should be avoided or used as tolerated. (Lactalbumin, lactate and calcium compounds are salts of lactic acid and do not contain the disaccharide lactose.)

INDICATIONS

The Lactose Restricted Diet is indicated for individuals with symptomatic lactose intolerance. These symptoms may include diarrhoea, flatulence, abdominal pain or bloating.

ADEQUACY

The Lactose Restricted Diet is low in calcium. It is adequate in all other nutrients. A supplementary source of calcium may be desirable.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	Rice, macaroni, noodles, spaghetti, yam, potato, breadfruit and other starchy fruits, roots and tubers; bread and flour products, cornmeal, oats, etc.	All prepared with milk and milk products including bread and cakes: cereals processed with milk or milk powder.
LEGUMES	Peas, beans and nuts, peanut butter, soya bean milk.	All prepared in cream sauce made with milk or cream.
DARK GREEN LEAFY AND YELLOW VEGETABLES	All kinds	All prepared in cream sauce made with milk or cream.
FRUITS	All kinds	
FOODS FROM ANIMALS	All meat, fish, poultry, eggs, fermented cheeses, (cheddar and any cheese aged with bacteria)	Milk, plain or in foods, sausages, luncheon meat or other meat products with added lactose. Cottage cheese.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FATS	Butter, margarine, oil, lard. REAL mayonnaise, shortening, peanut butter.	Cream
MISCELLANEOUS	Sugar, syrup, jelly, jam, honey, marmalade, herbs and spices, gelatin dessert. Coffee, tea, carbonated beverages, fruit drinks, non-dairy products.	Milk chocolate, milk, milk puddings and beverages made with milk, ice cream, custard. Commercial soups containing milk or milk products.

GLUTEN FREE DIET

DESCRIPTION

The diet contains no wheat, rye, barley or oat gluten but allows the use of rice and corn and must provide high levels of energy, protein and iron. Where the condition of gluten intolerance is permanent, very close supervision and strict adherence to the diet are essential.

INDICATIONS

This diet is indicated where there is a marked intolerance to gluten resulting in gastrointestinal disturbances, including mal-absorption and anaemia as illustrated in celiac disease.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
STAPLE FOODS	i) Cornmeal, cornflakes, cornstarch, cornbread (No wheat flour added), rice, rice flour ii) Starchy fruits, roots and tubers, i.e. all provision and their products: arrowroot flour, sago, potato flour, banana flour, cassava flour.	All foods made from wheat, oats, barley and rye - e.g. wheat flour, bread, pastries, dumplings, oatmeal, cream of wheat, wheat germ, barley, macaroni, spaghetti
LEGUMES	Fresh - All Dried - All Canned - In clear liquid only	Canned in sauce
DARK GREEN, LEAFY YELLOW AND OTHER NON-STARCHY VEGETABLES	All unless in thickened sauce or breaded.	Canned in thickened sauce. Prepared in sauce or breaded.
FRUITS	All	None
FOODS FROM ANIMALS	Plain meats, fish and poultry.	Canned meat products.

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
FOODS FROM ANIMALS (cont'd.)	Milk, cheese, eggs	Any meats which may have flour or bread crumbs added, e.g. stuffings, meat loaf, "accra" (fish cakes), meat patties, sausage, croquettes.
FATS	Butter, margarine, ghee, oils, peanut butter, pure mayonnaise.	Commercial salad dressings.
MISCELLANEOUS	Carbonated beverages, clear 'fruit' drinks, e.g. sorrel, mauby, ginger-beer, tea, coffee and cocoa with no flour added. Hard candy, sugar, syrups, sno cones, gelatin desserts, home-made custards, ice cream and puddings with no flour added. Clear soups. Pure vegetable soups. Fresh and dried herbs and seasonings. Flavourings.	Cocoa and coffee if flour is added. Potsum, malted milk, ovaltine, beer, ale, cakes, pies, pastries. Ice cream cones. Soups thickened with flour. Ketchup. Prepared mustard. Meat sauces. Regular baking powder. Stock cubes and powders containing flours. All malt products.

CHARTING

SUGGESTED MEAL PLAN

MORNING

Fruit
 Staple
 Food from Animals
 Fat
 Beverage

NOON AND EVENING

Food from animals
 Staple
 Legumes
 Vegetable
 Fat
 Fruit

SAMPLE MENU

MORNING

Orange juice
 2 corn muffins
 1 egg
 Margarine
 Jam
 Hot cocoa with
 milk and sugar

NOON

60 g (2 oz.) roast beef
 1 slice yam
 Rice
 Red beans
 Spinach
 Butter
 Soursop drink

EVENING

60 g (2 oz.) plain baked
 chicken
 Mashed potato
 Buttered carrots
 Lettuce
 Tea with milk and sugar

BEDTIME

Milk
 Cornflakes

NOTE: Warn patients that all labels on prepared and packaged foods including flours must be read carefully and that due care must be exercised when eating out. These are some ingredient names that mean gluten is present: hydrolysed vegetable protein, farina, malt, semolina, vegetable gum, emulsifiers, stabilizers.

GUIDELINES FOR RECORDING NUTRITIONAL INFORMATION IN MEDICAL RECORDS

The dietitian, like other members of the health team, cooperates in carrying out the written orders of the responsible physician. By promptly recording the patient's medical record pertinent, meaningful observations and information of food habits, food acceptance and dietary treatment, the dietetic staff uses the only reliable means of documenting regular communication with the physician and other professionals participating in the patient's total care.

Although verbal communication is informative, it is sporadic and does not replace the need for documentation that will reach all members of the health team involved in the patient's care. Documented communication is necessary for patients receiving short-term care and of prime importance for those patients requiring prolonged care if a unified appraisal of existing problems is to be made and plans for coordinating management are to be carried out.

Brevity without sacrifice of essential facts is the essence of effective recording. Dietary progress notes and summaries should be as brief as is consistent with good communication, should avoid professional jargon and should have meaning for all responsible members of the health care team contributing to the patient's care. When professional opinion is expressed, it should be phrased to indicate clearly that it is the view of the person recording.

Remarks that are critical of treatment carried out by others, that indicate bias against the patient, or that are unprofessional should never appear in the medical record.

A "Department of Dietetics" stamp will readily identify the dietetic staff entries on progress notes forms. Patients on normal or near-normal diets occasionally present problems requiring dietetic entries. Such entries should be flagged to apprise the physician of nutrition information or problems.

WHO IS TO RECORD

Entries in patient medical records may be made only by individuals so authorized by the institution's policies, which are usually developed in cooperation with the medical staff. When the services of a qualified dietitian are not available on a regular full-time

* Adapted from the American Hospital's Association publication "Guidelines - Recording Nutritional Information in Medical Records", 1976.

Guidelines for Recording Nutritional Information

basis, dietetic technicians or dietetic assistants may be designated as authorized alternate to record current, pertinent nutritional care information commensurate with the responsibility delegated to their position within the institution. All entries should be dated and signed with the name and title of the person making the entry.

WHAT TO RECORD

The qualified dietitian or authorized alternate is responsible for recording the following subject items for patients on modified diets:

1. Confirmation of diet order:
 - a) Within 24 hours of admission, a notation that the prescribed modified diet order is being fulfilled (except for those patients not being fed orally).
 - b) All subsequent orders by the physician for a modified diet.
2. Summary of dietary history
 - a) Evaluation of the patient's diet pattern, nutrient deficit, life-style, food allergies and socio-economic resources essential for nutritional care planning.
 - b) Assessment of the patient's awareness of the relationship of diet to disease, which has a direct bearing on plans for individual nutritional care.
3. Nutritional care therapy
 - a) Type of diet and, if indicated, the number of calories or other nutrients, such as sodium, cholesterol, or saturated fat.
 - b) Daily record of patient's nutrient intake during a period of quantitative or qualitative control of food and fluid intake, medication, or other pertinent therapy.
 - c) Report of the patient's tolerance to the prescribed diet modification, including the effect of the patient's appetite and food habits on food intake and any substitutes made.
 - d) Notations of any changes in diet orders and diet instruction plans.
 - e) Brief written communications between dietetic staff

and physician and/or nursing service personnel pertinent to patient's nutritional care.

- f) Request, if indicated, for referral of patient to appropriate agency for assistance in following diet at home.

4. Nutritional care discharge plan

- a) Description of diet instructions given to patient and/or family. If non-preprinted instructions are given to patient or family, a copy should be placed either in the patient's medical record or on file in the medical record department's reference file.
- b) Description or copy of diet pattern forwarded to referral agency or nursing home facility for subsequent patient care.
- c) Plan for patient's continued nutritional care, including any dates for return visits. If nutritional care follow-up reverts to the physician's office practice, this should be noted in the patient's record.

5. Dietetic consultation

- a) Consultation reports containing a written opinion by the dietitian that reflects an assessment of the patient's dietary history, examination of the patient's medical record for any previous dietetic care, and any recommendations for normal or modified diet. Subsequent counseling of the patient or family should be recorded in the patient's medical record.

GROWTH CHARTS

OBJECTIVES AND USES

Growth charts are vital tools in the promotion of healthy growth of infants and young children. If properly used, they alert the health worker to early deviations from normal growth requiring decisions on care or referral. They also serve as an educational tool for the family of the child, and as a visual record of the nutritional and health status of the child and of important events such as immunizations. Taken together, growth charts can be used to monitor growth at community level and thus to influence planning.

ALTERNATIVE MODELS

GOMEZ CHARTS

Most growth charts in use in the Caribbean have been designed using the Harvard (Boston) references^{1,2} and the Gomez Classification³. These are not very satisfactory. The Harvard references were collected some years ago from a limited sample and do not include all the anthropometric variables likely to be utilized in nutritional assessment.

The Gomez Classification is based on the response to hospital treatment of severely malnourished children in Mexico City quarter of a century ago; they are not based on the variation of measurements in the population as a whole.

Figure I shows a growth chart based on the Gomez Classification. Cut off points are at 90%, 75% and 60% reference weight for age.

THE WHO CHARTS

In 1978, following intensive international trials WHO published a Growth Chart for International Use in Maternal and Child Health⁴. The reference values used were recently collected from large samples using accurate techniques. They came from the Fels Research Institute (up to 24 months) and the United States National Child Health Examination Survey (from 24 to 60 months).

The WHO chart is in two formats: a "home chart" and a "service chart". The Home Chart, a "unisex chart", is easy to understand. It incorporates a "road to health" of weight for age along which most children should travel. This chart can be retained by the mother at home and thus be available for family consultations and home visits by health staff.

The WHO "Service Chart" is slightly different for boys and girls. It is more complex than the "Home Chart". The weight for age grid incorporates six "channels", useful for monitoring community nutrition status.

Figure 2 shows the "Home Chart" as devised by WHO and Figure 3 the "Service Chart" (the girl's chart is shown).

The back of the Service Chart incorporates a "height for age grid".

Table 1 shows the meaning of the six channels in the Service Chart. The "road to health" in the Home Chart bounded by two lines represents Channel C of the Service Chart.

THE CARIBBEAN

It can be expected that Caribbean countries will move over to the WHO Charts, or modifications of these charts, for community use in the near future. One such example is the "Child Health Passport". Somewhat different charts are needed for monitoring the response of children being treated in hospitals for severe protein-energy malnutrition.

An example of such a hospital chart can be seen in Figure 4.

Detailed instructions on the use of all these charts are beyond the scope of this book. They can be obtained from the Caribbean Food and Nutrition Institute.

REFERENCES

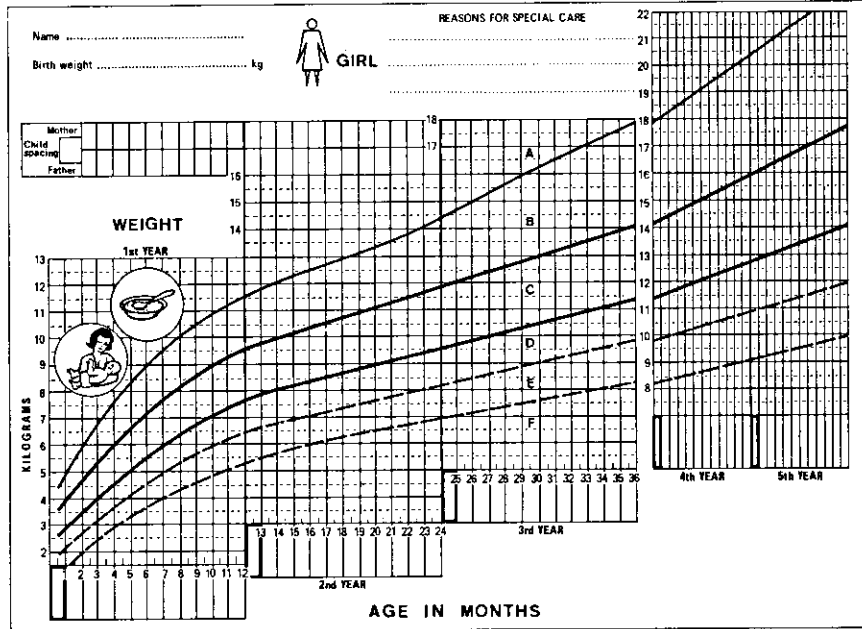
1. Stuart, H.C. and Stevenson, S.S. (1959). "Physical Growth and Development" in Nelson, W. (ed.) "Textbook of Pediatrics" 7th edition, Philadelphia Saunders.
2. Jelliffe, D.B. (1966). "The Assessment of the Nutritional Status of the Community". WHO Monograph Ser. No. 53
3. Gomez, F., Ramos-Galvan, R., et al. (1956). "Mortality in Second and Third Degree Malnutrition". J. Trop. Pediat. 2: 77-83
4. World Health Organization, (1978) "A Growth Chart for International Use in Maternal and Child Health Care. Guidelines for Primary Health Care Personnel". WHO Monograph Ser. No. 53

Table 1. Reference weight values for the service-based chart

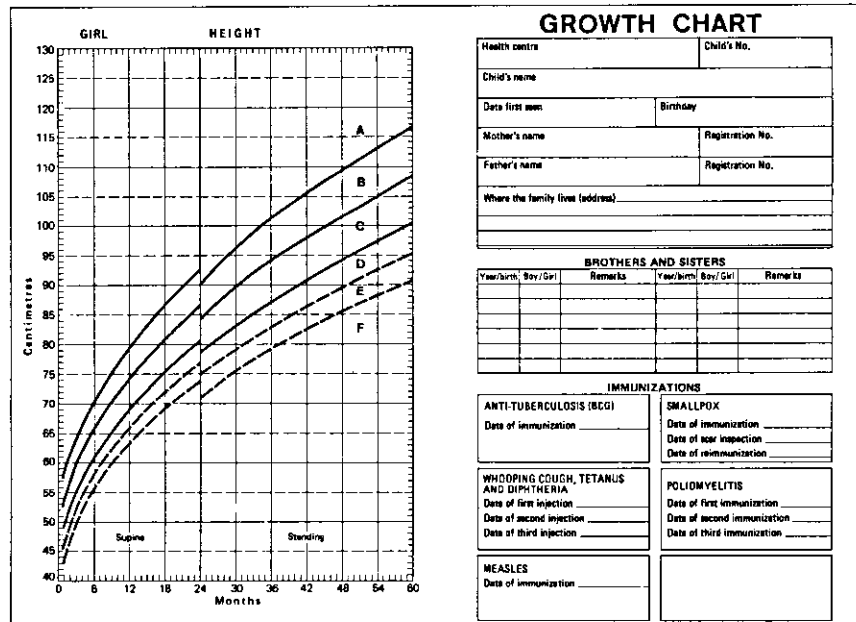
Limits	Channel
Greater than 97th percentile	A
Between 97th percentile and 50th percentile	B
Between 50th percentile and 3rd percentile	C
Between 3rd percentile and -3 standard deviation	D
Between -3 standard deviation and -4 standard deviation	E
Less than -4 standard deviation	F

Fig. 3. Service chart (for girl) -

A. Face of chart



B. Reverse of chart



DIETARY COUNSELING

The diet history form was developed for use in determining a person's eating habits, food likes and dislikes and need for dietary counseling. If desired, the front page and the entire back page may be filled out by the patient who is capable of reading and writing.

Utilizing the information gathered from the diet history, determine:

- 1) those positive aspects of the diet which should be reinforced. Something good can be found in almost every diet and every effort should be made to impose as few changes as possible at a time;
- 2) any nutrient deficiencies and types of dietary counseling needed to correct them or make them conform to the diet orders.

In the diet counseling session, the instructions should be in simple terms understood by the patient. Written instructions should be given and visual aids utilized when appropriate. Other members of the family may be included in the counseling session. This is especially important when some one other than the patient does the food purchasing and/or meal preparation.

In some countries, community resources may be utilized by the patients after they go home from the hospital. A referral may be made to public health nurses, nutritionists and community nutrition workers who can provide dietary assistance.

DIET HISTORY

Name _____ Age _____ Ethnic Group/Religion _____

Address _____

Reason for Diet Referral _____

Referred by _____

Physician's diet order _____

Height _____ Weight _____ Desirable Weight _____

Other pertinent lab data _____

Has a doctor, nurse, dietitian or nutritionist ever told you to follow a diet? _____

When? _____ What did this person tell you? _____

Are you still on this diet? _____ What was the result of the diet? _____

What foods do you like best? _____

What foods do you not eat? _____

Who cooks most of your food? _____

Who else eats the foods that are cooked? (No., ages, etc.) _____

Who does the food shopping? _____

About how much money is spent per week for food? _____

Do you get any foods that you don't buy? _____

What _____ From home garden? _____

Other (including any government donated food programmes)? _____

Do you have in working condition, a refrigerator? _____

A stove? _____ With an oven? _____ With a broiler? _____

How many meals do you eat away from home each week? _____ Where? _____

How often do you take laxatives? _____ What kind? _____

How often do you take vitamins? _____ What kind? _____

What medicines do you take regularly? _____

What type of work, exercise or leisure activities do you do each day? _____

Is there anything you would like considered in planning your diet (nationality, food preferences, religious rules, difficulty in chewing, etc.)?

Do you believe that you are intolerant or allergic to any food? _____

Specify _____

Comments or observations of interviewer (include impression of validity of information given):

Date of next appointment _____

Interviewer: _____

Position: _____

Date: _____

FOOD FREQUENCY CHECKLIST

INSTRUCTIONS

Indicate whether or not you eat the following foods by checking the "NEVER EAT" or "EAT" for each item. For each food you have checked "EAT", write the approximate number of times you eat it in a day or week. If you eat any particular food less than once a week do not write anything in the column "WEEK".

In some cases, more than one food has been listed on a line. If you do not eat all of these foods, underline the specific food you eat. A space has been provided at the end for you to write in foods not listed which you regularly eat.

FOOD INTAKE (24 HOUR RECALL)

INSTRUCTIONS

Using the attached form, list the foods you ate yesterday.

Record anything you eat and drink in each 24 hour period.

Remember to write down when you ate or drank each food and where this was.

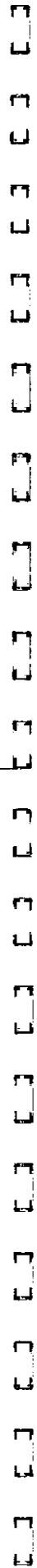
Describe each food fully. Indicate whether it is raw or cooked. If cooked, tell how it was prepared (for example: fried, boiled) and how it was served, for example, was anything added like margarine, oil, salad dressing, sugar, syrup, honey, etc.

Record the amount of each food and beverage. If you are uncertain about the quantity, please estimate (e.g. 125 ml or $\frac{1}{2}$ cup, 30 ml or 2 tbsp., etc.).

FOOD	NEVER EAT	EAT	DAY	WEEK	HOW MUCH
<u>FOODS FROM ANIMALS</u>					
Milk, whole					
Milk, skim					
Evaporated milk					
Low fat milk 2%					
Condensed milk					
Cheese					
Ice Cream					
Fish					
Eggs					
Chicken					
Beef, Veal, Lamb					
Liver					
Pork, Ham					
Luncheon meats					
Sausages					
Sardines					
<u>FATS</u>					
Bacon, Salt Pork					
Butter, Margarine					
Cooking fat, oil					
Salad Dressing					
Mayonnaise					
Avocado					
<u>MISCELLANEOUS</u>					
Cakes, Cookies					
Pie, Pastry					
Sugar					
Syrup					
Molasses					
Honey					
Sweets					
Jam, Jelly					
Preserves					
Carbonated Beverages					
Beer, Stout, Malt, etc.					
Whiskey, Rum, Gin, etc.					

OTHER FOODS NOT LISTED

Recommendations and any referrals made:



Food Frequency Checklist

FOOD	NEVER EAT	EAT	DAY	WEEK	HOW MUCH
<u>STAPLES</u>					
<u>(1) BREAD, RICE AND CEREALS</u>					
Cream of Wheat					
Corn meal					
Rice					
Spaghetti, Noodles					
Macaroni					
Bread					
Bakes					
Biscuits					
Crackers					
<u>(2) STARCHY FRUITS, ROOTS & TUBERS</u>					
Potato (sweet, irish)					
Breadfruit, Yam					
Other starchy vegetables					
<u>LEGUMES</u>					
Dried beans, Peas					
Nuts					
Peanut Butter					
<u>DARK GREEN LEAFY AND YELLOW VEGETABLES</u>					
Greens, dark & leafy					
Yellow vegetables (carrots, etc.)					
<u>FRUITS</u>					
Fresh fruit, or					
Juice					
Fruit, canned					

APPENDICES

APPENDIX A

TABLE OF WEIGHTS AND MEASURES

1 tsp. = 5 g = 5 cc = 5 ml

3 tsp. = 1 tbsp.

1 tbsp. = $\frac{1}{2}$ oz. = 15 g = 15 cc = 15 ml

2 tbsp. = 1 oz. = 30 g (actual 28.35 g) = 30 cc = 30 ml

16 tbsp. = 8 oz. = 1 cup = 250 g = 250 cc = 250 ml

2 cups = 16 oz. = 1 pint = 500 g = 500 cc = 500 ml

2 pints = 32 oz. = 1 quart = 1000 g = 1000 cc = 1000 ml

1 cup = 250 ml

$\frac{3}{4}$ cup = 200 ml

$\frac{2}{3}$ cup = 175 ml

$\frac{1}{2}$ cup = 125 ml

$\frac{1}{3}$ cup = 75 ml

$\frac{1}{4}$ cup = 60 ml

1 inch = 2.54 centimetres

1 litre = 1.0567 quarts

1 kilocalorie = 4.18 kilojoules

1 milliequivalent = one thousandth of an equivalent

1 microgram (mcg) = one thousandth of a milligram

1 milligram (mg) = one thousandth of a gram

1 gram (g) = one thousandth of a kilogram = 1 cc = 1 ml

4 quarts = 1 gallon

4 pecks = 1 bushel

1 pound = 453.6 g

2.2 pounds = 1 kilogram

To convert ounces to grams multiply by 30

To convert grams to ounces divide by 30

To convert pounds to kilograms divide by 2.2

To convert kilograms to pounds multiply by 2.2

To convert inches to centimetres multiply by 2.54

APPENDIX B**MILLIGRAM-MILLEQUIVALENT CONVERSION TABLE**

MILLIEQUIVALENTS	SODIUM GRAMS	(EQ. WT. 23) MILLIGRAMS	POTASSIUM GRAMS	(EQ. WT. 39) MILLIGRAMS
10	0.23	230	0.39	390
20	0.46	460	0.78	780
25.6	-	-	1.00	1000
30	0.69	690	1.17	1170
40	0.92	920	1.56	1560
43.5	1.00	1000	-	-
50	1.15	1150	1.95	1950
60	1.38	1380	2.34	2340
70	1.61	1610	2.73	2730
80	1.84	1840	3.17	3170
90	2.17	2170	3.51	3510
100	2.30	2300	3.9	3900
128	-	-	5.0	5000
217.5	5.00	5000	-	-
256	-	-	10.0	10,000
435	10.0	10,000	-	-

$$\text{Milliequivalents Na or K} = \text{grams Na or K} \times \frac{1 \text{ Eq. Wt.}}{\text{Eq. Wt. in Grams}} \times \frac{1000 \text{ meq}}{1 \text{ Eq. Wt.}}$$

$$\text{Grams Na or K} = \text{meq. Na or K} \times \frac{1 \text{ Eq. Wt.}}{1000 \text{ meq.}} \times \frac{\text{Eq. Wt. in grams}}{1 \text{ Eq. Wt.}}$$

APPENDIX C

SODIUM AND POTASSIUM CONTENT OF FOODS

FOOD GROUPING AND LISTING

Foods in the Tables are grouped under 12 headings in the sequence found in the CFNI Food Composition Tables. The groups are as follows:

- Group 1 : Cereals
- Group 2 : Starchy Fruits, Roots and Tubers
- Group 3 : Sugars and Syrups
- Group 4 : Pulses, Nuts and Oilseeds
- Group 5 : Vegetables
- Group 6 : Fruits
- Group 7 : Meat and Poultry
- Group 8 : Eggs
- Group 9 : Fish and Shellfish
- Group 10 : Milk and Milk Products
- Group 11 : Fats and Oils
- Group 12 : Miscellaneous Foods

TERMS AND SYMBOLS

Trace: denotes that the amount present is insignificant

- : indicates no data available or available data not reliable

TABLE 1: COMPOSITION OF FOODS IN 100g EDIBLE PORTION

FOOD AND DESCRIPTION	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
1. CEREALS			
Barley, pearled, raw	3	120	3
Corn, whole kernel, canned, yellow	310	200	3
" , cornmeal, whole grain	1	248	1
" , immature, raw	Trace	280	1
Cornflour	52	61	3
Cornflakes, added nutrients	1005	120	1
Popcorn	3		1
Oatmeal, rolled oats	33	370	3
Rice, brown, raw	9	214	1
" , white unenriched	5	92	1
" , parboiled	9	150	1
" , flour	5	241	2
Wheat flour, all purpose:			
enriched	2	95	1
unenriched	2	95	1
Flour, whole wheat	3	370	1
Biscuits, sweet	360	110	43
Bread, white enriched	507	85	1
" , whole wheat	527	273	1
Cake, sponge	167	87	1
" , dark fruit	158	496	1
Crackers, saltine	1100	120	1
" , soda	1100	120	1
Egg noodles, dry, enriched	5	136	1
Farine, enriched	2	83	1
Spaghetti, macaroni, enriched	2	197	1
Wheat germ	3	827	1

	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
2. STARCHY FRUITS, ROOTS AND TUBERS			
Arrowroot, flour	5	18	3
Banana, green			
" , ripe	4	401	2
Breadfruit, fresh fruit	13	396	2
Cassava, fresh root	2	394	2
" , meal and flour	11	926	2
Coco, Dasheen, Taro, fresh tuber	10	448	2
Plantain, green, boiled	4	330	3
" , ripe, fried	3	610	3
Potato, Irish, fresh tuber	7	570	3
" " , french fries	12	1020	3
" " , instant	89	1600	1
" , sweet, pale	31	210	2
Yam, fresh	10	294	2
Tannia, fresh			
3. SUGARS AND SYRUPS			
Sugar, dark brown, crude	30	344	1
" , granulated	Trace	2	3
" , dextrose or glucose, liquid BP	150	3	3
Syrups, molasses, medium	37	1063	1
" , golden	270	240	3
" , corn	68	4	1
Sugarcane juice	2	102	2
Honey	10	51	2,3
Jams and Preserves	12	88	1
Jellies	17	75	1
Marmalades, Citrus	18	44	3
Candy, chocolate, milk	120	420	3
Candy, Marshmallows	39	6	1
" , hard	32	4	1
Toffees, mixed	320	210	3

	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
4. PULSES, NUTS AND OIL SEEDS			
Beans, Broadbean, whole seeds, dry	8	1123	2
Lima Bean, whole seeds, dry	18	295	2
" " , green, immature, fresh, raw	2	650	1
Red Peas, Kidney Beans, whole seeds	19	1151	2
Blackeye Peas, Cowpea, whole seeds, dry	6	688	2
Chickpea, whole seeds, dry	10	1006	2
Lentils, whole seeds, dry	29	780	2
Green Peas, whole seeds, dry	35	1005	1
Split Pea, without seed coat, raw	40	895	1
Pigeon Peas, Congo Peas, dry	29	1100	3
Soybean, whole seeds, dry			
" , milk	15	58	2
Peanuts, raw	6	680	3
" , roasted and salted	440	680	3
Peanut butter, salted	607	670	1
TREE NUTS			
Almonds, roasted and salted	198	773	1
Cashew nut, whole seed, dry	26	420	2
Coconut, mature	7	555	2
" , immature jelly	51	257	2
" , milk			
" , water	25	147	1
Walnuts, nut dried	3	690	3
SEEDS			
Sesame	49	508	2
Sunflower, dry		815	2
5. VEGETABLES			
Green leafy and yellow vegetables:			
Amaranth leaves, Callaloo			
Asparagus, canned, green, drained	236	166	1

5. VEGETABLES	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
Best greens	130	570	1
Cabbage, Chinese, Pakchoi	22	279	2
" , common	10	238	2
Carrot, fresh, raw	70	245	2
" , canned, solid and liquid	236	120	1
Cassava leaves	4	409	2
Chocho, Christophene	2	108	2
Dasheen Leaves	9	963	2
Endive	14	294	2
Lettuce, iceberg	9	175	1
" , green	9	264	1
Mixed vegetables, frozen	59	208	1
Mustard greens	24	297	2
Parsley, curly	28	900	2
Pea and carrot, frozen	92	171	1
Pepper, hot, immature, green or yellow			
" , hot, red	25	564	1
" , sweet, raw	2	210	3
Peas, green, canned, garden	230	130	3
" " " , processed	330	170	3
Pigeon pea, green	5	622	2
Pumpkin, mature fruit	8	350	2
" , leaves and tops	6	472	2
Spinach, raw	71	470	1
Watercress	60	310	3
OTHER VEGETABLES			
Ackee, canned	240	270	3
Avocado pear	2	278	2
Bamboo shoot	6	402	2
Beet, common, red	36	330	2
Cauliflower	20	349	2
Celery	96	326	2
Cucumber	13	154	2

OTHER VEGETABLES (cont'd.)	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
Egg Plant, Garden Egg, Melongene	7	221	2
Garlic bulbs	18	373	2
Mushroom, canned, solid and liquid	400	197	1
Okra	7	190	3
Olives, green, pickled	2250	91	3
Onion, matured bulb	10	140	3
" , young green bulb and entire top	13	230	3
Squash Bash, Marrow	1	210	3
Tomato, ripe	4	235	2
Cherry tomato			
Tomato, chili sauce	1338	370	1
" , ketchup	1120	590	3
Turnip, root	60	281	2
Water Chestnut, Chinese	6	454	1

6. FRUITS

CITRUS FRUITS

Grapefruit, fruits, all varieties	1	135	1
" , juice, fresh	1	162	1
" , juice, canned, sweetened	1	162	1
Grapefruit and orange juice, blended, canned, sweetened	1	184	1
Lemon, fruit	4	137	2
Lime, fruit	2	82	2
Orange, all varieties, peeled	1	200	1
" , juice, fresh	1	200	1
" , juice, frozen concentrate, unsweetened, undiluted	2	657	
Orange, juice, canned, sweetened	1	199	
Ortanique			
Shaddock	1	235	
Tangerines, Mandarin, fresh fruit	2	126	

OTHER FRUITS	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
Apple, fresh fruit	2	130	2
Apple juice, canned	1	101	1
Apricot	1	218	2
Caimit, Star apple, fruit ripe	5	140	2
Cantaloupe	12	251	1
Cashew, common, fresh	7	124	2
Cherries, fresh, sweet	2	191	1
Cherry, West Indian, fruit ripe	8	83	1
Currants, black, raw	3	372	1
Custard apple	6	495	2
Dates, dried, weighed without stones	5	750	3
Fruit cocktail, canned in heavy syrup	5	161	1
Golden apple, Pommecythere			
Governor plum	1	171	2
Granadilla, Passion fruit, raw, pulp and seeds	28	350	3
Grapes, black, flesh only	2	320	3
" , juice, canned or bottled	2	116	1
Raisin, uncooked, unbleached	27	763	1
Guava, whole	4	291	2
" , canned	7	120	3
Guinep, genip, chinette			
Jubube, coolie plum or dunks	3	278	2
Mamee apple			
Mango, ripe	3	214	2
Pawpaw, papaya	3	234	1
Peach, canned	1	150	3
Pear, canned	1	90	3
Pineapple, raw	1	146	1
" , juice, canned, unsweetened	1	149	1
" , juice pack	1	147	1
Pomegranate	7	379	2

	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
OTHER FRUITS (cont'd.)			
Prunes, dried, medium, uncooked	8	694	1
Sapodilla, naseberry			
Sorrel, raw			
Sweetsop, Sugar apple	5	299	2
Tamarind	3	570	2
Watermelon, fresh fruit	4	120	3
7. MEAT AND POULTRY			
BEEF			
Retail cuts, trimmed to retail level, no bone:			
medium fat	83	378	2
fat		267	2
Bologna	1300	230	1
Frankfurters, raw	1100	220	1
Luncheon meat	1050	140	3
Salami	1850	160	3
Frankfurters	980	98	3
Beef, salted, raw			
MUTTON AND LAMB			
Retail cuts, trimmed to retail level, lean and fat			
	72	330	3
PORK			
Retail cuts, trimmed to retail level, chops, loin, raw, lean and fat			
	56	290	3
Leg, raw, lean and fat	59	300	3
Bacon, streaky	1500	240	3
Bologna	1300	230	1
Ham, canned	1250	280	3
Ham, light, cured			
Luncheon meat, canned	1234	222	1
Salted pork, raw	1212	42	1
Sausage	760	160	3

POULTRY	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
Chicken, dressed, ready to cook	81	320	3
" , breast	72	330	3
" , drumstick	89	300	3
" , neck and back weighed with bone			
" , thigh weighed with bone	50	190	3
" , wing weighed with bone	41	160	3
" , gizzard		200	2
Duck, domesticated, raw	110	290	3
Turkey, dressed, raw	54	300	3
OTHER MEATS			
Rabbit, domestic, flesh only, raw	67	360	3
Goat, lean meat	90		2
OFFALS			
Brain, all species, raw	140	270	3
Pork, trotters			
Beef heart, raw	95	320	3
Beef liver	110	213	2
Chicken liver, raw	85	300	3
Pork liver	110	447	2
Oxtail, raw	110	270	3
Pigtail in brine			
Lamb tongue	480	250	3
Beef tripe, dressed, raw	46	8	3
" " , stewed	73	100	3
8. EGGS			
Hen - fresh eggs:			
whole	140	140	3
white	190	150	3
yolk	50	120	3

	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
FISH AND SHELLFISH			
Anchovy	147	447	2
Bonito			
Codfish, salted, semi-dried			
" , dehydrated, lightly salted	8100	160	1
Cavalli			
Dolphin	242	370	2
Fish stick, frozen, cooked	500	260	3
Flying fish	73	516	2
Grouper			
King fish			
Mackerel, canned, colid and liquid			
Pilchards, canned in tomato sauce	370	420	3
" , smoked, kippered, weighed with bone	540	280	3
Salmon, raw, pink	64	306	1
" , canned, pink	387	361	1
Sardine, canned in oil	510	560	1
Shark	79	549	2
Snapper	120	373	2
Tuna canned in oil	800	301	1
SHELLFISH			
Crabs, boiled, flesh only	370	270	3
Lobster, raw, whole	182	500	2
Shrimp, raw	185	333	2
MOLLUSCS			
Clams, all kinds, raw, in shell, meat only	200	197	2
Oyster, raw	510	260	3
" , weighed with shell	61	31	3
10. MILK AND MILK PRODUCTS			
Cow's milk			
Fluid, whole, 3.5% fat	50	144	1

MILK AND MILK PRODUCTS (cont'd.)	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
Fluid, whole, U.H.T.	50	140	3
" , skim	52	150	3
Canned evaporated, unsweetened	180	390	3
Canned condensed, sweetened	130	390	3
Dry, whole	440	1270	3
Dry, skim, regular	550	1650	3
" , " , instant, fortified	526	1725	1
Cheese, cheddar	610	120	3
Cheese, cream (Philadelphia)	250	74	1
" , cottage	450	(54)	3
" , processed	1360	82	3
" , spread	1625	240	1
Cream, light, table	42	120	3
" , heavy, whipping	34	100	3
" , sterilised, canned	56	120	3
Ice cream, regular, 10% fat	63	181	1
Ice cream cones	232	244	1
Goat's milk, whole	40	180	3
Human milk	14	58	3
11. FATS AND OILS			
Butter, salted	870	15	3
Fish liver oil	Trace	Trace	3
Ghee			
Lard	0	0	2
Margarine, fortified with Vit. A	987	23	1
Oil, pure, all kinds	0	0	2
Olive oil	Trace	Trace	3
Pork, fat, raw	38	87	3
French dressing	1370	79	1
Mayonnaise	597	34	1

FATS AND OILS (cont'd.)	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
Salad dressing	586	9	1
Shortening, vegetable			
Suet, block	21	13	3
" , shredded	Trace	Trace	3
12. MISCELLANEOUS FOODS			
SPICES AND CONDIMENTS			
Barbecue sauce	815	174	1
Curry powder	180	619	2
Ginger, ground	34	910	3
Hot pepper sauce			
Mustard, prepared paste, yellow	1252	130	1
Soya sauce	7325	366	1
Vinegar	20	89	3
BEVERAGES AND DRINKS			
Cocoa, dry powder, high fat	715	651	1
Chocolate, plain	11	300	3
Coffee, instant, dry powder	72	3256	1
Tea, brewed without sugar	Trace	17	3
Malt drink			
Beer, Stout, 3.6% alcohol	7	25	1
Brandy, Whisky, 37.9% alcohol	1	2	1
Champagne	4	57	3
Gin, 33.4% alcohol	1	2	1
Spirits, mean of brandy, gin, rum, whisky	Trace	Trace	3
Wine, table, 9.9% alcohol	5	92	1
Cola type carbonated soft drink	8	1	3
Ginger ale			
Root beer			
'Bournvita'	460	380	3
'Horlicks'	350	750	3

MISCELLANEOUS FOODS (cont'd.)	SODIUM (mg)	POTASSIUM (mg)	REFERENCE
'Milo'			
'Ovaltine'	150	850	3
'Nutrament'			
BABY FOODS IN JAR			
Banana	29	118	1
Cereal/veg/meat mixtures	381	77	1
Fruit and fruit products	53	73	1
Liver, strained	253	202	1
Meat and poultry	241	181	1
Vegetables, spinach creamed	272	142	1
MIXED READY FOODS			
Baked beans canned in tomato sauce	480	300	3
Spaghetti with meatball in tomato sauce	488	98	1
Cream of asparagus soup, canned, condensed	820	100	1
Cream of mushroom soup, canned, condensed	795	82	1
Green pea soup, condensed	734	160	1
Tomato soup, condensed	830	360	3
Vegetable soup with meat broth	690	196	1
OTHER FOODS			
Baking powder	11800	49	3
Gelatin - pure	-	-	3
- dessert powder	318		1
Yeast - baker's, dry, active	52	1998	1

REFERENCES

1. Agricultural Research Service, United States Department of Agriculture (1963). "Composition of Foods". Agriculture Handbook No. 8.
2. U.S. Department of Health Education and Welfare, Public Health Service (1972). Food Composition Table for use in East Asia, FAO.
3. Paul, A.A. and Southgate, D.A.T. (1978). McCance & Widdowson's The Composition of Foods, H.M.S.O., London

APPENDIX D
CHOLESTEROL CONTENT OF FOODS

FOOD AND DESCRIPTION	MILLIGRAMS PER 100g EDIBLE PORTION	REFERENCE
A. FOODS OF VEGETABLE ORIGIN		
Cereals, starchy roots, sugar, beans and peas, vegetables, fruits, etc.	0	1
B. FOODS OF ANIMAL ORIGIN		
1. MEAT AND POULTRY		
Bacon, raw, lean and fat	57	2
lean only	51	2
Beef, raw, lean and fat	65	2
lean only	59	2
cooked, lean only	82	2
Corned, canned	85	2
Beefburgers, fried	68	2
Black Pudding, fried	68	2
Brains, calf and lamb, raw	2200	2
calf, boiled	3100	2
lamb, boiled	2200	2
Chicken, raw, light meat	69	2
dark meat	110	2
liver, raw	380	2
Duck, raw, meat only	110	2
Ham	33	2
Heart, lamb, raw	140	2
ox, raw	140	2
ox, stewed	230	2
Kidney, lamb, raw	400	2
ox, raw	400	2
ox, stewed	690	2

	MILLIGRAMS PER 100g EDIBLE PORTION	REFERENCE
MEAT AND POULTRY (Cont'd.)		
Kidney, pig, raw	410	2
Lamb, raw, lean and fat	65	2
lean only, raw	79	2
lean only, cooked	110	2
Liver, calf, raw	370	2
lamb, raw	270	2
beef, raw	270	2
pig, raw	260	2
Luncheon Meat	53	2
Mutton, with bone	65	1
without bone	65	1
Oxtail, raw	75	2
stewed	110	2
Pork, raw, lean and fat	72	2
lean only	110	2
cooked, lean only	110	2
Rabbit, raw	71	2
Salami	79	2
Sausage, beef, raw	40	2
frankfurters	46	2
Tongue, ox, raw		
canned	110	2
Tripe, dressed	95	2
stewed	160	2
Turkey, raw, light meat	49	2
dark meat	81	2
roast, light meat	62	2
dark meat	100	2
Veal, with bone	90	1
without bone	90	1
2. EGGS		
Egg, whole, raw	450	2

	MILLIGRAMS PER 100g EDIBLE PORTION	REFERENCE
EGGS (cont'd.)		
Egg, white, raw	0	2
yolk, raw	1260	2
yolk, dried	1780	2
frozen	1280	1
3. FISH AND SHELL FISH		
Caviar or fish roe	7300	1
Clam, meat only	50	1
Crab, in shell	125	1
meat only	125	1
canned	100	2
Fish, steak	70	1
fillet	70	1
Fish Fingers, frozen	(50)	2
Lobster	150	2
Mussels, raw ^a	100	2
Oysters, raw ^a	50	2
Pilchards, canned in tomato sauce	(70)	2
Salmon, canned	90	2
Sardines, canned in oil:		
fish only	100	2
fish plus oil	80	2
Shrimp	200	2
Tuna, canned	65	2
4. MILK AND MILK PRODUCTS		
Cheese, cheddar	70	2
cottage	13	2
cream	94	2
Edam type	72	2
processed	88	2

^a Other sterols are present in these fish. Cholesterol forms about 40 per cent of the total sterol in mussels, oysters and scallops.

	MILLIGRAMS PER 100g EDIBLE PORTION	REFERENCE
MILK AND MILK PRODUCTS (cont'd.)		
Cheese spread	71	2
Cream, sterilized, canned	73	2
Ice cream	45	1
Milk, cow's, fresh, whole	14	2
U.H.T.	14	2
condensed, whole	34	2
dried, whole	120	2
dried, skim	18	2
evaporated	34	2
Human, mature	16	2
Yogurt	7	2
5. FATS AND OILS		
Butter	230	2
Lard and other animal fat	95	1
Margarine, all vegetable fat	0	1
two-thirds animal fat, one-third vegetable fat	65	1
Suet, block	(60)	2
shredded	74	2
Salad Dressing, mayonnaise	70	1
Mayonnaise, home-made	260	2
C. MIXED DISHES/MISCELLANEOUS		
Bread pudding with raisins	64	3
Cake, chocolate	43	3
fruit, dark	45	3
rock	40	2
sponge	246	3
Custard, egg	100	2
made with powder	16	2
Dumpling	8	2
Macaroni & Cheese, baked	21	3
Meringues	0	2
Noodles, egg	94	3

C. MIXED DISHES/MISCELLANEOUS (cont'd.)	MILLIGRAMS PER 100g EDIBLE PORTION	REFERENCE
Noodles, dry	31	3
cooked	31	3
Pancake	61	2
Pie, lemon meringue	90	2
pumpkin	61	3
Pizza, cheese & tomato	20	2

REFERENCES

1. CFNI (1974). Food Composition Tables for Use in the English Speaking Caribbean, Table V: p. 98.
2. Paul, A.A. and Southgate, D.A.T. (1978). McCance & Widdowson's The Composition of Foods. H.M.S.O., London
3. Feeley, R.M., Crivier, P.R., Watt, B.K. (1972). "Cholesterol Content of Foods". J. Amer. Diet. Assoc., 61: 134-149

APPENDIX E
PURINE CONTENT OF FOODS

mg per 100 g

More than 150 mg per 100 g

Sweet breads	825
Anchovies	363
Sardines (in oil)	295
Liver (calf, beef)	233
Kidney (beef)	200
Meat extracts	160 - 400
Gravies	variable

50 - 150 mg per 100 g

Meat	Beans, dried
Poultry	Peas, dried
Fish - fresh and saltwater	Lentils, dried
Lobster, crab, oysters, eels	Spinach
Meat soups and broths	Oatmeal
	Wheat germ and bran

0 - 15 mg per 100 g

Fruits of all kinds	Cakes and biscuits
Vegetable except above	Carbonated beverages
Most bread, cereals and cereal products	Chocolate
Milk	Coffee
Cheese	Condiments
Eggs	Cream
Nuts of all varieties	Custard
Fats of all types	Herbs (seasonings)
	Ice cream

mg per 100 g

0 - 15 mg per 100 g

Sugars, syrups, sweets
Milk and fruit desserts
Vegetable and cream soups
White sauce

Olives
Popcorn
Relishes
Salt
Tea
Vinegar

RECOMMENDED DIETARY ALLOWANCES

Age yrs.	Sex	Body Weight kg	Energy (b)		Protein (c) g	FAT-SOLUBLE VITAMINS		
			kcal	MJ		Vitamin A (d) R.E. µg	Vitamin D (e) µg	Vitamin E (f) I.U.
0- 5 mos. (j)	MF	5.0	Kg x 118	Kg x 0.49	11	400	10.0	4
6-11 "	MF	9.0	Kg x 108	Kg x 0.45	20	400	10.0	5
1- 3 yrs.	MF	13.4	1360	5.7	23	400	10.0	7
4- 6 "	MF	20.2	1830	7.6	29	400	5.0	9
7- 9 "	MF	28.1	2190	9.2	35	400	2.5	10
10-12 "	M	36.9	2600	10.9	43	575	2.5	12
	F	38.0	2350	9.8	41	575	2.5	12
13-15 "	M	51.3	2900	12.1	53	725	2.5	12
	F	49.9	2490	10.4	45	725	2.5	12
16-19 "	M	62.9	3070	12.8	54	750	2.5	15
	F	54.4	2310	9.7	43	750	2.5	12
20-39 "	M	65.0	3000	12.6	53	750	2.5	15
	F	55.0	2200	9.2	41	750	2.5	12
40-49 "	M	65.0	2850	12.0	53	750	2.5	15
	F	55.0	2090	8.8	41	750	2.5	12
50-59 "	M	65.0	2700	11.3	53	750	2.5	15
	F	55.0	1980	8.3	41	750	2.5	12
60-69 "	M	65.0	2400	10.1	53	750	2.5	15
	F	55.0	1760	7.4	41	750	2.5	12
70+ "	M	65.0	2100	8.8	53	750	2.5	15
	F	55.0	1540	6.5	41	750	2.5	12
Pregnancy (k)	-	-	+285	+1.2	+13	800	5.0	15
Lactation (first 6 months)	-	-	+550	+2.3	+24	1200	5.0	15

- (a) The allowances are intended to provide amounts of nutrients sufficient for the maintenance of health in nearly all people in the Caribbean.
- (b) Based on moderate activity for adults. Adjustments should be made for greater or less activity. 1 MJ = 239 kcal.
- (c) Adjusted to NPU = 70 for average Caribbean diet except for 0-1 year-olds which is reference protein
- (d) R.E. = Retinol Equivalents
1 µg R.E. = 1 µg retinol (3.3 I.U.)
= 6 µg beta carotene (10 I.U.)
- (e) 1 mcg = 40 I.U.

FOR THE CARIBBEAN^(a)

WATER-SOLUBLE VITAMINS							MINERALS		
Thiamine mg	Riboflavine mg	Niacin ^(g) Equivalents mg	Pyridoxine mg	Ascorbic Acid mg	Folacin ^(h) µg	Vitamin B ₁₂ µg	Calcium mg	Magnesium mg	Iron ⁽¹⁾ mg
0.3	0.4	4	0.3	20	40	0.3	400	50	5
0.4	0.5	7	0.4	20	60	0.3	500	50	5
0.5	0.7	9	0.8	20	100	0.9	500	150	7
0.7	1.0	12	1.3	20	100	1.5	500	200	7
0.9	1.2	15	1.5	20	100	1.5	500	250	7
1.0	1.4	17	1.8	20	100	2.0	700	300	7
0.9	1.3	16	1.5	20	100	2.0	700	300	7
1.2	1.6	19	2.0	30	200	2.0	700	350	12
1.0	1.4	16	1.5	30	200	2.0	700	300	16
1.2	1.7	20	2.0	30	200	2.0	600	350	6
0.9	1.3	15	1.5	30	200	2.0	600	300	19
1.2	1.7	20	2.0	30	200	2.0	500	350	6
0.9	1.2	15	1.5	30	200	2.0	500	300	19
1.1	1.6	19	2.0	30	200	2.0	500	300	6
0.8	1.1	14	1.5	30	200	2.0	500	250	19
1.1	1.5	18	2.0	30	200	2.0	500	300	6
0.8	1.1	13	1.5	30	200	2.0	500	250	6
1.0	1.3	16	2.0	30	200	2.0	500	300	6
0.7	1.0	12	1.5	30	200	2.0	500	250	6
0.8	1.2	14	2.0	30	200	2.0	500	300	6
0.6	0.8	10	1.5	30	200	2.0	500	250	6
+0.1	+0.2	+2	+0.5	50	400	3.0	1000	300	19 ⁽¹⁾
+0.2	+0.3	+4	+0.6	50	300	2.5	1000	350	19 ⁽¹⁾

(f) 1 mg d1--tocopheryl acetate = 1 I.U.
 1 mg d1--tocopherol = 1.1 I.U.
 1 mg d--tocopheryl acetate = 1.36 I.U.
 1 mg d--tocopherol = 1.49 I.U.

(g) 1 Niacin Equivalent = 1 mg niacin
 = 60 mg tryptophan

(h) Expressed as Free Folacin Activity

(i) Based on 15% absorption for diets containing 14-20% of energy from animal foods.

(j) Nutrients normally obtained through breast-feeding.

(k) Figures refer to varying periods of pregnancy (see text).

(l) Assumes adequate iron stores at conception (see text).

APPENDIX G

WORKSHOP ON DIET MANUAL FOR THE CARIBBEAN

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