Diabetes and Diet

Diabetes Mellitus has rapidly increased in prevalence over the years and now assumes epidemic proportions. This has been driven largely by lifestyle changes especially the changing diet patterns from a high fiber "sit-down" three square meals to the more prevalent calorie dense, fiber poor fast foods which are consumed as two heavy, daily, "on the run" meals in order to catch up on tight schedules.

Management of diabetes therefore has increasing been made to include and revolve around dietary changes. These are required to be highly individualized and differ from region to region causing a lot of confusion to the average patient and healthcare provider. A typical Nigerian patient for instance attends one clinic (probably a government primary or secondary health care centre) where he or she is told to eat only high protein, low carbohydrate meals like meat, fish and beans (the first two being to the most part unaffordable). In the next clinic, probably at his (or her) private physician the same patient is told that there is no absolute meal type restriction but is advised to be on complex carbohydrates, smaller amounts of fat and protein. This type of scenario puts the patient in a dilemma.

This manuscript attempts to fill in the gaps with regards to medical nutrition therapy with special emphasis on the local practice in Nigeria.