USDA, ARS, Western Human Nutrition Research Center Davis, California



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Improving Public Health by Understanding Diversity in Diet, Body and Brain Interactions

Compare metabolic, physiologic, and behavioral responses to consumption of a high quality diet vs. a typical American diet pattern.

<u>RCT Intervention Study</u>: Dietary Guidelines for Americans Typical American Diet

Does the high quality diet: *i.* Improve metabolic health? *ii.* Alter stress responsiveness? Cross-Sectional Study

Habitual Diet Patterns Cardiometabolic Markers

Using new 'omics' tools:

i. Response to fat challenge

ii. Better markers of insulin sensitivity

I. Nutrient Rich Diets and Cardiometabolic Disease

Background/Rationale

Research is needed to determine if a high quality, weight maintaining dietary pattern, as recommended in the Dietary Guidelines for Americans, impacts health over a short-term period.

What do we know already?

- DASH Diet Pattern
- Mediterranean Diet Pattern



DASH Studies

DASH Eating Plan

• Flexible and balanced heart-healthy eating style

- Requires no special foods
- Recommends
 - TVegetables, fruits, whole grains
 - Fat-free or low-fat dairy, fish, poultry, beans, nuts
 - Vegetable oils
 - LIMIT foods high in saturated fat
 - LIMIT sugar-sweetened beverages and sweets
 - Reduce sodium to 2300 mg/day

DASH Study Results

- Three separate trials
 - o DASH trial
 - o DASH-sodium
 - o PREMIER
- DASH trial:
 - o lower blood pressure
 - o lower LDL-cholesterol
- o DASH-sodium trial:
 - Blood pressure reductions best with sodium restriction of 1500 mg/day
- PREMIER trial:
 - DASH diet group had the greatest improvements in blood pressure

Mediterranean Diet Patterns

Med Diet Eating Plan

- Based on typical foods and recipes of Mediterranean-style cooking
- o Recommends
 - Plant-based foods fruits, vegetables, whole grains, legumes, nuts

 - Vegetable oils olive oil
 - Use herbs and spices to flavor foods
 - o Drink red wine in moderation



Mediterranean Diet Studies

• PREDIMED

- Variations on diet (+EVOO) or (+nuts) vs low-fat diet
- CVD Risk Results (compared to low-fat diet)
 - Systolic blood pressure
 - o 📕 Total:HDL cholesterol ratio
 - Fasting blood glucose
 - **__** C-reactive protein (with +EVOO)
- o Metabolic Syndrome & T2D Results
 - Reverse metabolic syndrome in 14%
 - Reduced risk of developing T2D by 52%
 - o Reduced insulin resistance
- o Greater weight loss

II. A Randomized Controlled Trial Based on the Dietary Guidelines for Americans

<u>RCT Intervention Study</u>:

Dietary Guidelines for Americans Typical American Diet Does the high quality diet: Improve metabolic health?

Objective

Primary Research Question:

Does a <u>DGA-based, nutrient-rich diet</u> elicit an improved metabolic profile in persons at-risk for metabolic disease, compared to the <u>typical U.S. diet</u> that is higher in saturated fats, added sugars and lower in fiber, dairy, fruits and vegetables?

Hypothesis:

Consumption of a DGA diet pattern will rapidly improve cardiometabolic risk factors, primarily insulin sensitivity, glucose tolerance, blood pressure and lipid profiles in women at-risk for metabolic diseases.

RCT Design and Diet Patterns

Week	0	1	2	3	4	5	6	7	8
Baseline		Intervention Diets from Week 1 to Week 8							
		DGA Diet Pattern							
		Typical American Diet Pattern							
Test Days	M		Ŋ						Ŋ

Schodulo	Week	Week	Wook 9
Schedule		2	VVEEK o
Fasting glucose, insulin, lipids	$\overline{\mathbf{A}}$	\checkmark	\checkmark
Oral glucose tolerance	\checkmark	\checkmark	\checkmark
Blood pressure	\checkmark	\checkmark	\checkmark
Stress evaluations	\checkmark	\checkmark	\checkmark
Lipid challenge test	\checkmark	\checkmark	\checkmark
Body composition	\checkmark		\checkmark

Diet Intervention



Participant Inclusion Criteria

Women, 20-65 years

• 22 per diet group assignment

At higher risk for metabolic disorders

• BMI > 24.9 and < 40

• Indication of metabolic dysfunction:

• Elevated fasting blood glucose or evidence of glucose intolerance

• Elevated triglyceridemia, reduced HDL-cholesterol

Indicators of Insulin Resistance

Fasting Insulin

Homeostatic Model of Assessment (HOMA-IR)

Equation uses values of *fasting* insulin and glucose

Matsuda Index

Equation uses values of *fasting and postprandial* insulin and glucose

McAuley's Index

 Equation uses values of fasting and postprandial insulin and glucose, along with measurement of <u>fasting</u> <u>triglycerides</u>

Risk Assessment of Participants



Participants

Participant Characteristics at Baseline					
	TAD (n=22)	DGA (n=22)			
Age, y	48 ± 10	51 ± 13			
BMI, kg/m²	33 ± 4	32 ± 4			
Waist Circumference, cm	96 ± 9	96 ± 11			
Waist:Hip Ratio	0.8 ± 0.1	0.8 ± 0.1			
Body fat, %	43 ± 4	43 ± 3			
HEI score (usual diet)	69 ± 12	65 ± 9			

Blood Pressure





Indicators of Insulin Resistance







Glucose tolerance





Oral glucose tolerance tests





Blood Lipids









Main Findings

The DGA diet pattern:

- Decrease in systolic blood pressure
- No change in glucose tolerance or insulin resistance
- No change in fasting triglycerides or LDL-cholesterol
- Decrease in total and HDL-cholesterol -- also observed with TAD diet pattern

Large variance in response noted for both diet interventions

What about body weight changes?



Mean weight change -0.71 ± 0.81 kg

Mean weight change -0.79 ± 0.73 kg

III. Chronic Stress, Stress System Responsiveness

Stress Biology and Nutrition Research Lab Kevin D. Laugero, Ph.D.

Determine if chronic stress, stress system responsiveness, and diet quality interact to influence metabolic health

A Randomized Controlled Trial Based on the Dietary Guidelines for Americans

<u>RCT Intervention Study</u>:

Dietary Guidelines for Americans Typical American Diet Does the high quality diet: Alter stress responsiveness?

Apply Idea: Too much stress (chronic stress) increases rigidity, poor adaptability, & disease vulnerability

Neuroendocrine

Plasticit

Immunologica

BR

- ♦ Understanding Inter-Individual Variation in Disease Risk & Intervention Responsivenss
- **Efforts Focused Brain Stress Pathways that Impact Emotional & Cognitive Functions Critical to an Individual's Capacity for Behavior Change** Metabolic

Dietary

The Less Flexible or Adaptable these functions become, the less receptive an individual will likely be to interventions that aim to change lifestyle habits, including nutritional.

Autonomic

Nervous System

Cardiovascular

Measuring stress phenotypes and leveraging variability



Cortisol Responsiveness Reveals Weight Loss Effects of Dairy Food Consumption

Nutrition and Disease

Dairy Food Consumption and Meal-Induced Cortisol Response Interacted to Influence Weight Loss in Overweight Women Undergoing a 12-Week, Meal-Controlled, Weight Loss Intervention¹⁻⁴

Megan G. Witbracht,⁵ Marta Van Loan,^{5,6} Sean H. Adams,^{5,6} Nancy L. Keim,^{5,6} and Kevin D. Laugero^{5,6}*

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 \Rightarrow Examples that demonstrate types of variability we encounter & \diamond how utilizing phenotypic information about individuals refines our view of outcomes

Can differences in chronic stress & acute stress response explain inter-individual differences in snacking and the brain's response to food cues?





At first glance, no difference between stress and control conditions.....



*adjusted for total energy consumed at the buffet M S Tryon et al., Physiology & Behavior 2013

Chronic Stress X Cortisol Response Defines High Calorie Snacking



M S Tryon et al., Physiology & Behavior 2013

High Stress Reactor

9.5-

Example of How a Closer Look at Stress System Responsiveness Can Reveal Nutrition Intervention Effects on Weight Loss



The Journal of Nutrition **Nutrition and Disease**

Supplemental Material can be found at: http://jn.nutrition.org/content/suppl/2012/12/21/jn.112.16635 5.DCSupplemental.html

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Again, at first glance....



Neuroendocrine Responsiveness Reveals Dairy Intervention Effect





Power in the Stress Phenotype

Stress X Nutrition Phenotype may be key determinant of behavioral responsiveness and possibly applied to refining or redefining intervention strategies.



IV. Lifestyle Factors and Response to Meal Challenge



Challenge Meal "Phenotype" What role does diet quality and/or physical activity have?



Challenge Meal "Phenotype"



Variability in Challenge Meal Response Fat Combusted for Energy



Participants, women who received DGA or TAD, n=44

Diet Quality and Challenge Meal Response Fat Combusted for Energy



Recap

- I. Nutrient Rich Diets and Cardiometabolic Disease
- II. A Randomized Controlled Trial Based on the Dietary Guidelines for Americans
- III. Chronic Stress, Stress System Responsiveness
- IV. Lifestyle Factors and Response to Meal Challenge

Understanding Diversity is the Key to Personalized Nutrition

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