

Transcript Details

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Reviewing the Role of Nutrition in Rheumatic Diseases

Dr. Turck:

Welcome to *ACR Action Center* on ReachMD. I'm Dr. Charles Turck. And joining me today to discuss the role nutrition has in rheumatic diseases is Dr. Elizabeth Volkmann, who is the Director of the UCLA Scleroderma Program and the founder and co-director of the UCLA Connective Tissue Disease-Related Interstitial Lung Disease Program. Dr. Volkmann also moderated a session on this topic at the 2022 ACR Convergence.

Dr. Volkmann, welcome to the program.

Dr. Volkmann:

Thank you for having me.

Dr. Turck:

So before we dive in, Dr. Volkmann, can you tell us a little bit about the session you moderated at this year's 2022 ACR Convergence?

Dr. Volkmann:

Yes. This session was a wonderful introduction to nutrition in rheumatic diseases, and we had two excellent speakers—both of them actually were from Italy—and one spoke about clinical evidence for the role of nutrition in managing specific rheumatic diseases, and then the other one complemented that talk by speaking more about the basic science and the mechanism by which different foods could affect rheumatic diseases, specifically in lowering inflammation.

Dr. Turck:

Now focusing on diet and nutrition, what impact do those have on patients with different rheumatic diseases?

Dr. Volkmann:

So I think the first thing that we learned from the session was that there's really no one diet that's right for every patient with rheumatic diseases even if you have the same rheumatic disease as someone else, but there are some guiding principles that may be useful in lowering inflammation. So one of the topics that came up was the Mediterranean diet, and specifically looking at the role of Omega 3s. And so Omega 3s are fatty acids that are present in substances like olive oil, and so both of the speakers spoke about the benefits of olive oil not only in terms of the Omega 3s but also in terms of other components of olive oil, such as phenolic acids and other antioxidants that can be helpful, again, in patients with rheumatic diseases.

Dr. Turck:

And did any other diets get any attention at the session you moderated?

Dr. Volkmann:

So the session led to a lot of wonderful questions from the audience because I think, again, this is a very timely topic. Many patients are wondering about what to do with their diet when they have a rheumatic disease, and so they come to their doctor with questions about the paleo diet and the ketogenic diet, and so we speak about some of these other diets as well, so this session didn't just cover the Mediterranean diet. For example, there was a question asked about the ketogenic diet, and this is a diet where patients typically consume a very low amount of carbs, but in replace of this they consume a higher amount of animal fats and proteins. And so while this can be very effective at helping a patient to lose weight when you're having more animal fats and proteins, you can actually increase the levels of cholesterol in your body because you're taking in more saturated fats. So when we discuss the ketogenic diet, we also discuss the fact that this could be potentially harmful for some patients and why it's really important when you're considering changing your diet to speak to your healthcare provider, to consult with a nutritionist, because there's no one diet that might be right for everyone.

Dr. Turck:

For those just tuning in, you're listening to *ACR Action Center* on ReachMD. I'm Dr. Charles Turck, and I'm speaking with Dr. Elizabeth Volkmann on the impact of nutrition in patients with various rheumatic diseases.

So, Dr. Volkmann, how do you decide which type of diet is right for each patient?

Dr. Volkmann:

Well when I pick a diet for a patient, I really look at the whole patient, so what symptoms do they have? And I'll give you an example. I care for a lot of patients who have systemic sclerosis or scleroderma, and many of these patients have a lot of gastrointestinal symptoms, so they may complain of distension and bloating. And for many of these patients, we try to adjust the diet to minimize their symptoms. A lot of these patients cannot tolerate a lot of raw foods, like raw vegetables and raw fruits, and so I work with patients on eating more cooked vegetables, which can be easier for them to digest but will still allow them to get all of the vitamins, nutrients, and minerals that come from eating vegetables. With most of my patients, regardless of their underlying rheumatic disease, I try to have them minimize the intake of processed foods, and the reason is that when foods undergo processing, and what this essentially means is that additives and preservatives are put into the food for various reasons—it could be to extend the shelf life of the food or change the flavor or the color. But there's a lot of evidence that these additives and preservatives can alter the gut microbiome.

And we think that the gut microbiome plays a really important role in immune homeostasis, and when there's dysbiosis or alterations in the gut microbiome, this can generate more inflammation. And virtually, all rheumatic diseases now have some association with dysbiosis whether it's systemic sclerosis, rheumatoid arthritis, or lupus, there is some evidence that dysbiosis can happen in these diseases. So when you minimize the intake of processed food, you could potentially be helping that dysbiosis and improving the balance of bacteria in your gut.

Dr. Turck:

And are there strategies we should be using when counseling patients on the importance of diet and nutrition?

Dr. Volkmann:

There's a lot of effective strategies that can be applied to counseling patients on the importance of diet and nutrition, and what I like to start with in telling patients about diet and nutrition is that this is going to be a very personal journey. And I empower them by telling them that they're actually in the driver's seat with this journey, meaning that I can't tell them what to eat, and I can't tell them how a specific food will make them feel. Only they know how a specific food makes them feel. So I usually start out by informing them to start a food diary, and in this process they can gain greater awareness of how eating a particular food helps them feel better or worse, helps them sleep, helps them have more energy or less energy, and through this process of self-discovery, patients actually can identify really important patterns. And these are things that neither I nor a nutritionist can do because it really comes down to the patient, so I think one of the most effective strategies is to empower your patients to try to understand the connection between what they eat and how it makes them feel.

Dr. Turck:

Finally, Dr. Volkmann, are there any other insights you'd like to share with our audience today?

Dr. Volkmann:

I think the last thing that would be important to share and a topic that came up during this important session was just that we need more clinical research in this area. There's not a lot of high-quality studies looking at the effectiveness of specific diets and specific rheumatic diseases, and so this is an unmet need, and my hope is that we'll have future clinical trials that will be done assessing the effectiveness of specific diets. And this could, again, help encourage doctors to talk to their patients about diet and encourage patients to try these different diets to improve their health when they have a rheumatic disease.

Dr. Turck:

Well this has been an informative look at the way nutrition impacts our patients with rheumatic disease. And I want to thank my guest, Dr. Elizabeth Volkmann, for sharing her insights.

Dr. Volkmann, thanks so much for joining me today.

Dr. Volkmann:

Thank you again for having me.

Dr. Turck:

For ReachMD, I'm Dr. Charles Turck. To access this and other episodes in our series, visit ReachMD.com/ACR where you can be Part of the Knowledge. Thanks for listening.