EuroSciCon

DAY 1

Keynote Forum

World Congress on

Nutrition and Dietetics

June 18-19, 2018 | Paris, France

EuroSciCon

World Congress on
Nutrition and Dietetics

June 18-19, 2018
Paris, France

Piergiorgio Bolasco, J Clin Nutr Diet 2018 Volume: 4
DOI: 10.4172/2472-1921-C1-001

HYPOPROTEIC DIET DELAYS START OF DIALYSIS AND ALLOWS ONCE WEEKLY HEMODIALYSIS. AMINOACIDS AND PROBIOTICS COULD PERMIT FURTHER IMPROVEMENT

Piergiorgio Bolasco
Territorial Nephrology Department-Cagliari, Italy

It is well known that hypoproteic diet preserves and slows down the residual kidney function (RRF) and so indirectly on general and, in particular, cardiovascular mortality. Unlike the oligoanuric patient undergoing thrice weekly hemodialysis if it used as a combined program diet with a once-weekly or twice-weekly hemodialysis (CDDP), it will obtain a better survival and a good metabolic quality of life with a better metabolic control of uremia. In fact, the power of RRF is frequently underestimated. Indeed, the native kidney preserves the ability to eliminate not only toxic molecules but also achieve a significant output of phosphate despite a severe decrease in residual kidney function (RKF). Recently, further improvement could be reached using aminoacids and probiotics administration, thanks to a better control of dysbiosis and a diminished absorption of protein bound uremic toxins that no dialysis strategy is unable to eliminate.

Biography

Piergiorgio Bolasco is a former Director of Territorial Nephrology and Dialysis department of ASL of Cagliari. He is a Nephrology Consultant since 1978 and Reviewer of Journals: *Kidney International, Nephron, Nephrology Dialysis and Transplantation, Journal of Nephrology, American Journal of Kidney Disease, Artificial Organs, BMC Nephrology.* He is a Member of Editorial Boarding of the *Giornale Italiano di Nefrologia, Journal of Nephrology, Minerva Urologica e Nefrologica* and he is Editorial Manager of the *International Journal of Artificial Organs*. He is a member of Italian group of nutrition in chronic renal disease and inventor of CDDP. He has 71 publications, currently present in Med-line.

pg.bolasco@tin.it

EuroSciCon

World Congress on
Nutrition and Dietetics

June 18-19, 2018
Paris, France

Andre M N Renzaho, J Clin Nutr Diet 2018 Volume: 4
DOI: 10.4172/2472-1921-C1-001

DIETARY ACCULTURATION AMONG AFRICAN MIGRANTS IN AUSTRALIA

Andre M N Renzaho

Western Sydney University, Australia

The study sought to describe sub-Saharan African (SSA) post-migration food habits and eating patterns and examine how the food habits of SSA households in Australia reflect post-migration acculturation. Data were obtained on 139 households of demographically diverse recent migrants from across sub-Saharan Africa. The study found that SSA migrants and refugees experienced dietary acculturation characterised by three processes: substitution, supplementation and modification of recipes. They experienced difficulty locating their traditional foods, in particular, African vegetables (34.2%), unprocessed maize meal (29.1%), Camel milk (23.1%) and maize grain (13.7%). The new foods adopted since arrivals were pizza, breakfast cereals and fast foods, but also included new fruits and vegetables. Takeaway food such as Pizza Hut or McDonalds featured prominently in the SSA post-migration diet. Reasons for eating out were favourite food (48.3%), routine family outing (38.3%), special occasion (33.3%) and no time to cook (25%). A significant change in meal pattern was the inclusion of breakfast, although 21% reported skipping breakfast. In conclusion, many of the observed dietary changes were not consistent with good health and may predispose this population to rapid weight gain and chronic disease. Rapid modernisation and the Anglo-Australian culture interact in a complex way with traditional eating and socialisation practices of SSA migrants. Understanding these forces can allow effective health promotion and community development strategies to be developed for the future health of SSA migrants and their communities.

Biography

Andre M N Renzaho has obtained PhD in Public Health Nutrition from Deakin University, Australia. He joined Western Sydney University in 2015 and prior to that, he was the Director of Migration, Social Disadvantage, and Health Programs within the Global Society Unit, the Department of Epidemiology & Preventive Medicine, Monash University. With a background in Global Health and International Development, he has professional experience in complex humanitarian emergencies and development practice, international public health, and nutrition epidemiology. He has worked with a number of United Nations including working with Care Australia, Concern Worldwide, Medecins Sans Frontieres, the United Nations High Commission for Refugees, and the United Nations Children's Fund. He has also undertaken Consultancy work for State and Commonwealth Governments in Australia and has been a member of a number of governmental and non-governmental Boards, Committees, Expert Panels, and Taskforce.

andre.renzaho@westernsydney.edu.au

World Nutrition 2018

EuroSciCon

DAY 2

Keynote Forum

World Congress on

Nutrition and Dietetics

June 18-19, 2018 | Paris, France

EuroSciCon

World Congress on
Nutrition and Dietetics

June 18-19, 2018
Paris, France

Majid Hajifaraji et al., J Clin Nutr Diet 2018 Volume: 4
DOI: 10.4172/2472-1921-C1-001

THE EFFECT OF STEVIA ON LIPID PROFILE AND GLYCEMIC INDEX OF TYPE 2 DIABETIC PATIENTS: A RANDOMIZED CONTROLLED TRIAL

Majid Hajifaraji, Ajami M, Seyfi M, Houssaeini F, Naseri P and Ainaz Velayati

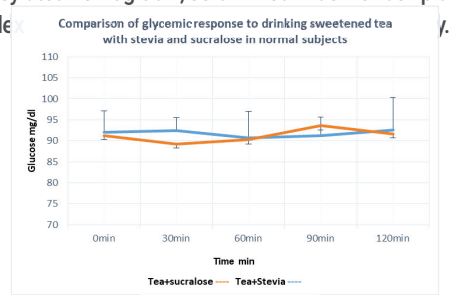
[1]Shahid Beheshti University of Medical Sciences (SBUMS)/ National Nutrition & Food Technology Research Institute (NNFTRI), I.R. Iran

Background & Objective: Nowadays, use of natural calorie-free sweeteners like: natural-based stevia as a suitable alternative for sugar and even artificial sweetener has become important. To compare the effects of stevia-sweet tea or sucralose sweetener on glycemic and lipid indices for type 2 diabetic patients, current study was done accordingly.

Materials & Methods: In order to determine the changes in blood sugar levels using tea or coffee with stevia or sucralose, 8 healthy people were chosen. In intervention phase, a randomized clinical trial on patients with type 2 diabetes (n=39) was implemented and the patients are divided into 2 groups: group consuming stevia sweet tea (1 cup of stevia extract-sweet tea (2%) or divided into 3 meals) and stevia-free tea (accompanied by 1 Tablet of Sucralose) as control. At the beginning of the study, seventh and eighth weeks, the weight and height of the patients were measured and subsequently body mass index was calculated. Weight, height, BMI, glycemic indices, HbA1c, lipid profile and dietary intake of patients were measured at the beginning and end of study.

Results: In the first phase, stevia group showed the same response to their sucralose group. Findings indicated that there was no significant differences between mean changes in fasting blood sugar level and 2-hours' among the diabetic patients for studied group. Comparing the mean changes in insulin and HbA1c levels as well as lipids profile in diabetic patients consuming stevia and sucralose sweet tea, no significant differences was found between two groups during the intervention.

Conclusion: Among diabetic patients, using the stevia-sweet tea (2%) did not affect glucose, glycosylated hemoglobin, serum insulin as well as lipid profiles after 2 months and body mass inde[illegible]y.



Biography

Majid Hajifaraji is a Research Associate, Professor in Nutritional Sciences of the National Nutrition and Food Technology Research Institute (NNFTRI), and has served as Dean of Faculty of Nutritional Sciences and Food Technology (FNSFT) from 2010- 2015 and President of Iranian Nutrition Society (INS) from 2011-2015. He has a PhD in Clinical Nutrition program at Kings College, London University.

m39faraji@yahoo.com