



January 2019

**SUMMARY: The American Diabetes Association updates its practice guidelines throughout the year as new scientific evidence warrants it [1]. Having conducted a systematic review of the scientific literature since 2014 the ADA has updated its guidelines to include the use of a low carbohydrate diet (<130 g carbohydrate) as Medical Nutrition Therapy (MNT) for adults\* with Type 2 Diabetes [1,2].**

In October 2018, the American Diabetes Association (ADA) released a joint Position Statement in conjunction with the European Association for the Study of Diabetes (EASD) which approved use of a low carbohydrate diet which it defined as <130 g of carbohydrate/day (<26% of daily calories as carbohydrate) as Medical Nutrition Therapy (MNT) for adults with Type 2 Diabetes [1].

At the end of December 2018, the ADA released its 2019 Standards of Medical Care in Diabetes which builds on the ADA / EASD joint consensus paper by including use of a low carbohydrate diet in the section on Nutrition Therapy and reflects the organization's emphasis on a patient-centered, individualized approach. The ADA concludes that a low carbohydrate diet may result in (a) lower blood sugar levels, may (b) lower the use of blood sugar lowering medications and (c) is effective for weight loss [2] and cites one-year study data by Virta Health [3] which used a ketogenic approach (<30g carbohydrate/day), as well as two other studies [4,5]. The ADA concludes a low carbohydrate diet is safe to use in not pregnant or lactating adults without kidney disease or risk of eating disorders.

This moves a low carbohydrate diet from the realm of a popular lifestyle choice to Medical Nutrition Therapy for the purpose of disease management.

## References

1. Davies M.J., D'Alessio D.A., Fradkin J., et al, Management of Hyperglycemia in Type 2 Diabetes, 2018. A Consensus Report by the American Diabetes Association (ADA) and the European Association for the Study of Diabetes (EASD), *Diabetes Care*, October 2018, <https://doi.org/10.2337/dci18-0033>
2. American Diabetes Association, Lifestyle Management Standards of Medical Care in Diabetes - 2019. Available at: [http://care.diabetesjournals.org/content/42/Supplement\\_1](http://care.diabetesjournals.org/content/42/Supplement_1). Accessed: Dec. 17, 2018.
3. Hallberg SJ, McKenzie AL, Williams PT, et al. Effectiveness and safety of a novel care model for the management of type 2 diabetes at 1 year: an open-label, non-randomized, controlled study. *Diabetes Ther* 2018;9:583–612
4. Saslow LR, Daubenmier JJ, Moskowitz JT, et al. Twelve-month outcomes of a randomized trial of a moderate-carbohydrate versus very low-carbohydrate diet in overweight adults with type 2 diabetes mellitus or prediabetes. *Nutr Diabetes* 2017;7:304
5. Sainsbury E, Kizirian NV, Partridge SR, Gill T, Colagiuri S, Gibson AA. Effect of dietary carbohydrate restriction on glycemic control in adults with diabetes: a systematic review and meta-analysis. *Diabetes Res Clin Pract* 2018;139:239–252