

Continuing Professional Development

Melbourne General Practitioner Conference and Exhibition 16-18 November 2007

This conference's program was incredibly broad. I have outlined below two conference topics that I found relevant to dietitians

Probiotics

Associate Professor Luis Vitetta of Queensland University, highlighted that gut health can play a vital role in overall health because 70% of our immune system is located in the gut. 'Good bacteria make vitamins, help digest fat/carbohydrates and help lower bowel pH which aids in the absorption of minerals. Therefore, correcting bowel dysbiosis with pre and probiotics should be a high priority in health care. If a patient presents with either diarrhoea or constipation (defecation is supposed to occur every 24 hours) there is a problem with gut micro flora and dysbiosis and altered gut permeability is probably present'. Maintaining gut health is best achieved with fermented food but short term treatment of specific conditions may require a probiotic supplement with particular strains of bacteria. Antibiotics, many medications and stress can alter gut function by altering production of stomach acid and digestive enzymes. There is good evidence that probiotics can help eczema/allergy, H.pylori infections, diarrhoea/gastroenteritis, constipation, IBS, crohns/colitis, vaginal candidiasis, immune function. There is emerging evidence indicating probiotics may play a role in colon cancer prevention, weight management and cholesterol lowering.

Complimentary Medicines

Professor Frank Rosenfeldt from the Cardiac Surgical Research Unit at the Alfred Hospital presented the latest research on CoQ10. The data supported CoQ10 supplements (100-300mg/day) for heart failure, hypertension, Parkinson's disease, breast cancer, diabetes, renal failure, aging mitochondria and for patients taking statins.

Professor Stephen Myers from Southern Cross University provided an excellent overview of drug herb/nutrient interactions and managing common conditions. He stressed the importance of all health professionals documenting the use of complementary medicines, including vitamin and herbal supplements and potential drug interactions.

Professor Myer identified the following interactions:

- Warfarin is the biggest offender interacting with many herbs and nutrients.
- Celery supplements can reduce thyroxine levels so should be avoided if patients are taking oroxine.
- Panax ginseng is the only well studied herb show to lower blood glucose and insulin levels so can interact with hypoglycaemics to further lower glucose levels.
- St John's Wort has good evidence that it can help mild depression but interacts with oral contraceptives, digoxin, anti-coagulants, SSRIs and anticonvulsants.
- Grapefruit and pommegranate juice can affect intestinal and liver P450 cytochrome enzymes thus altering metabolism of many drugs.
- Licorice can increase cortisol activity so can have potent anti-inflammatory effects and reduce stress but can interact with steroids.

The following complementary medicines were also outlined as effective treatments:

- Probiotics taken after triple therapy antibiotics can help eradicate H.pylori infections.
- Efamol evening primrose oil is effective for treating eczema.

- Feverfew and willowbark can help treat migraines.
- Cranberry tablets and juice are effective for preventing UTIs in elderly women.
- Fe and multivitamin supplements improve fertility.
- Saw palmetto helps reduce the symptoms of benign prostatic hypertrophy and improves sexual function.
- Fish oil reduces risk of CVD; DHA is better than EPA at reducing blood pressure/stress.
- Coffee, cocoa, cola and rosemary can raise blood glucose levels.
- Glucosamine sulphate reduces progression of osteoarthritis but in young people has been found to cause insulin resistance (study on older people was negative).

Given the number of patients APDs are now seeing through EPCs it may be in our interest to become skilled in this field to assist time poor GPs. A special interest group in drug nutrient herb interactions and complementary medicines is needed.

DAA members would be pleased to know that the GPCE conference convenor would like to attract more dietitians to the conference in the future and is planning to increase the number of sessions relevant to nutrition and dietetics in next years program.

Professor Stephen Myer's slides can be located at <http://www.gpce.com.au/melbourne/>

Speaker notes can be obtained at <http://www.gpce.com.au/melbourne-2007/gp-registration/speaker-notes>.

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The Gluten Free and Allergy Expo

The annual Gluten Free Food and Allergy Expo was held in Sydney on 17 and 18 November 2007 at the Sydney Convention Centre, Darling Harbour. DAA held a stall amongst other stalls exhibiting food products targeted at those with specific dietary requirements e.g. gluten free, vegan foods, and foods suitable for those with nut allergies. Accredited Practising Dietitians as well as dietetic students volunteered their time at the DAA stand where members of the public were able to have their BMI calculated, and were also able to be directed towards APDs with experience in the area of food allergies and coeliac disease.

In addition to the stalls, participants were also able to attend lectures by various health professionals on topics including 'Diagnosis of Food Sensitivities', 'Nutraceuticals in focus – enhancing quality of life with medicinal and functional food', and 'Coeliac, Diabetes and Allergies: Patterns in Modern Disease'. The lectures proved very popular as many people tried to obtain information on how to better manage their individual or family nutrition requirements.

The DAA stand was well received as many people experiencing food related symptoms had not been in contact with a dietitian and were using alternate sources of information such the media, to make decisions on how to modify their and/or their children's diet.

In future years it may be worthwhile approaching the organisers of the event so that DAA is able to contribute to an even greater extent. Many of the seminars were delivered by people without formal dietetics training, and therefore not all the ideas were consistent with dietetic principles. For example, the notion that people should refrain from drinking cow's milk regardless of whether they have been diagnosed with milk allergy or intolerance to lactose or cow's milk protein. Seminars provided by APDs would reduce the amount of misinformation to enable the public to make balanced and well informed decisions on their eating behaviours.

The weekend was enjoyable and interesting as we were able to sample some new products on the market and speak to dietitians with experience in food allergies and intolerances.

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