A well-balanced approach to post-traumatic headache: Integrative approaches to evaluation and treatment



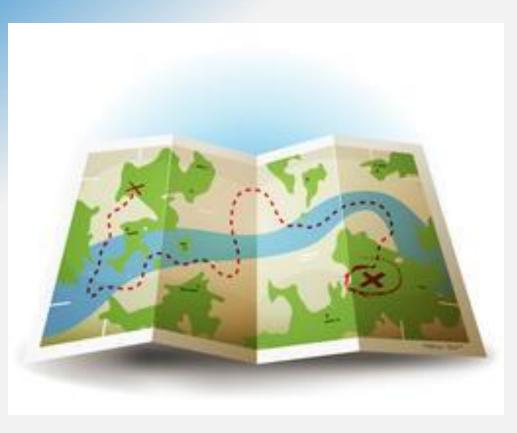
Wesley Cole PhD, CBIS Heidi Greata PT, DPT Beth MacIntosh MPH, RD, LDN

Non-disclosure

None of the presenters have conflicts to report

The views expressed are those of the presenters

Presentation "Trail Map"



Visual Vestibular Phenotype -Clinical Sample -Findings -Clinical Implications -Clinical Guidance

Dietary Intervention for Posttraumatic Headache -Study Methods -Findings -Scientific Rationale -Practical Application

Visual-Vestibular Phenotype



<image>

Heidi Greata PT, DPT UNC Physicians Network THRIVE Program <u>Heidi.Greata@unchealth.unc.edu</u> Transforming Health and Resilience in Veterans (THRIVE) Program

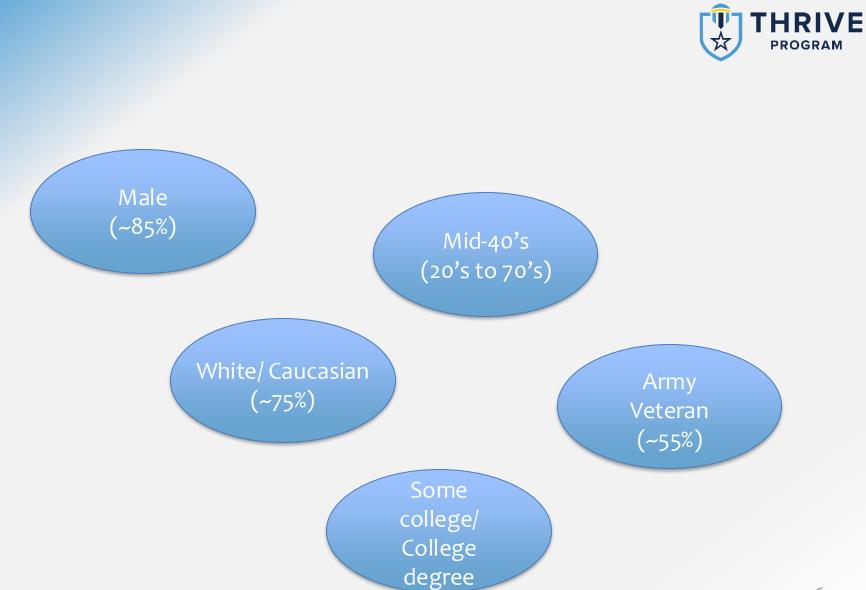


Mission: To fulfill our duty to serve Veterans and first responders by improving the evaluation and treatment of service-related traumatic brain injuries and PTSD through clinical practice, research, and education.









THRIVE Program — Evaluation





THRIVE Program — Evaluation



Headache Impact Test (HIT-6)

Headache Impact Test (HIT-6) questionnaire was designed to help you describe and communicate the way you feel and what you cannot do because of headaches.

To complete, please circle one answer for each question.

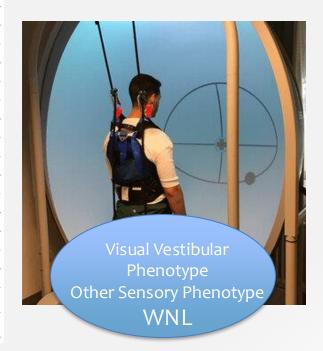
- 1. When you have headaches, how often is the pain severe? never rarely sometimes very often always
- 2. How often do headaches limit your ability to do usual daily activities including household work, work, school or social activities? never rarely sometimes very often always
- 3. When you have a headache, how often do you wish you could lie down? never rarely sometimes very often always
- 4. In the past four weeks, how often have you felt too tired to do work or daily activities because of your headaches?
- never rarely sometimes very often always
- 5. In the past four weeks, how often have you felt fed up or irritated because of your headaches? never rarely sometimes very often always
- 6. In the past four weeks, how often did headaches limit your ability to concentrate on work or daily activities?
- never rarely sometimes very often always



The Dizziness Handicap Inventory (DHI)

P1. Does looking up increase your problem? • Yes E2. Because of your problem, do you feel frustrated? • Ves F3. Because of your problem, do you restrict your travel for business or recreation? • Ves F4. Does walking down the aisle of a supermarket increase your problem? • Ves F5. Because of your problem, do you restrict your participation in social activities, such as going out to dimere, gaing to annotes, darching, or going to particip? • Ves F6. Does your problem significantly restrict your participation in social activities, such as going out to dimere, gaing to the movies, darching, or going to particip? • Ves F7. Because of your problem, do you have difficulty reading? • Ves • Ves F7. Because of your problem, do you have difficulty reading? • Ves • Ves F8. Does performing more ambitious activities such as sports, dancing, household • Yes • No F8. Does performing more ambitious activities such as sports, dancing, household • Yes • No F9. Does performing more ambitious activities such as sports, dancing, household • Yes • No F1. Do quick movements of your problem have you been embarrassed in front of others? • Ves • Sometimes F1. Do quick movements of your problem? • Ves • No • No F12. Because of your problem, do you avoid heights? <th></th> <th></th>		
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Sensory Organization Test (SOT)



Primary Aim

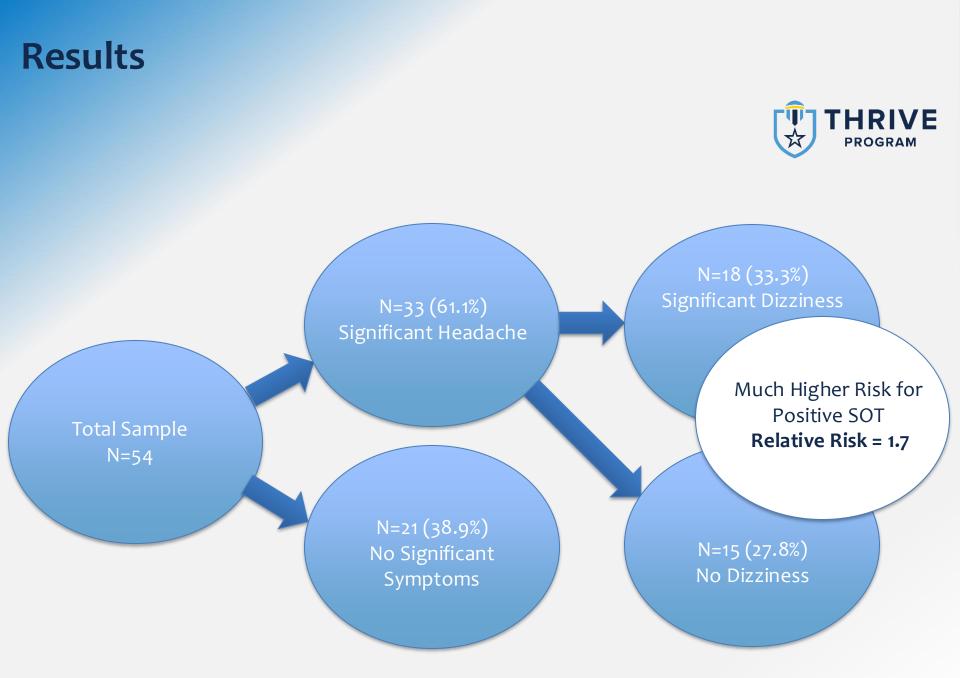


Dizziness and headaches are common symptoms

Many patients without traditional vertiginous symptoms show vestibular disruptions

We sought to clarify the relationship between headaches, dizziness, and vestibular dysfunction





Results - ANOVA



	WNL	VVP	OSP	<i>p</i> -value (η²)
	n=17	n=18	n=19	post-hoc summary
HIT-6	50.1 (11.8)	60.7 (10.0)	56.6 (14.5)	0.045 (0.11)
% significant	35%	78%	68%	(VVP>WNL, OSP)
DHI	15.6 (19.1)	31.0 (22.3)	38.0 (22.3)	0.002 (0.21)
% significant	12%	28%	56%	(OSP>WNL, VVP)

 $\label{eq:WNL} \begin{array}{l} \mbox{WNL} = \mbox{Within Normal Limits} \\ \mbox{VVP} = \mbox{Visual Vestibular Phenotype} \\ \mbox{OSP} = \mbox{Other Sensory Phenotype} \\ \mbox{Significant HIT-6} \geq & 56 \\ \mbox{Significant DHI} \geq & 35 \\ \mbox{Small effect size } \eta^2 = 0.01, \mbox{ Medium effect size } \eta^2 = 0.06, \mbox{ Large effect size } \eta^2 = 0.14. \end{array}$

Summary of Findings

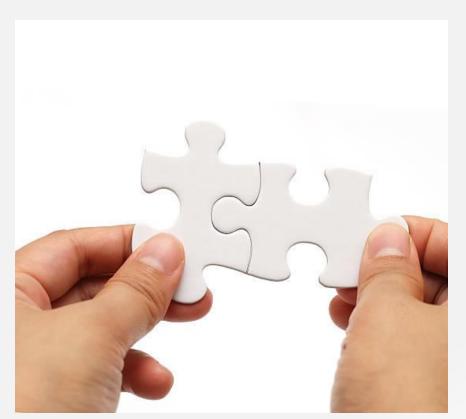


Headache... NOT dizziness... best predicted risk for SOT findings

Those with headache and no dizziness were more likely to have VVP

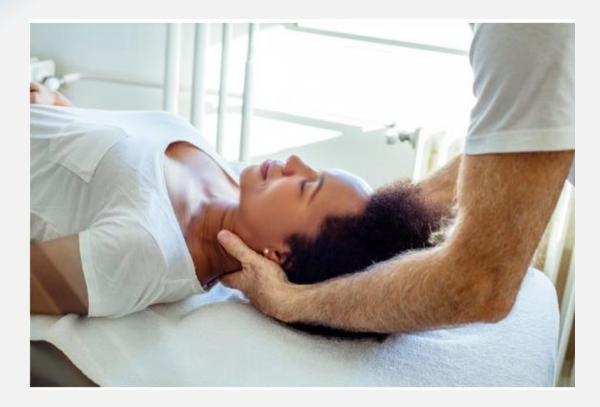
Those with headache AND dizziness were more likely to have other sensory phenotype

Lack of dizziness could lead to missing vestibular dysfunction



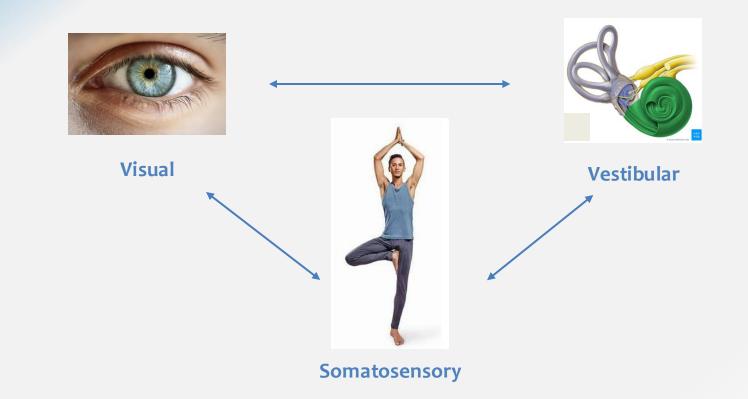
Clinical Implications





Spatial Orientation





Sensory Organization Test



Sensory Organizational Testing (SOT)

Are Somatosensory, Visual, & Vestibular systems recruited equally?



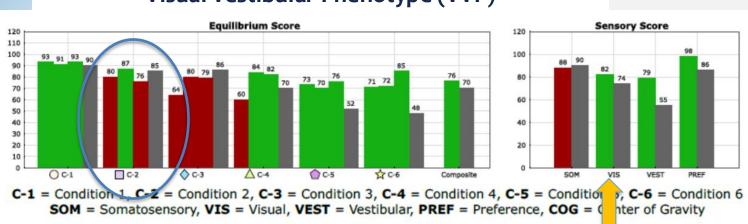
Sensory Organization Test





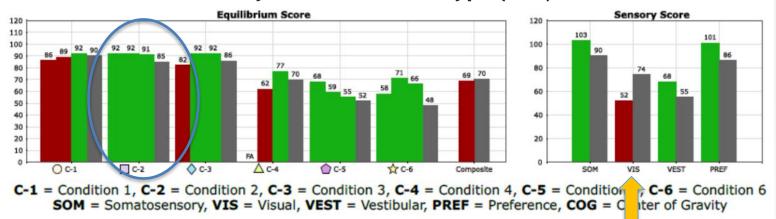
Sensory Organization Test





Visual Vestibular Phenotype (VVP)

Somatosensory Vestibular Phenotype (SVP)



Clinical Picture



Traditional Vestibular Impairments "OSP"	VS	Visual Vestibular Phenotype "VVP"
• Dizziness		Visual fatigue
Imbalance on uneven terrain		• Vice-grip or ocular headache
 Headaches at base of skull 		 Imbalance in dark or visually congested areas
		 Feeling "off"/ "buzzed"
		Brain fog
		 Social withdrawal

Clinical Findings



Headaches: -Ocular -Vice grip

Intact

oculomotor

testing (VNG)

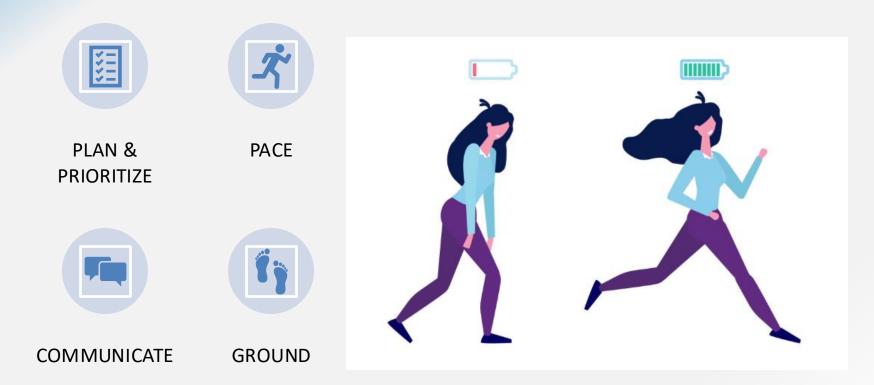


Brain Fog Cognitive Impact

Moderately abnormal SOT testing

Combating Sensory Fatigue







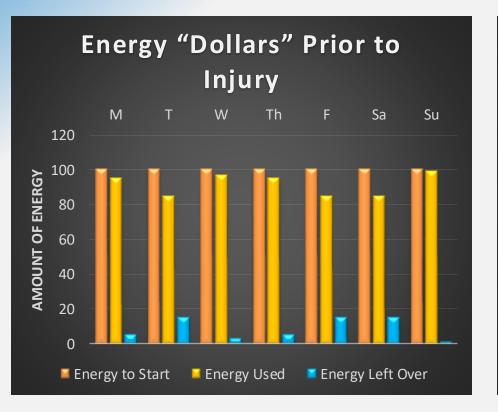


SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
			1 New York Day	2 200	3	4
5	6 500		8	9 10	10 1015	11
12 12	13	14 1638	15 538	16 1000	17 0.04	18 10
19 1700	20 200	21 200	22 22 22 22 20	23	24 200	25 209
26	27 200	28	29 Channed New York	30	31	

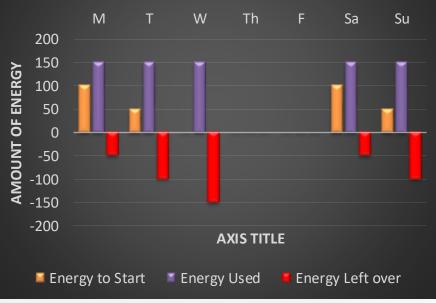






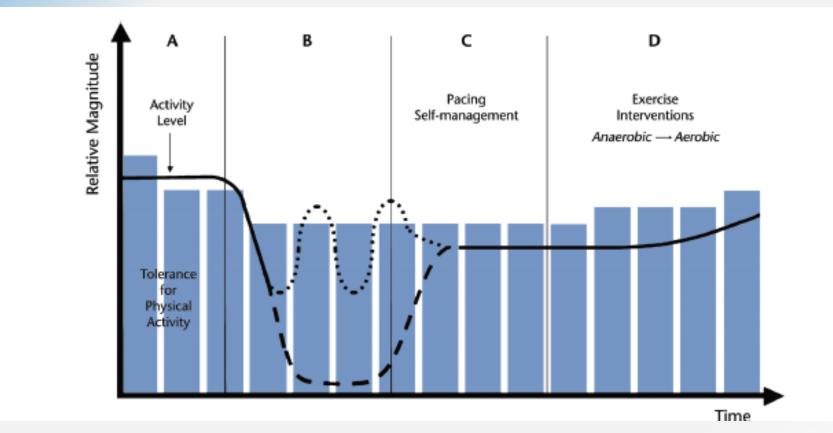


Energy "Dollars" with Neuromuscular Fatigue





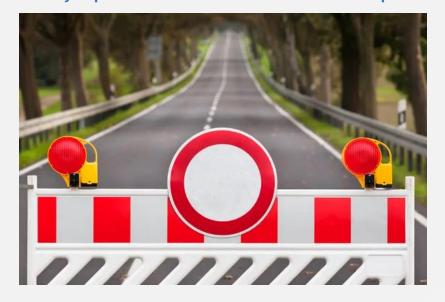
AMOUNT OF ENERGY







Neuromuscular fatigue: does not improve with mental toughness Therapeutic rest: Frequent short breaks in a low-stimulation environment can enhance endurance over time. Symptom barometer: Establish a symptom tracking system with family and a plan for managing fatigue. Resting is needed if symptoms increase more than 2 points above baseline.

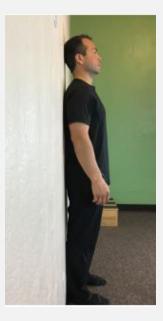






Grounding: Helps reduce dizziness, lightheadedness, or discomfort.
How it works: moving throughout static head positions while keeping the body still.
Eye position: Open (focused on a target) or closed.







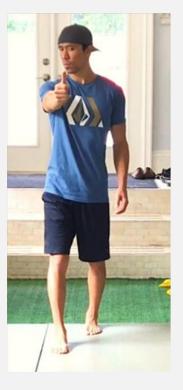


Clinical Indications



Patients with VVP may not report dizziness

Traditional VRT is contraindicated for VVP





Treatment: VVP Paradigm



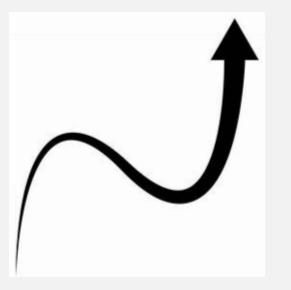
"Traditional" Sensory Re-integration



Treatment: VVP Paradigm



For Visual Vestibular Phenotype

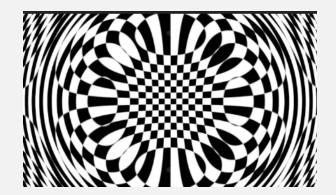


Treatment: VVP Paradigm



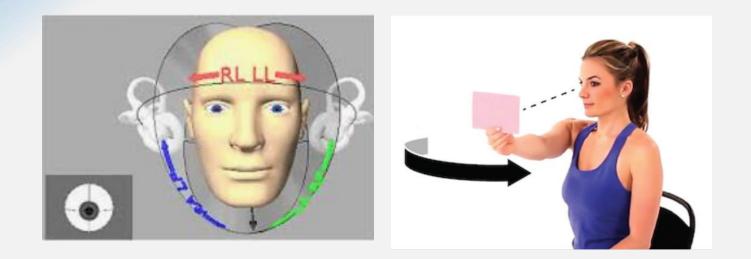
For Visual Vestibular Phenotype





Treatment: Gaze Stabilization





Clinical Pearls and Final Takeaways

Survivors

Give yourself grace Stay in-tune with your baseline

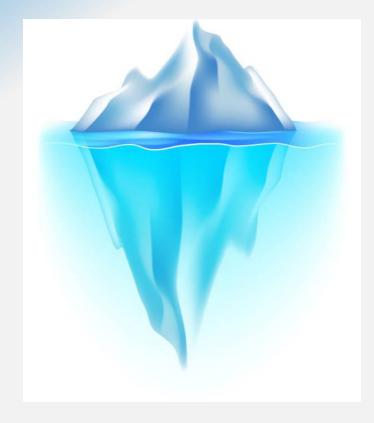
Clinicians

Treat the patient Dizziness ≠ Vertigo PTS vs. sensory dysfunction remature discharge



Future Directions





←Current data

← Expand our data
← Clarify clinical profiles
← Effective screening
← Treatment precision
← Follow outcomes

UNC Health

LOW OMEGA-6, HIGH OMEGA-3 DIETARY INTERVENTION



URC HEALTH®

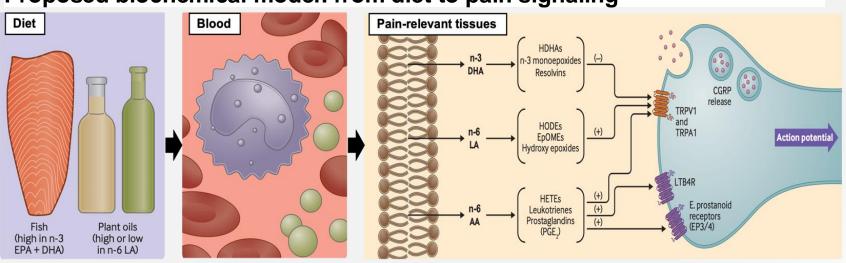
> Beth MacIntosh MPH, RD, LDN University of North Carolina Health Care System Metabolic & Nutrition Research Core <u>Beth.macintosh@unchealth.unc.edu</u>



Post-traumatic headache is common after TBI

Migraine-like headache accounts for 50-60% of PTH

Many with PTH do not fully respond to medications



Proposed biochemical model: from diet to pain signaling

Study Methods

Design: 12-week trial @ 3 different sites

Participants: n=122 being treated for persistent PTH with migraine features

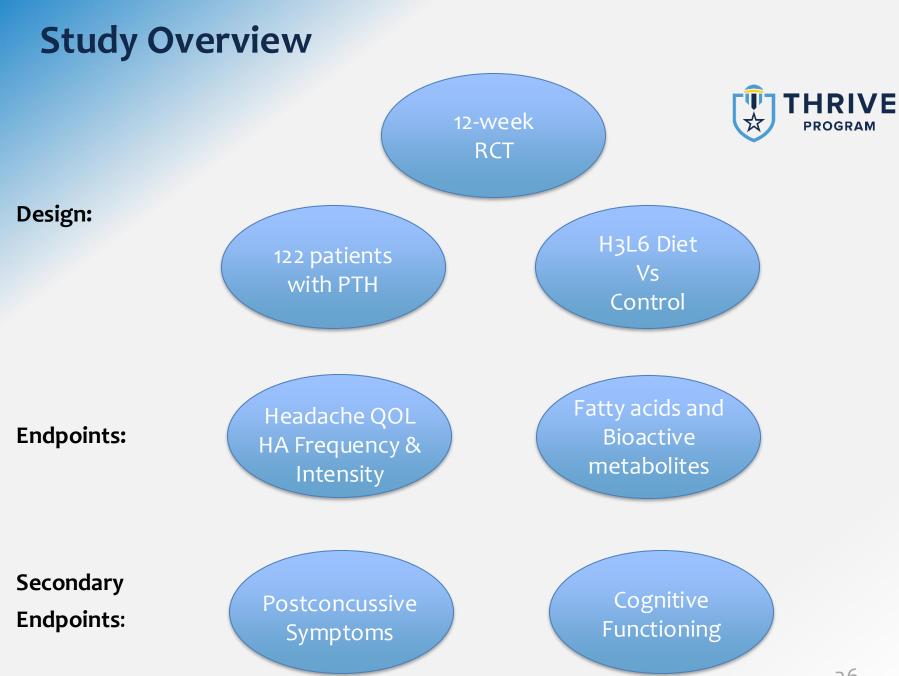
(8+ headaches/month for 3+ months)

Interventions: <u>H3L6 diet</u> vs <u>Control diet</u>

All participants received foods to cover 2/3 of their caloric intake.

Endpoints: Headache impact on quality of life, headache intensity and frequency, and blood fatty acids levels and bioactive metabolites

Secondary Endpoints: Symptom reports, Cognitive functioning





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Targeted dietary interventions to reduce pain in persistent post-traumatic headache among service members: Protocol for a randomized, controlled parallel-group trial^{*}

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ABSTRACT

Introduction: Post-traumatic headache (PTH) is common after traumatic brain injury (TBI), especially among active-duty service members (SMs), affecting up to 35% of patients with chronic TBI. Persistent PTH is disabling and frequently unresponsive to treatment and is often migrainous. Here, we describe a trial assessing whether dietary modifications to increase n-3 eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) and reduce n-6 linoleic acid (LA), will alter nociceptive lipid mediators and result in clinical improvements in persistent PTH.

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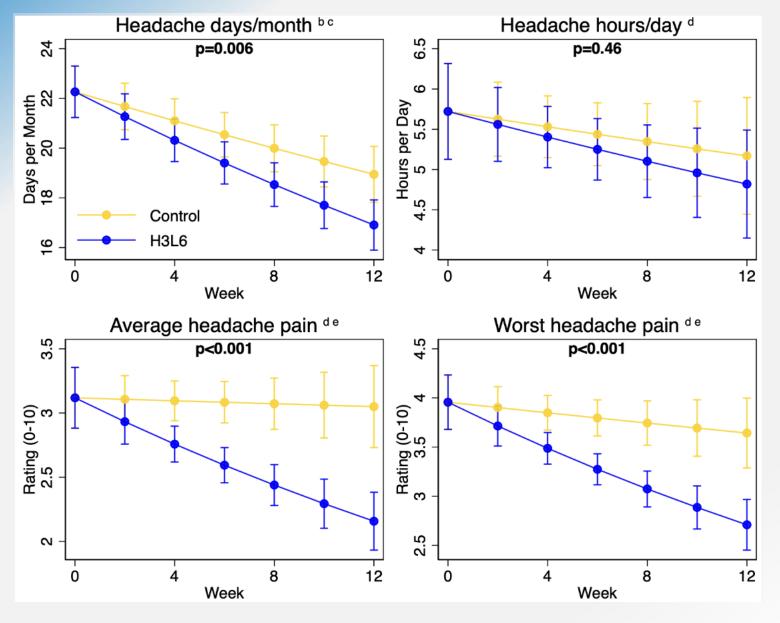
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Results



38

Results (cont.)

Plasma 4-HDHA was increased

Decreased self-report post-concussion symptoms

However... No impact on headache quality of life

No impact on other symptoms or cognitive testing



Summary

The H₃L₆ diet significantly reduced 3 clinically significant elements of headache pain

The diet modulated a key biological mediator implicated in headache pathogenesis

You're smart to eat a H3L6 diet after concussion, but eating the diet won't make you smarter





Contents lists available at ScienceDirect

Clinical Nutrition

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Original article

Methodology for altering omega-3 EPA+DHA and omega-6 linoleic acid as controlled variables in a dietary trial



NUTRITIO

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SUMMARY

Background & aims: Increasing dietary intake of n-3 EPA+DHA and lowering dietary n-6 LA is under investigation as a therapeutic diet for improving chronic pain syndromes as well as other health outcomes. Herein we describe the diet methodology used to modulate intake of n-3 and n-6 PUFA in a free living migraine headache population and report on nutrient intake, BMI and diet acceptability achieved at week 16 of the intensive diet intervention and week 22 follow-up time-point.

Methods: A total of 178 participants were randomized and began one of three diet interventions: 1) a high n-3 PUFA, average n-6 PUFA (H3) diet targeting 1500 mg EPA+DHA/day and 7% of energy (en%) from n-6 linoleic acid (LA), 2) a high-n-3 PUFA, low-n-6 PUFA (H3L6) targeting 1500 mg EPA+DHA/day and <1.8 en% n-6 LA or 3) a Control diet with typical American intakes of both EPA+DHA (<150 mg/day) and 7 en% from n-6 LA. Methods used to achieve diet change to week 16 include diet education, diet counseling, supply of specially prepared foods, self-monitoring and access to online diet materials. Only study oils and website materials were provided for the follow-up week 16 to week 22 periods. Diet adherence was assessed by multiple 24 h recalls administered throughout the trial. Diet acceptability was assessed in a subset of participants at 4 time points by questionnaire.

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Low-*n*-6 and low-*n*-6 plus high-*n*-3 diets for use in clinical research

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Intervention Nutrient Targets

	Total Fat (en%)	MUFA (en%)	SFA (en%)	Total PUFA (en%)	LA (en%)	ALA (en%)	AA (mg)	EPA+DHA (mg)
A: H3-L6	32%	18%	11%	3%	1.8%	0.6%	150	1,500
2500 kcal	89 g	50 g	31 g	8.3 g	5 g	1.6 g		
3000 kcal	107 g	60 g	37 g	10 g	6 g	2 g		
B: control	32%	12%	11%	8%	7.2%	0.6%	150	150
2500 kcal	89 g	33 g	31 g	22 g	20 g	1.6 g		
3000 kcal	107 g	40 g	37 g	26.6 g	24 g	2 g		

LA = linoleic acid = omega-6

EPA+DHA = eicosapentaenoic acid + docosahexaenoic acid = animal based omega-3's ALA = alpha-linolenic acid = plant source omega-3's

24hr Dietary Recall Results Pilot study – 12 week intervention in Chronic Daily Headache Population

Table 3

Diet intervention fatty acid targets and comparison of pre-intra intervention nutrient intakes from 24 h dietary recall* (Medians and 25-75 % percenti

						Change	es pre-pos	t diet inter	vention					
					L6 (n 28)				Н	13-L6 (n 27)		Betwe	een diets
	Diet	targets		Pre	I	ntra			Pre		ntra		Pre	Intra
Variable	L6	H3-L6	Median	25-75 %	Median	25-75 %	P	Median	25-75 %	Median	25-75 %	P	P	Р
Total energy (kJ)	N/A	N/A	8355	6222, 9447	7778	59·4, 9201	0.52	7142	5761, 7866	6678	5410, 8196	0.89	0.03	0.09
Total fat (en%)	32	32	33.6	29.6, 40.1	30.4	26.8, 34.3	0.05	33.4	29.1, 36.4	30.7	27.3, 34.0	0.08	0.38	0.84
Total protein (en%)	18	18	15.7	13.8, 16.8	15.2	13·7, 17·0	0.13	16.1	13·5, 19·6	17.2	15·1, 20·0	0.25	0.62	0.01
Total SFA (en%)	13	13	10.5	9.1, 11.9	14.0	12·0, 17·2	<0.001	10.5	9.8, 11.7	12.9	9.9, 14.5	0.16	0.99	0.06
Total trans (en%)	<0.5	<0.5	0.9	0.7, 1.2	0.6	0.5, 0.84	0.005	1.1	0.9, 1.4	0.5	0.3, 0.7	<0.001	0.07	0.06
Total MUFA (en%)	16	14	11.8	10.1, 13.2	10.4	8.0, 12.6	0.008	12.1	11.0, 13.5	9.3	8·4, 11·4	<0.001	0.82	0.51
Total PUFA (en%)	2.5	4.5	8.1	6.4, 10.6	3.5	3.1, 4.3	<0.001	7.4	5.9, 8.5	6.0	5.1, 7.1	0.1	0.05	<0.001
LA 18 : 2 (en%)	≤2.5	≤2.5	7.4	5.7, 9.6	2.4	2.0, 2.9	<0.001	6.4	5.3, 7.4	2.5	2.2, 3.9	<0.001	0.03	0.15
ALA 18 : 3 (en%)	0.6	>1.5	0.7	0.6, 0.9	0.7	0.6, 0.9	0.96	0.6	0.5, 0.9	1.6	1.3, 2.0	<0.001	0.32	<0.001
AA 20 : 4 (mg)	60	150	106	57, 159	48†	18, 74	<0.001	110	66, 176	114 [†]	69, 195	0.75	0.64	<0.001
EPA + DHA (mg)	125	>1000	43	25, 73	76 [†]	19, 264	0.32	47	20, 71	1482 [†]	374, 2558	<0.001	0.96	<0.001

L6, average-n-3, low-n-6 diet; H3-L6, high-n-3, low-n-6 diet; N/A, not applicable; en%, percentage of food energy; LA, linoleic acid; ALA, α-linolenic acid; AA, arachidonic acid.

* Between-subject and between-diet comparisons were calculated with the Wilcoxon signed-rank test and Mann–Whitney U test, respectively.

[†]Indicates that intra-intervention 24 h recall database contained fewer missing values for *n*-6 AA, EPA and DHA due to chemical analysis of relevant study foods.

24hr Dietary Recall Results 16 Week RCT in Migraine Population

Table 4 24hr dietary recall median intake data.

			Total energy (Kcal)	Total fat (en %)	Total protein (en %)	Total SFA (en %)	Total MUFA (en %)	Total PUFA (en %)	LA 18:2 (en %)	LA 18:2 (g/2000 kcal)	ALA 18:3 (en %)	ALA 18:3 (g/2000 kcal)	AA 20:4 (mg/2000 kcal)	EPA (mg/2000 kcal)	DHA (mg/2000 kcal)	EPA + DHA (mg/2000)
Control	W0	Median IQR	1569 (1261-1967)	34.5 (30.7-38.8)	17.0 (14.7-19.1)	11.5 (9.6–13.7)	11.9 (10.5–13.6)	7.4 (6.1–9.5)	6.5 (5.5-9.0)	14.4 (12.2-20.0)	0.8 (0.6-1.1)	1.8 (1.3-2.4)	134 (83-192)	16 [8-26]	40 (23-81)	60 (34-111)
	W16	Median IQR	1720 (1240-2099)	29.9 (24.1-35.9)	17.9 (14.2-22.7)	7.8 (6.4-10.3)	10.5 (8.8-13.2)	7.8 (6.2–10.4)	6.8	15.1 (11.3–21.1)	0.9 (0.7-1.0)	2.0 (1.5-2.2)	109 (49-169)	23	55 (22-139)	80 (29-174)
	W22	Median IQR	(1240-2099) 1567 (1245-1888)	30.1	18.5	(6.4–10.5) 9.2 (6.0–10.6)	(8.0-13.2) 10.1 (8.0-12.6)	(6.2-10.4) 7.6 (5.2-11.1)	7.2	(11.3-21.1) 16 (10.4-21.3)	(0.7-1.0) 0.8 (0.6-1.1)	(1.3-2.2) 1.8 (1.3-2.4)	(49–109) 137 (85–215)	20 [13-33]	(22-139) 53 (24-104)	(29-174) 74 (37-137)
	Contr (p-val	ol-WK16	change		**************************************	*			0.3 (0.9918) ^a	0.7	0.1 (0.9591) ^a	0.2	,			20 (0.6225) ^a
H3	WO	Median IQR	1603 (1232-1955)	34.7 (28.7-39.1)	15.7 (12.6-18.6)	11.4 (8.4–13.4)	12.2 (10.5–13.4)	7.0 (5.0-9.1)	6.5 (4.5-8.3)	14.4 (10.0-18.4)	0.7 (0.5-0.9)	1.6 (1.1-2.0)	122 (80-195)	11 [6-16]	36 (20-54)	48 (27-77)
	W16	Median IQR	1652 (1360-2093)	34.2 (28.0-40.3)	18.9 (15.5-20.8)	10.0 (8.6–13.0)	11.6 (9.2-14.0)	8.8 (7.2-10.7)	7.1 (5.5-8.5)	15.8 (12.2-20.0)	0.9 (0.7-1.1)	2.0 (1.5-2.4)	83 (41-161)	380 (218-614)	1063 (599-1747)	1484 (804-2367)
	W22	Median IQR	1471 (1073-1838)	34.3 (28.5-38.0)	17.9 (14.4-22.1)	10.2 (7.7–13.3)	11.3 (8.8-13.6)	8.2 (6.8-10.5)	6.9 (5.5-9.0)	15.3 (12.2-20.0)	0.7 (0.6-0.9)	1.6 (1.3-2.0)	124 (77-223)	250 (20-511)	632 (50-1071)	861 (70-1662)
	H3-W	1	ge (p-value)						0.6	13	0.2 (0.0159) ^c	0.4				1436 (0.0000) ^b
H 3L6	WO	Median IQR	1568 (1193-1841)	35.2 (30.1-40.2)	17.8 (14.8-21.2)	11.3 (9.9–13.0)	12.3 (10.1–14.4)	7.0 (5.3–9.2)	6.3 (4.7–8.3)	14.0 (10.4–18.4)	0.7 (0.5-1.0)	1.6 (1.1-2.2)	164 (100–237)	13 [6-26]	36 (13-78)	44 (20—96)
	W16	Median IQR	1494 (1137-1884)	34.7 (29.6-40.9)	18.5 (15.8-23.2)	11.6 8.8-13.7	13.1 (11.1–18.8)	5.4 (4.46.5)	3.2 (2.7-4.4)	7.1 (6.0–9.8)	1.1 (0.8-1.2)	2.4 (1.8-2.7)	130 79–190	371 211-744	964 530-1482	1341 778-2216
	W22	Median IQR	1472 (1172-1734)	33.0 (28.5-39.8)	18.6 (15.3-21.4)	12.3 (8.7-14.4)	12.5 (8.8-17.6)	5.3 (4.0-7.0)	3.6 (2.9-4.9)	8 (6.4–10.9)	0.8 (0.6-1.3)	1.8 (1.3-2.9)	170 (90-260)	296 (43-506)	722 (110-1212)	1052 (149-1785)
	H3L6- (p-val	-WK16 cha lue)	ange						-3.1 (0.0000) ^b	-6.9	0.4 (0.0040) ^c	0,9				1297 (0.0000) ^b
	WK16 (p-val	6 H3 vs Cou lue)	ntrol						1.0		0.6					<0.0001
		6 H3L6 vs (Control						< 0.0001		0.01 ^c					<0.0001
	1. The second	6 H3 vs H3	L6						<0.0001		0.1					1.0

^a Achieved nutrient target.

^b Achieved nutrient target but not to level planned.

^c Change occurred when maintenance was nutrient target.

Study Protocol – Diet Intervention Methods

- Provision of key foods (fish, oils, snacks, low n-6 foods) on bi-weekly basis
- 2. Bi-weekly nutrition counseling
- 3. Self-monitoring (diet checklist and daily rating of adherence)
- 4. Diet education materials designed to address all places people make food choices: Diet Guidelines, Food List, Grocery Shopping Guides, Reading Food Labels activity, Dining Out Guide, 7-day Meal Plan, 75+ diet adherence recipes, Cooking Guide, Travel Guide
- 5. Access to mobile friendly website with all diet education materials



Diet Guidelines

Increase Omega-3

- Consume 1, 4oz serving of high fat fish per day. This included salmon, albacore tuna and sablefish.
- The study provided frozen and canned fish in order to reach this goal.

*Flaxseed 2 tsp to 2 Tbsp per day

Lower Omega-6

- Use only the study provided oils for all home food preparation. When dining out or purchasing processed foods eliminate all oils except olive oil, coconut oil, palm oil, palm kernel oil)
- Study provided oils included a blend of olive oil/macadamia nut oil as well as butter, fat free mayonnaise and a cruet for preparing salad dressing with study oil.
- Eliminate fried foods and limit fast food and processed food (especially snack foods).
- Include plenty of low omega-6 foods such as fruit, vegetables, minimally processed grains and dairy.

Comparison of Dietary Fats

Dietary Fat

20				
Canola oil	7 19	9		62
Safflower oil +	8 13	*		75
Flaxseed oil	9 14			53 18
Sunflower oil ‡	9 29	*		57
Corn oil	13 53		1	27
Olive oil	14 10	1		71
Soybean oil	16 50)		7 23
Peanut oil	17 3	2		45
Cottonseed oil	26	52		* 17
Lard	40		10 1	41
Palm oil	49		9 *	37
Butter	63		3*	25
Coconut oil	87			<mark>2 6</mark>
	Saturated Fat	Polyunsaturated	Fat	Monounsaturated Fat
		(an omega-6 essential fatty acid)	alpha-linolenic acid (an omega-3 essential fatty acid)	oleic acid (an omega-9 fatty acid)

* High Oleic # Mid Oleic * Trace

Fatty acid content expressed as g/100g fat

Oil	Data Source	LA g/100g	ALA g/100g
Extra Virgin Olive Oil (Trader Joe's)	Lab Analysis	6.8	0.698
Extra Virgin Olive Oil (Bertolli)	NDSR	9.76	0.76
Macadamia Nut Oil (Vital Choice)	Lab Analysis	2.3	0.191
Low n-6 Oil Blend	Lab Analysis	2.048	0.042
Butter, salted	USDA	2.166	0.315
Coconut oil	Lab Analysis	0.9	0.0
Low n-6 Vinaigrette	Lab Analysis	1.957	0.259
Corn Oil	Lab Analysis	50.375	1.043
Soybean Oil	USDA	50.95	6.79
High n-6 Oil Blend	Lab Analysis	45.408	0.892
High n-6 Butter Blend	Lab Analysis	29.632	0.629
High n-6 Vinaigrette	Lab Analysis	15.851	0.456

Fats a	nd
Nuts	



Fats allowed	Fats to choose when dining out	Fats to avoid
	or reading ingredient lists	
Study provided oil	Extra virgin olive oil	Margarine – Stick or tub
Study provided butter	Butter	Vegetable oil
Salad dressing made with	Coconut oil Palm	Avocado oil
study provided oil	kernel oil Palm oil	Canola oil
Study provided salad		Corn oil
dressing Fat-free		Cottonseed oil
mayonnaise		Low fat mayonnaise
Fat-free salad dressings		Soybean oil
		Safflower oil
		Sunflower oil
		Sesame oil
		Peanutoil
		Rice Bran oil
		Salad dressing
		Mayonnaise
		Grapeseed
		Partially hydrogenated vegetable oil
		Mono- and Diglycerides
		Vegetable dips
Nuts and seeds allowed	Nuts and seeds to limit	Nuts and seeds to avoid
Macadamia nuts	Cashews	Walnuts
	Hazelnuts	Brazil nuts
	Almonds Almond	Peanuts
	butter	PeanutButter
		Mixed nuts
		Pecans
		Pine nuts
		Pistachios
		Sesame seeds
		Tahini paste
		Sunflower seeds
		50
1		

Food (Brand)	Data Source	LA g/100g	EPA+DHA mg/100g
Wild Sockeye Salmon (Vital Choice)	Lab Analysis	0.3	2,500
Wild Sockeye Salmon (Whole Foods)	Lab Analysis	0.010	455-568
Albacore Tuna (Vital Choice)	Lab Analysis	0.128	3,800
Canned - Pacific Sockeye Salmon (Vital Choice)	Lab Analysis	0.099	1,331
Canned – Albacore Tuna (Vital Choice)	Lab Analysis	0.156	4,908
Sablefish (Vital Choice)	Lab Analysis	0.3	1,800
Trout (Trident Foods)	Lab Analysis	0.225	792
Sardines (Brunswick)	Lab Analysis	0.115	1,591- 2,150
Chicken Breast (Tyson)	USDA	0.59	30
Ground Turkey (Shady Brook)	USDA	0.66	10
Cod (Trident)	Lab Analysis	0.007	169-255
Chunk Light Tuna (Harris Teeter)	Lab Analysis	0.004	144
Shrimp (Whole Foods)	Lab Analysis	0.013	78
Tilapia (Krimson Premium Seafood)	Lab Analysis	.2	30 51

EPA+DHA Food Sources

Fish



Beef, poultry, fish, and pork	Beef, poultry, fish and pork	Beef, poultry, fish and pork to
Allowed	to limit	avoid
Best Choices:	Catfish (also called Swai or	Fried fish
Wild Salmon – Alaskan or Pacific	Pangasius)	Fried Squid/Calimari
Wild Mackerel	Tilapia	Fried chicken
Wild Turbot	Orange Roughy	Processed meats:
Tuna	Beef	Bacon
Swordfish	Chicken	Ham
Halibut	Turkey	Pepperoni
Bluefish	Pork	Salami
Trout	Duck	Sausage – all kinds
Sea Bass	Lamb	Bologna
Whitefish	Venison	Hot dogs
Herring		Deli meat
Perch		Liverwurst
Canned Salmon		Spam
Oysters		
Arctic Char		
Barramundi		
Good Choices:		
Canned Tuna		
Scallops Shrimp		
Crabs		
Oysters		
Mussels		
Clams		
Crayfish		
, Squid/Calimari		
Lobster Grouper		
Atlantic Salmon		
Cod		
Snapper		
Flounder		F 2
Haddock		52

Snack Foods





Salty snacks allowed	Salty snacks to limit	Salty snacks to avoid
Popcorn (no oil added or with		Crackers
Palm oil only)		Potato chips
Fat free pretzels		Tortilla chips
Low fat crackers – study		Packaged snack foods
provided		Packaged cakes
Wasa crackers		
Jerky – study provided		

Sweets allowed	Sweets to limit	Sweets to avoid
Fruit – fresh	Fat free hard candies	Cake – store bought
Fruit – dried		Pies – store bought
Fruit - frozen		Frosting – store bought
Real Whip cream		Cookies – store bought
Pudding – homemade		Candy Bars
Jell-o		Cool Whip
Smoothies		Graham Crackers
Ice Cream – vanilla, chocolate		Cake mix
or strawberry flavor (no nuts		Brownie mix
or chocolate pieces)		Prepared pudding and
Dark chocolate		pudding mixes
Homemade cake – study		Ice cream cones
recipe		
Homemade fruit pie – study		
recipe		
Sugar		
Chewinggum		
Popsicles		
Italian ice		
		53

Condiments

-		ł
		1
ľ		
ton Gar or 1/8 to or 1/2	lic Powder Oni (p. = 1 clove 1 tsp. = tsp. minced or 1/3	n Powder 1 thip fair cup chapper
	Water	Lemon.Man or Water
N.A.	Vegetable or Olive Oil	White Har Vine for
	tandar pareo Clove	Vrgetable or OliveC
ol see	typ. Suga 4 typ. Sala 9 Dry Mus Dry Mus Onion Pos Dried Ore a Black Pe	all mutan
number of the second Garage	111215 11215 1155-0 1155-0 1155-0 1155-0	11.10 - 11 - 11 - 11 - 11 - 11 - 11 - 11 -
adary a	Red Wine Vinegar	199
1.55		COLUMN PLAN

Condiments allowed	Condiments to limit	Condiments to avoid
Red Wine Vinegar		Chip dips
Balsamic Vinegar		Mayonnaise
Cider Vinegar		Bacon bits
Rice Vinegar		Gravy
Lemon juice		Most salad dressings
Ketchup		
Mustard		
BBQ sauce		
Cocktail sauce – brands		
without oil		
Salsa		
Hot Sauce		
A-1 Sauce		
Worcestershire sauce		
Soy sauce		
Relish		
Pickles		
Olives		
Jelly		
Jam		
Syrup		
Honey		
Fat free mayonnaise		

Dairy, Fruits, Vegetables, Whole Grains, Beans, Herbs and Spices



Reading Food Labels



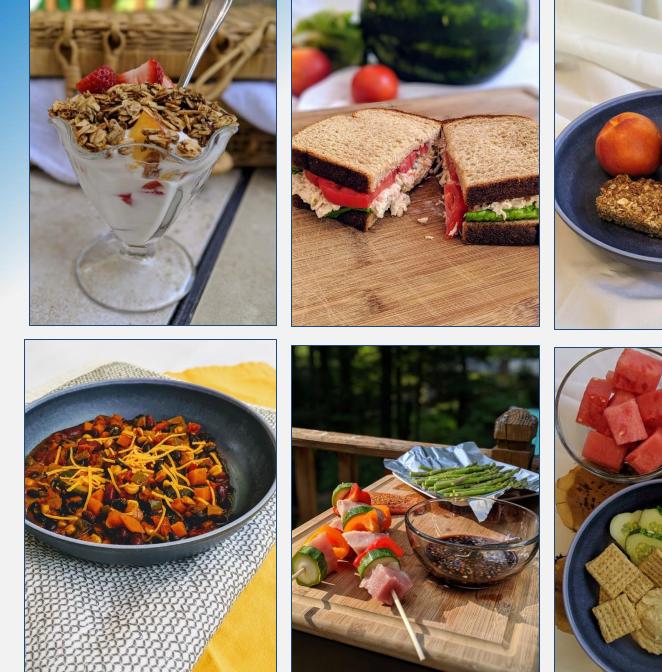
Nutrition Facts										
Serving Size 1 OZ										
Servings Per Cor	ntainer 8									
Amount Per Serving										
Calories 140	Calories	from Fat 60								
3	% Daily Value									
Total Fat 8g			13%							
Saturated Fat 1	L.5g		8%							
Trans Fat Og			1 10 - 1992 b							
Cholesterol 0m	g		0%							
Sodium 250mg			10%							
Total Carbohyd	Irate 18g		6%							
Dietary Fiber 1	g		2%							
Sugars 0g										
Protein 1g										
Vitamin A 0%		V	itamin C 0%							
Calcium 0% Iron 0%										
Percent daily val	ue reflects "as	packaged" foo	od.							
* Percent daily values are based on a 2,000 calorie diet.										
Your daily values		r or lower dep	ending on							
your calorie need										
	Calories:	2,000	2,500							
Total Fat	Less than	65g	80g							
Sat Fat	Less than	20g	25g							
Cholesterol	Less than	300mg 2,400mg	300mg							
	Sodium Less than		2,400mg							
Total		300g	375g							
Carbohydrate		-	-							
Dietary Fiber		25g	30g							
Calories per gran	m:									
Fat 9	Carbohydrate	4	Protein 4							
INGREDIENTS:			r Pressed							

INGREDIENTS: Whole Potato Flour, Expeller Pressed Sunflower, Safflower and/or Soybean Oil, Tomato Puree, Spinach Puree, Garlic, Sea Salt.

Practical Diet Recommendations

- 1. Use olive oil, butter and coconut oil in all home food preparation with focus on good quality extra virgin olive oil.
- 2. Limit foods high in vegetable oils like fried foods, chips, crackers, mayonnaise and store-bought salad dressings. Start reading ingredient lists carefully.
- 3. Increase intake of fatty fish to at 4-5 times per week. Choose fish high in omega-3's like salmon and albacore tuna. Canned fish like sardines, canned tuna and canned salmon are great options and affordable.
- 4. Incorporate plant sources of omega-3's into your routine as well ground flaxseed and chia seeds.
- 5. Base your diet on foods that are naturally low in omega-6 fatty acids minimally processed grains, fruits, vegetables, grass fed meats and pasture raised eggs, low sugar dairy products, beans.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast	1 <u>Flaxseed</u>	1 Serving	1 ½ Cups cooked	Bagel with Cream	Parfait: ¾Cup	3 Apple Flaxseed	Scrambled Eggs
	<u>Granola Bar</u>	<u>Smoothie,</u>	Oatmeal with	Cheese, 1 Cup	<u>Macadamia Nut</u>	Pancakes, 2 Tbsp	with Cheese,
	Fruit, 1 Cup Milk	1 ½ Cup Cheerios	Honey, Dried	Yogurt or Milk,	<u>Granola</u> , ¾ Cup	Maple Syrup, 2	<i>Toast</i> (study
	or Yogurt	with 1 Cup Milk	Coconut, 2 tsp	Fruit	Yogurt and ½	tsp Study Butter,	bread) with
			Flaxseed, 1 Cup		Cup Fruit	1 Cup Milk or	Study Butter,
			Fruit, 1 Cup Milk			Yogurt	<u>Smoothie</u>
			or Yogurt				
Lunch	2 Salmon Cakes,	1 Serving Spinach	2 <u>Rice, Bean and</u>	1 <u>Tuna Salad</u>	1 ½ cups <u>Salmon</u>	2 Cups <u>Tuna</u>	4 oz Broiled
	Green Salad with	<u>Salad with</u>	Vegetable Fajitas	Sandwich,	Macaroni Salad	Noodle Casserole	Sablefishwith
	<u>Balsamic</u>	<u>Shrimp</u>		Cucumber and	and Green	and 1 Cup Mixed	Study Seasoning,
	Vinaigrette, ½			Tomatoes with	Vegetable Salad	Vegetables	Roasted
	Cup <u>Warm</u>			<u>Balsamic</u>	with 3 Tbsp	cooked with	Asparagus, Rice
	Potato Salad			<u>Vinaigrette</u> , Fruit	<u>Vinaigrette</u> and	Study Oil	
					Cheese		
Sides and Snacks	Fruit, 1 Cheese	Fruit, 1 <u>Study</u>	Fruit, Celery	<i>Popcorn,</i> Fruit	1 <u>Granola Bar,</u>	Beef Jerky, Fruit,	Fruit, 2 oz
	Stick,	<u>Brownie</u>	Sticks with	with Yogurt	<i>Beef Jerky,</i> Fruit	Cheese Stick	Sardines with
	Baby Carrots		Creamy Blue				Study Crackers,
	with <u>Ranch</u>		Cheese Dressing,				Cucumber Slices
	Dressing		1 Cheese Stick,				with <u>Light Ranch</u>
			Beef Jerky				<u>Dressing</u>
Dinner	Veggie Patty on	6 oz <u>Salmon with</u>	<u>Tuna and Potato</u>	Grilled Steak, 1	2 <u>Grilled Fish</u>	1 ½ cups <u>Shrimp</u>	1 ½ Cups
	Study Bread with	Maple Glaze, 1½	<u>Croquettes</u> , 1	½ Cups <u>Thyme</u>	<u>Tacos</u>	and Orzo, Mixed	<u>Vegetarian Chili</u>
	Cheese, Onion,	Cup <u>Broccoli</u>	Cup Green Beans	<u>Roasted</u>		Greens	with 1 Baked
	Tomato and	Salad, 1 Cup <u>Rice</u>	cooked with 1 ½	<u>Vegetables</u>		Vegetable Salad	Potato and Sour
	Lettuce. Tomato	<u>Pilaf</u>	tsp Study Oil, 1½			with 2 Tbsp	Cream
	Soup and Study		Cups <u>Sweet</u>			<u>Vinaigrette</u>	
	Crackers		Potato Fries				
Desserts	1/2 Cup Blueberry	¾ Cup Vanilla Ice	<u>Study Brownie</u>	Flaxseed Granola	1 Baked Apple	1 Fruit Popsicle	2 Slices <u>Banana</u>
	Crisp with ½ Cup	Cream, 1/4 Cup	with Milk	<u>Bar</u>	with Macadamia		<u>Bread</u>
	Vanilla Ice Cream	<u>Macadamia Nut</u>			Nuts and Raisin		
		Granola			Filling		







Thank You

Questions?

