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Aclarando dudas sobre la ALIMENTACIÓN BASADA EN PLANTAS



Dra. Marcela Sandoval Garza

Sábado 22 de mayo de 2021

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JUAN.

Hola, Juan.

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Obesidad.
Diabetes.
Colesterol alto.
Hipertensión.

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Dieta a base de PLANTAS y alimentos ENTEROS.

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Muy bien, Juan.
Excelente inicio.

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Juan sale a una barbecue.

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"Es que necesitas consumir proteína"



"Es que necesitas suplementos, no es una alimentación completa"



"Es que quitar grupos de alimentos importantes, es un trastorno de alimentación"



"No hay calcio porque quitas los lácteos y eso te provoca fracturas"



Es que no es saludable llevar una dieta sin carne"



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"Es una dieta muy estricta, muy extrema y tan exagerada"

"Es que son muchos carbohidratos y engordas"

"Mi amigo hizo esa dieta y le dio anemia"

"Tanta fruta engorda y provoca diabetes"

"Si quieres juega contigo, pero no con los niñ@s. Esta no es una dieta ni para el embarazo ni para los niñ@s"







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¿Valdrá la pena? Estoy confundido. ¿Quién tiene la razón?

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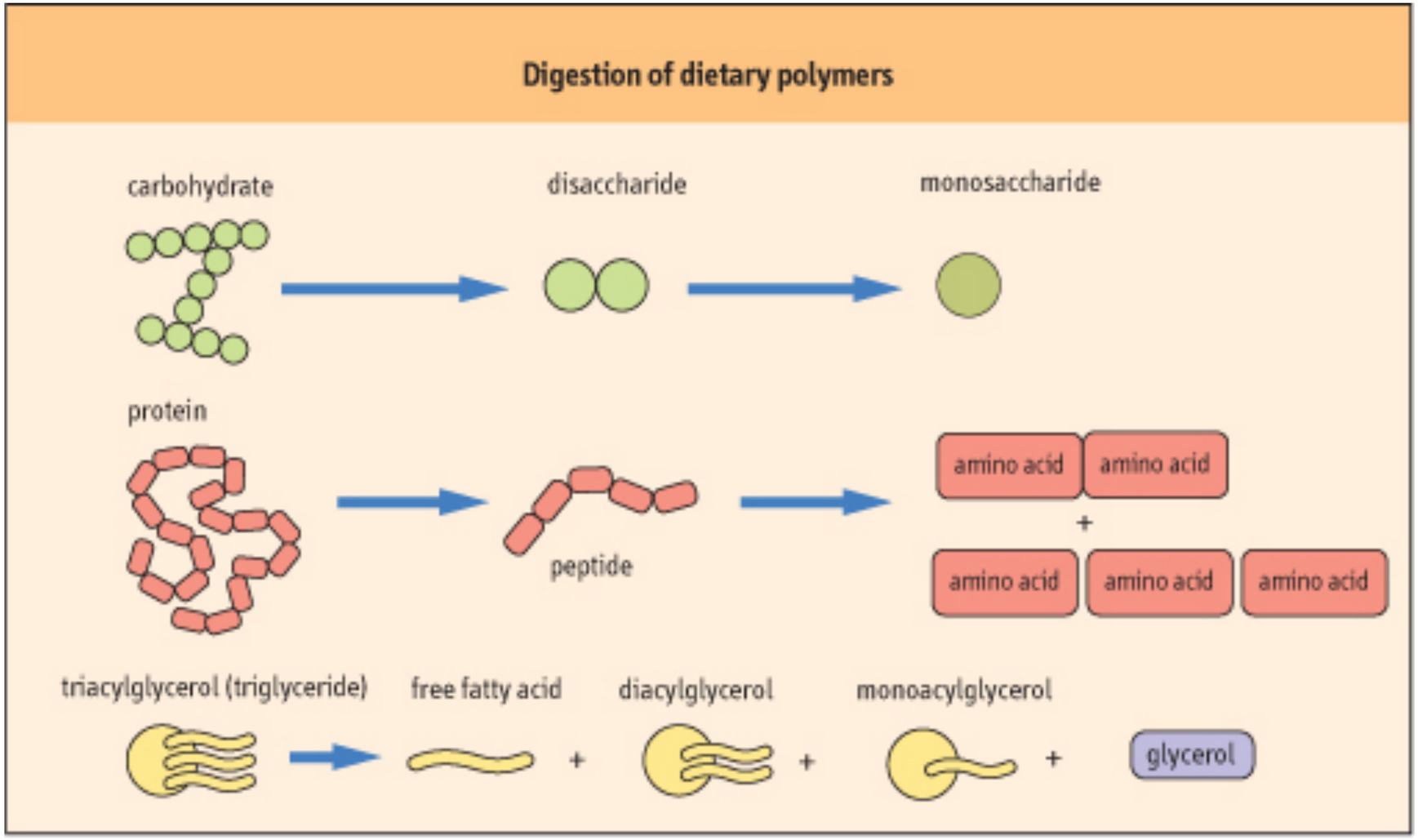
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¡¡¡AMINOÁCIDOS!!!

TIROSINA

GLUTAMATO

SERINA

FENILALANINA

CISTEÍNA

LEUCINA

TRIPTÓFANO

PROLINA

HISTIDINA

ISOLEUCINA

ARGININA

TREONINA

ASPARAGINA

SERINA

LISINA

VALINA

ARGININA

ALANINA

GLICINA

ASPARTATA

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"Es que necesitas consumir proteína"

Am J Clin Nutr 1994;59(suppl):1203S–12S

Plant proteins in relation to human protein and amino aci

Vernon R Young and Pe

ABSTRACT Plant prote
capita supply of protein on
North American region. Th
in relation to their amino a
quirements, and dietary pro
teins can serve as a complet
acids for meeting human ph
review ends with a list of
cerning the relationship bet
tion and a list of some nutri
professional and informed

KEY WORDS Amino a
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score, timing, digestibility,

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TABLE 11
Plant proteins in human nutrition: myths and realities

Myth
1) Plant proteins are ''incomplete'' (ie lack specific amino acids)
2) Plant proteins are not as ''good'' as animal proteins
3) Proteins from different plant foods must be consumed together in the same meal to achieve high nutritional value
4) Animal bioassay procedures are satisfactory indexes of the human nutritional value of food proteins
5) Plant proteins are not well digested
6) Plant proteins alone are not sufficient to achieve an adequate diet (protein intake)
7) Plant proteins are ''imbalanced'' and this limits their nutritional value

MITOS

1. Son "incompletas".
2. No son tan "buenas" como las de los animales.
3. Deben de combinarse.
4. Procedimientos de bioensayos animales comparables con valor nutricio humano.
5. No son bien digeridas.
6. Solas no son suficientes para dieta adecuada.
7. Están en desequilibrio y limitan su valor nutrimental.

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Am J Clin Nutr 1994;59(suppl):1203S–12S

Plant proteins in relation to human protein and amino acid nutrition[1,2]

Thus, we conclude that consumers do not need to be at all concerned about amino acid imbalances when the dietary amino acid supply is from the plant-food proteins that make up our usual diets.

acids for meeting human physiological requirements. This short review ends with a list of a series of myths and realities concerning the relationship between plant protein and human nutrition and a list of some nutritional issues of concern to the health professional and informed consumer.

KEY WORDS Amino acids, requirements, protein, complementation, nutritional quality, nitrogen, balance, amino acid score, timing, digestibility, limiting amino acid, lysine

amounts are given in **Table 1**. On a global basis, plants provide ≈65% of the world supply of edible protein. The cereal grains, in particular, account f
protein (**Table 2**) an
contribute ≈35% o
However, there are
supplies from anima
and developing regi
America animal prod
whereas the equivalent figure is ≈20% for the populations of the

"Es que necesitas consumir proteína"

Concluímos que los consumidores no necesitan estar del todo preocupados sobre desequilibrios en aminoácidos cuando su ingesta viene de proteínas de las plantas.

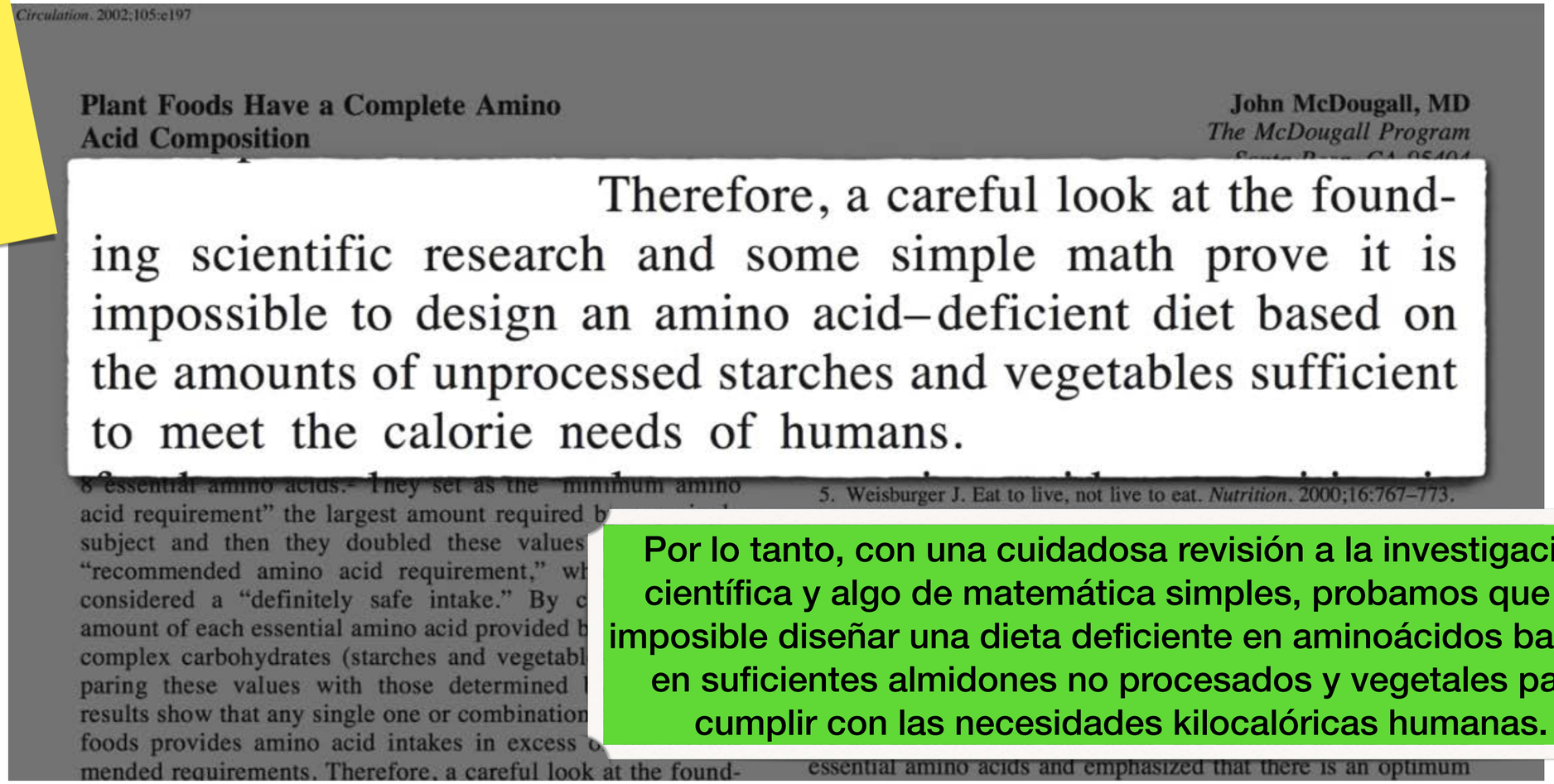
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Circulation. 2002;105:e197

Plant Foods Have a Complete Amino Acid Composition

John McDougall, MD
The McDougall Program

Therefore, a careful look at the found-ing scientific research and some simple math prove it is impossible to design an amino acid–deficient diet based on the amounts of unprocessed starches and vegetables sufficient to meet the calorie needs of humans.

8 essential amino acids. They set as the "minimum amino acid requirement" the largest amount required b subject and then they doubled these values "recommended amino acid requirement," wh considered a "definitely safe intake." By c amount of each essential amino acid provided b complex carbohydrates (starches and vegetabl paring these values with those determined results show that any single one or combination foods provides amino acid intakes in excess o mended requirements. Therefore, a careful look at the found-

5. Weisburger J. Eat to live, not live to eat. *Nutrition*. 2000;16:767–773.

essential amino acids and emphasized that there is an optimum

Por lo tanto, con una cuidadosa revisión a la investigación científica y algo de matemática simples, probamos que es imposible diseñar una dieta deficiente en aminoácidos basada en suficientes almidones no procesados y vegetales para cumplir con las necesidades kilocalóricas humanas.

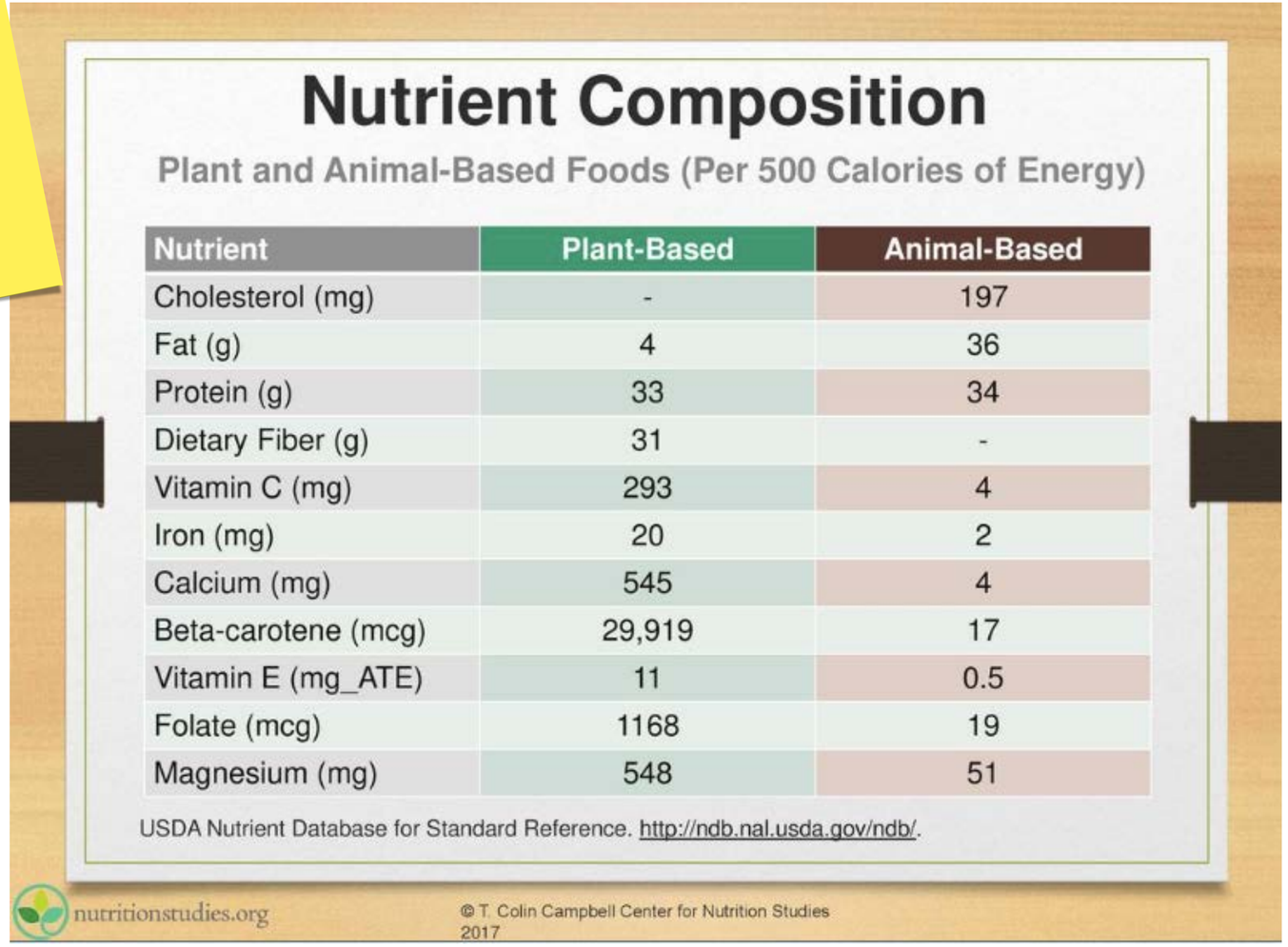
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Nutrient Composition

Plant and Animal-Based Foods (Per 500 Calories of Energy)

Nutrient	Plant-Based	Animal-Based
Cholesterol (mg)	-	197
Fat (g)	4	36
Protein (g)	33	34
Dietary Fiber (g)	31	-
Vitamin C (mg)	293	4
Iron (mg)	20	2
Calcium (mg)	545	4
Beta-carotene (mcg)	29,919	17
Vitamin E (mg_ATE)	11	0.5
Folate (mcg)	1168	19
Magnesium (mg)	548	51

USDA Nutrient Database for Standard Reference. http://ndb.nal.usda.gov/ndb/.

nutritionstudies.org

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"Es que necesitas

Nutrition and Cancer, 66(6), 1077–1082
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ISSN: 0163-5581 print / 1532-7914 online
DOI: 10.1080/01635581.2014.927687

COMMENTARY

Untold Nutrition

T. Colin Campbell
Division of Nutritional Sciences, Cornell University,

Nutrition is generally investigated, and findings i in reference to the activities of individual nutrient composition of foods, food labeling, food fortific nutrient recommendations are mostly founded on this a a practice commonly known as reductionism. V information on specifics is important and occasionall practice, it ignores the coordinated, integrated an symphonic nutrient activity (wholism) that occurs *in v*

With reductionism providing the framework, public confusion abounds and huge monetary and social costs are incurred. Two examples are briefly presented to illustrate, the long time misunderstandings (1) about saturated and total fat as causes of cancer and heart disease and (2) the emergence of the nutrient supplement industry. A new definition of the science of nutrition is urgently needed.

individual nutrients. The nutrient composition of foods is described and displayed as the amounts of individual nutrients and health claims often focus on the kind, amount, and presumed functions of individual nutrients, as in food labeling, food fortification, and health claims. This myopic focus on individual nutrients rather than food, which may be called

- Meta-análisis de más de 100 estudios y cientos y cientos de sujetos de investigación.
- NO HAY BENEFICIO A LARGO PLAZO POR LOS SUPLEMENTOS VITAMÍNICOS.
- Algunos suplementos pudieran incrementar ocurrencia de diabetes, enfermedades cardiovasculares y cáncer.
- Suplementar con OMEGA 3: sin beneficio a largo plazo, incrementa riesgo de diabetes.
- Esto empezó a hacerse público 10 años antes, sin consecuencia en el mercado.
- Público desea resolución rápida (reduccionismo).
- Actividad nutrimental individual in vitro vs. actividad nutrimental integral in vivo.

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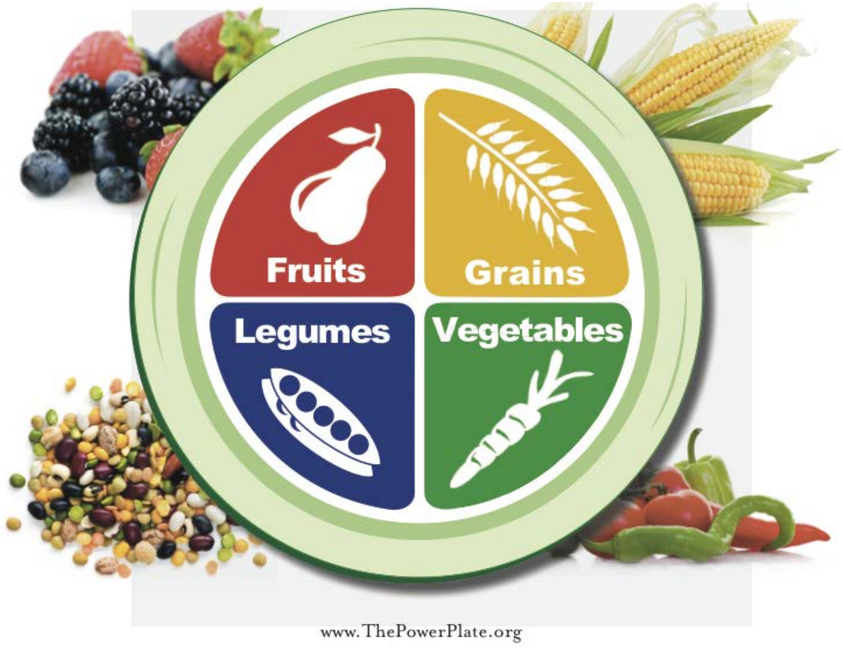
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Centers for Disease Control and Prevention
MMWR Morbidity and Mortality Weekly Report
Supplement / Vol. 60 January 14, 2011

Coronary Heart Disease and Stroke Deaths — United States

Nora L. Keenan, PhD
Kate M. Shaw, MS
National Center for Chronic Disease Prevention and Health Promotion, CDC

Corresponding author: Nora L. Keenan PhD, Division for Heart Disease and Stroke Prevention, 2877 Brandywine Road, MS K-47, Atlant
Telephone: 770-488-6487; Fax: 770-488-8334; E-mail: nlk0@cdc.gov.

Heart disease and stroke are the first and third leading causes of death in the United States* (*1*) and have maintained this ranking since 1921 and 1938, respectively (*2*). In 2006, cardiovascular disease was responsible for 31.7% of all deaths: 26.0% from heart disease and 5.7% from stroke (*1*). Deaths from coronary heart disease (CHD) (425,425 deaths) comprise 67.4% of all deaths from heart disease (631,636 deaths). The *Healthy People 2010* objectives of reducing death rates to 162 deaths per 100,000 population for CHD and 50 deaths per 100,000 for stroke (objectives 12-1 and 12-7) were met in 2004 (*3*). However, despite the overall decrease in CHD and stroke death rates, the target death rates for both diseases were not met for two subpopulations: blacks and men.

Healthy People 2020 has four overarching goals: 1) eliminate preventable disease, disability, injury, and premature death; 2) achieve health equity, eliminate disparities, and improve the health of all

occlusion and stenosis of cerebral arteries) not resulting in cerebral infarction. Substantial differences in rates were determined by nonoverlapping confidence intervals (CIs), and these differences are discussed in the report; however, nonoverlapping CIs were not used as an indicator of statistical significance.

Trends in mortality disparities for CHD and stroke over time were not examined. In addition, death rates by educational attainment were not included because education information on the death certificates is unreliable, particularly for certain demographic groups (blacks, Hispanics, and Asians/Pacific Islanders [A/PIs]) (*9*).

In 2006, CHD was the underlying cause of death for 425,425 persons (all ages) in the United States; the age-adjusted mortality rate was 135.0 deaths per 100,000 standard population (Table 1). The rate for males was 41.6% higher than for females (176.5 versus 103.1 per 100,000 population, respectively). Blacks had higher age-

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	sine" product line in 1996. 1994 studies on chocolates and cholesterol levels were supported by the American Cocoa Research Institute, an arm of the Chocolate Manufacturers Association. After 2005: Research for 2007 study on the use of canola oil to meet dietary standards was supported by the U.S. Canola Association.
	onner, 2005 or earlier: None. After 2005: None.
	on, 2005 or earlier: Co-authored an "expert Panel Report" on olestra for Procter & Gamble in 1999. Health Valley Foods. Miller Brewing Co. ILSO from 1992-94. Communications consultant to corporations from 1974-80. After 2005: In 2008, disclosed that she was on the M&M Mars' Scientific Advisory Board.
6. Benjamin Caballero, M.D., Ph.D.	2005 or earlier: None. After 2005: In 2006, listed as a member of the advisory board of the American Council for Fitness & Nutrition, a non-profit organization with over 100 corporate members.
7. Theresa Nicklas, Dr.P.H., M.P.H., L.D.N.	2005 or earlier: In 2005, listed as a member of the Clinical Advisory Board of the Grain Foods Foundation. Study on sugars and nutrient intakes in 10 year old children sponsored by Sugar Association. 1998 study on the sugar intakes of 10 year olds in Bogalus, LA funded in part by the Sugar Association. Research for 1998 study on the nutrient contribution of breakfast and the role of ready-to-eat cereals partially funded by a grant from the Kellogg Company. 1996 study on whether children who consume more carbohydrates are more likely to run short on niacin and zinc was partially funded by the Sugar Association

Table 1: Potential Conflicts of Interest

MEMBER	RELATIONSHIPS WITH INDUSTRY
1. Doris Howes Calloway, Ph.D. (Chair)	Before, during, and after 1995: None.
2. Richard J. Havel, M.D. (Vice-Chair)	Before, during, and after 1995: None.
3. Dennis M. Bier, M.D.	1995 or earlier: None. After 1995: 2005 study funded in part by Mars, Inc. and International Life Sciences Institute (ILSI) (an industry-sponsored research organization). 2003 study also funded in part by Mars, Inc. In 2005, served on advisory board of Shaping America's Youth, funded by Campbell Soup, and McNeil Nutritionals (a Johnson and Johnson company). Chairman of the Kellogg Grain Nutrition Board. Consulted for vitually every major food company. Member of the McDonald's Corp.'s Global Advisory Council on Healthy Lifestyles
4. William H. Dietz, M.D., Ph.D.	1995 or earlier: None. After 1995: In 2005, serves on Shaping America's Youth, funded by Campbell Soup and McNeil Nutritionals (a Johnson and Johnson company). Consultant to Roche Laboratories and Knoll Pharmaceuticals. In 1997, member of Knoll Pharmaceutical's Weight Risk Investigation Study Council.
5. Cuberto Garza, M.D., Ph.D.	1995 or earlier: In 1987, was a visiting professor with the National Dairy Council In 1995, organized a research symposium funded by Mead John Nutritionals, a division of Bristol-Myers Squibb.

"Es que quitar grupos de alimentos importantes, es un trastorno de alimentación"

	After 1995: In 1996, organized a symposium funded by Nestle. (*PCRM v. Glickman*) In 1998, he was Vice-President and on the board of directors of the Dannon Institute. Co-authored 2002 article funded in part by the Nestle Founda-tion. In 2005, member of ILSI's Board of Trustees.
6. Shiriki K. Kumanyika, Ph.D.	1995 or earlier: None. After 1995: In 2008, served as advisory board member for Weight ers International.
7. Marion Nestle, Ph.D., M.P.H.	Before, during, and after 1995: None.
8. Irwin H. Rosenberg, M.D.	1995 or earlier: None. After 1995: Current Senior Scientist and Director, Nurtion and Neuroc tion Laboratory, Jean Mayer USDA Human Nutrition Research Cent Aging, Tufts University. In 2004, listed as serving on Coca-Cola's Beverage Institute for Health and Wellness.
9. Sachiko T. St. Jeor, R.D., Ph.D.	Before, during, and after 1995: None.
10. Barbara O. Schneeman, Ph.D.	1995 or earlier: In 1989, ILSI public member, Board of Trustees. Authored or co-authored papers funded in part by grants from the National Dairy Board (1989), the California Prune Board (1990 and 1994), the National Dairy Promotion Board (1992), Kraft-General Foods (1993), and Ross Laboratories (1994). After 1995: In 1998, listed as President and member of Board of Directors of Dannon Institute. In 1999, listed as member of ACSH-Advisory Board.

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Milk intake and risk of mortality and fractures in women and men: cohort studies

OPEN ACCESS

Karl Michaëlsson *professor*[1], Alicja Wolk *professor*[2], Sophie Langenskiöld *senior lecturer*[3], Samar Basu *professor*[3], Eva Warensjö Lemming *researcher*[1 4], Håkan Melhus *professor*[5], Liisa Byberg *associate professor*[1]

[1]Department of Surgical Sciences, Uppsala University, SE-751 85 Uppsala, Sweden; [2]Institute of Environmental Medicine, Karolinska Institutet, Stockholm, Sweden; [3]Department of Public Health and Caring Sciences, Uppsala University, Uppsala, Sweden; [4]Swedish National Food Agency, Uppsala, Sweden; [5]Department of Medical Sciences, Uppsala University, Uppsala, Sweden

Abstract

Objective To examine whether high milk consumption is associated with mortality and fractures in women and men.

Design Cohort studies.

Setting Three counties in central Sweden.

Participants Two large Swedish cohorts, one with 61 433 women (39-74 years at baseline 1987-90) and one with 45 339 men (45-79 years at baseline 1997), were administered food frequency questionnaires. The women responded to a second food frequency questionnaire in 1997.

Main outcome measure Multivariable survival models were applied to determine the association between milk consumption and time to mortality or fracture.

Results During a mean follow-up of 20.1 years, 15 541 women died and 17 252 had a fracture, of whom 4259 had a hip fracture. In the male cohort with a mean follow-up of 11.2 years, 10 112 men died and 5066 had a fracture, with 1166 hip fracture cases. In women the adjusted mortality hazard ratio for three or more glasses of milk a day compared with less than one glass a day was 1.93 (95% confidence interval 1.80 to 2.06). For every glass of milk, the adjusted hazard ratio of all cause mortality was 1.15 (1.13 to 1.17) in women and 1.03 (1.01 to 1.04) in fracture incidence in women. Given the observational study designs with the inherent possibility of residual confounding and reverse causation phenomena, a cautious interpretation of the results is recommended.

Introduction

A diet rich in milk products is promoted to reduce the likelihood of osteoporotic fractures. Milk contains 18 of 22 essential nutrients, including calcium, phosphorus, and vitamin D of especial importance for the skeleton. Intestinal uptake of these nutrients is enhanced by the enzymatic capacity to digest lactose into D-glucose and D-galactose by mutation in the lactase gene, a variant common in those with northern European ancestry.[1 2] An intake of dairy foods corresponding to three or four glasses of milk a day has been suggested to save at least 20% of healthcare costs related to osteoporosis.[3]

A high intake of milk might, however, have undesirable effects, because milk is the main dietary source of D-galactose. Experimental evidence in several animal species indicates that chronic exposure to D-galactose is deleterious to health and the addition of D-galactose by injections or in the diet is an established animal model of aging.[4-7] Even a low dose of

"No hay calcio porque quitas los lácteos y eso te provoca fracturas"

A mayor consumo de leche, más mortalidad en hombres y mujeres, y más incidencia de fracturas en mujeres

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American Journal of Epidemiology
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Vol. 165, No. 9
DOI: 10.1093/aje/kwk089

"No hay calcio porque quitas los lácteos y eso te provoca fracturas"

Original Contribution

Consumption of Dairy Products and Risk of Parkinson's Disease

Honglei Chen[1], Eilis O'Reilly[2], Marjorie L. McCullough[3], Carmen Rodriguez[3], Michael A. Schwarzschild[4], Eugenia E. Calle[3], Michael J. Thun[3], and Alberto Ascherio[2,5]

[1] Epidemiology Branch, National Institute of Environmental Health Sciences, Research Triangle Park, NC.
[2] Department of Nutrition, Harvard School of Public Health, Boston, MA.
[3] Epidemiology and Surveillance Research Department, American Cancer Society, Atlanta, GA.
[4] Department of Neurology, Massachusetts General Hospital, Boston, MA.
[5] Department of Epidemiology, Harvard School of Public Health, Boston, MA.

Consumo de lácteos aumenta riesgo de Parkinson: más en hombres.

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Calcio



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"Es que no es saludable llevar una dieta sin carne"

J Acad Nutr Diet. 2016 Dec;116(12):1970-1980. doi: 10.1016/j.jand.2016.09.025.

Position of the Academy of Nutrition and Dietetics: Vegetarian Diets.

Melina V[1], Craig W[2], Levin S[3].

Author information

Abstract

It is the position of the Academy of Nutrition and Dietetics that appropriately planned vegetarian, including vegan, diets are healthful, nutritionally adequate, and may provide health benefits for the prevention and treatment of certain diseases. These diets are appropriate for all stages of the life cycle, including pregnancy, lactation, infancy, childhood, adolescence, older adulthood, and for athletes. Plant-based diets are more environmentally sustainable than diets rich in animal products because they use fewer natural resources and are associated with much less environmental damage. Vegetarians and vegans are at reduced risk of certain health conditions, including ischemic heart disease, type 2 diabetes, hypertension, certain types of cancer, and obesity. Low intake of saturated fat and high intakes of vegetables, fruits, whole grains, legumes, soy products, nuts, and seeds (all rich in fiber and phytochemicals) are characteristics of vegetarian and vegan diets that produce lower total and low-density lipoprotein cholesterol levels and better serum gluco
vitamin B-12, such

…. dietas veganas apropiadamente planeadas son saludables, adecuadas nutricionalmente, y puede proveer beneficios en salud para la prevención y tratamiento de ciertas enfermedades… incluyendo enfermedad isquémica del corazón, diabetes tipo 2, hipertensión, ciertos tipos de cáncer, y obesidad…

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¡Enriquece Tu Plato!

Alzheimer

Diabetes

Hormono-dependientes

"Es que no es saludable una sin carne"

Cardiovasculares

Autoinmunes

Parkinson

Respiratorias

Cerebrovasculares

Cáncer

Depresión y Ansiedad

Cataratas

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Desayuno



Snack



Comida



Snack



Cena



"Es que no es saludable llevar una dieta sin carne"

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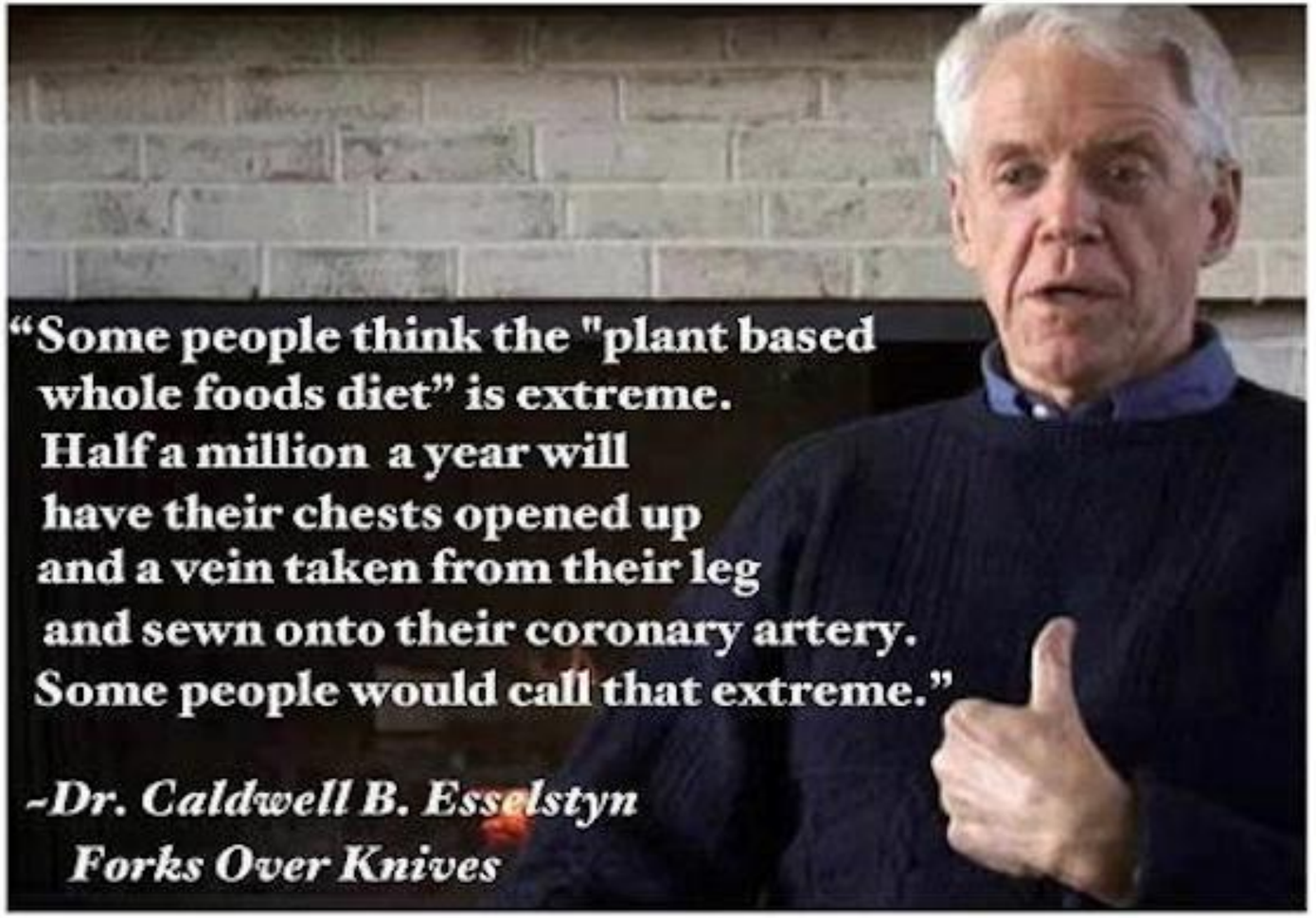
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"Es una dieta muy estricta, muy extrema y tan exagerada"

"Algunas personas piensan que la dieta a base de plantas y alimentos enteros es extrema. Medio millón al año tendrán sus pechos abiertos y les extraerá una vena de su pierna para ser suturada en su arteria coronaria. Algunas personas llamarían a eso extremo."

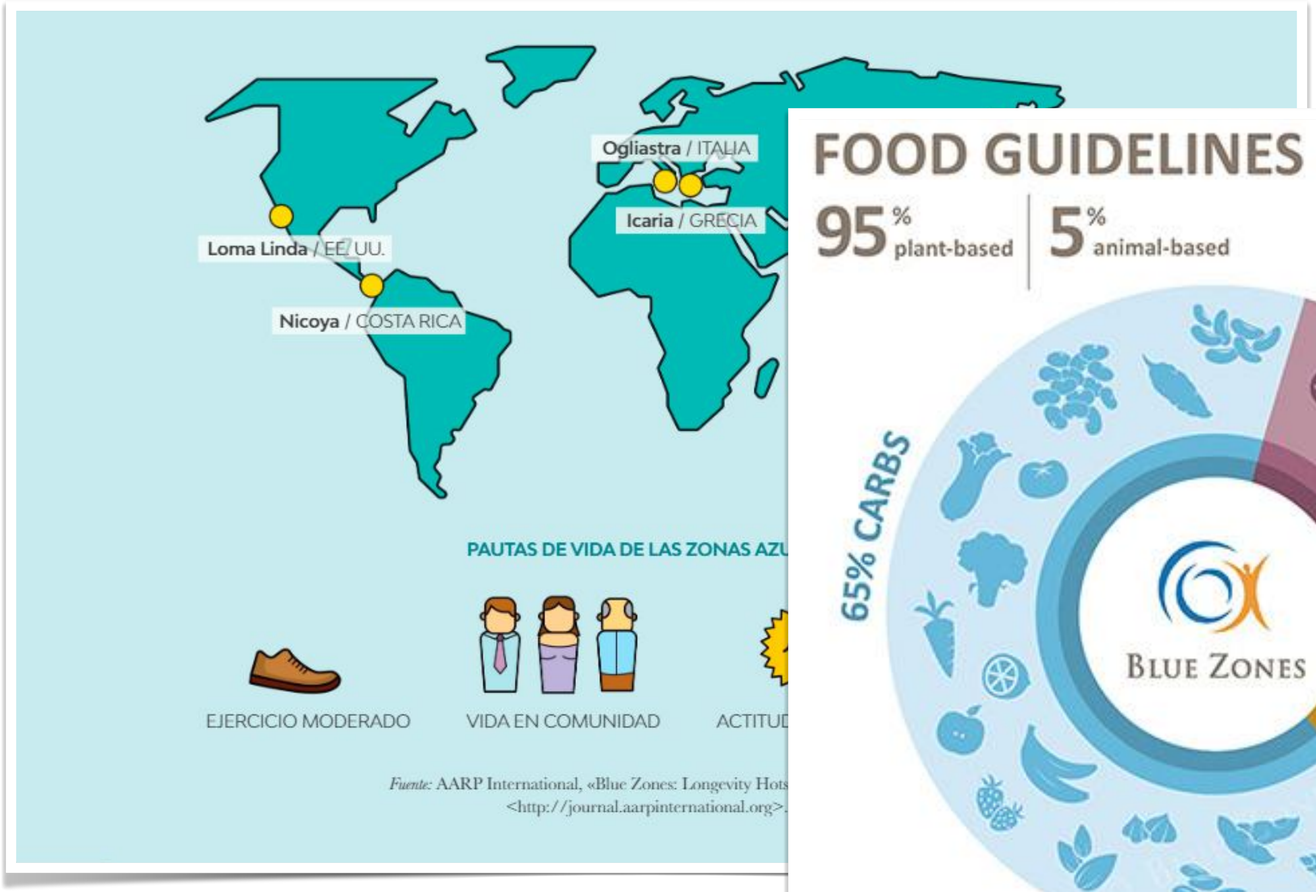


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"Es que son muchos carbohidratos y engordas"



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“Mi amigo hizo esa dieta y le dio anemia”



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Desayuno	Snack	Comida	Snack	Cena
				

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"Tanta fruta engorda y provoca diabetes"





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"Tanta fruta engorda y provoca diabetes"

Meta-Analysis > Endocrine. 2015 Mar;48(2):454-60. doi: 10.1007/s12020-014-0351-6.
Epub 2014 Jul 30.

Fruit intake decreases risk of incident type 2 diabetes: an updated meta-analysis

Shuangshuang Li [1], Song Miao, Yubei Huang, Zhaolu Liu, Huan Tian, Xi
Lyn M Steffen, Bo Xi

Affiliations + expand

PMID: 25074631 DOI: 10.1007/s12020-014-0351-6

La fruta disminuye la incidencia de la DM2



Abstract

Association between fruit intake and risk of type 2 diabetes is inconsistent. In this study, we performed a meta-analysis of all prospective cohort studies to clarify the association between fruit intake and risk of type 2 diabetes. Relevant studies were identified by searches of the PubMed and EMBASE databases up to November 2013. The summary relative risks of association were obtained using a fixed- or random-effects model. A total of nine prospective studies (403,259 participants, including 27,940 with incident type 2 diabetes) from seven publications were included in the meta-analysis of fruit intake and risk of type 2 diabetes. We found that individuals in the highest category of fruit intake had a reduced risk of type 2 diabetes (relative risk 0.92, 95 % confidence interval

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J Acad Nutr Diet. 2016 Dec;116(12):1970-1980. doi: 10.1016/j.jand.2016.09.025.

Position of the Academy of Nutrition and Dietetics: Vegetarian Diets.

Melina V[1], Craig W[2], Levin S[3].

Author information

Abstract

It is the position of the Academy of Nutrition and Dietetics that appropriately planned vegetarian, including vegan, diets are healthful, nutritionally adequate, and may provide health benefits for the prevention and treatment of certain dise… hood, adol… ts rich in ar… dam… se, type 2 dia… vege… e characteristics of vegetarian and vegan diets that produce lower total and low-density lipoprotein cholesterol levels and better serum glucose control. Thes… vitamin B-12, such as fortified fooc…

…. dietas veganas apropiadamente planeadas son saludables, adecuadas nutricionalmente, y puede proveer beneficios en salud para la prevención y tratamiento de ciertas enfermedades… incluyendo enfermedad isquémica del corazón, diabetes tipo 2, hipertensión, ciertos tipos de cáncer, y obesidad…

"Si quieres juega contigo, pero no con los niñ@s. Esta no es una dieta ni para el embarazo ni para los niñ@s"

…. dietas veganas apropiada para todos los ciclos de la vida, incluyendo EMBARAZO, LACTANCIA, INFANCIA, NIÑEZ, ADOLESCENCIA, ADULTOS Y ATLETAS…

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Pediatr Allergy Immunol 2010: 21: 38–46
DOI: 10.1111/j.1399-3038.2009.00897.x

PEDIATRIC ALLERGY AND IMMUNOLOGY

Maternal meat and fat consumption during pregnancy and suspected atopic eczema in Japanese infants aged 3–4 months: The Osaka Maternal and Child Health Study

Saito K, Yokoyama T, Miyake Y, Sasaki S, Tanaka K, Ohya Y, Hirota Y. Maternal meat and fat consumption during pregnancy and suspected atopic eczema in Japanese infants aged 3–4 months: The Osaka Maternal and Child Health Study.
Pediatr Allergy Immunol 2010: 21: 38–46.

Kyoko Saito[1], Tetsuji Yokoyama[2], Yoshihiro Miyake[3], Satoshi Sasaki[4], Keiko Tanaka[3], Yukihiro Ohya[5] and Yoshio Hirota[6]

[1]Research Team for Promoting Independence of the

"Si quieres juega contigo, pero no con los niñ@s. Esta no es una dieta ni para el embarazo ni para los niñ@s"

- "Alto" consumo de carne durante el embarazo: asociado a eczema en el bebé.
- Algunos componentes de la carne pudieran afectar la respuesta inmune fetal.

- El consumo de pescado no combatió los efectos a pesar de su contenido de omega 3 (antiinflamatorios).

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Am J Clin Nutr 2014;100:1139–48

Maternal protein intake during pregnancy and offspring overweight 20 y later[1–3]

Ekaterina Maslova, Dorte Rytter, Bodil H Bech, Tine B Henriksen, Morten A Rasmussen, Sjurdur F Olsen, and Thorhallur I Halldorsson

"Si quieres juega contigo, pero no con los niñ@s. Esta no es una dieta ni para el embarazo ni para los niñ@s"

- Seguimiento a los hijos de 684 mujeres embarazadas por 20 años.

- El consumo de proteínas de origen animal en hijas: 3x más y en hijos 2x más riesgo de sobrepeso.

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Am J Epidemiol 2011;173:649–658

Risk of Gestational Diabetes Mellitus in Relation to Maternal Egg and Cholesterol Intake

Chunfang Qiu*, Ihunnaya O. Frederick, Cuilin Zhang, Tanya K. Sorensen, Daniel A. Enquobahrie, and Michelle A. Williams

* Correspondence to Dr. Chunfang Qiu, Center for Perinatal Studies, Swedish Medical Center, 1124 Columbia Street, Suite 750, Seattle, WA 98104 (e-mail: Chun-fang.Qiu@Swedish.org).

"Si quieres juega contigo, pero no con los niñ@s. Esta no es una dieta ni para el embarazo ni para los niñ@s"

- Alto consumo de huevos y colesterol durante la etapa preconcepcional y la más temprana del embarazo están asociados a un alto riesgo de diabetes gestacional en mujeres sin diabetes preexistente.

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"Es que necesitas consumir proteína"

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provoca
acturas"

Es que no es saludable llevar una dieta sin carne"







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EL CONOCIMIENTO ES PODER, Y ESTE PODER ESTÁ EN TUS MANOS.

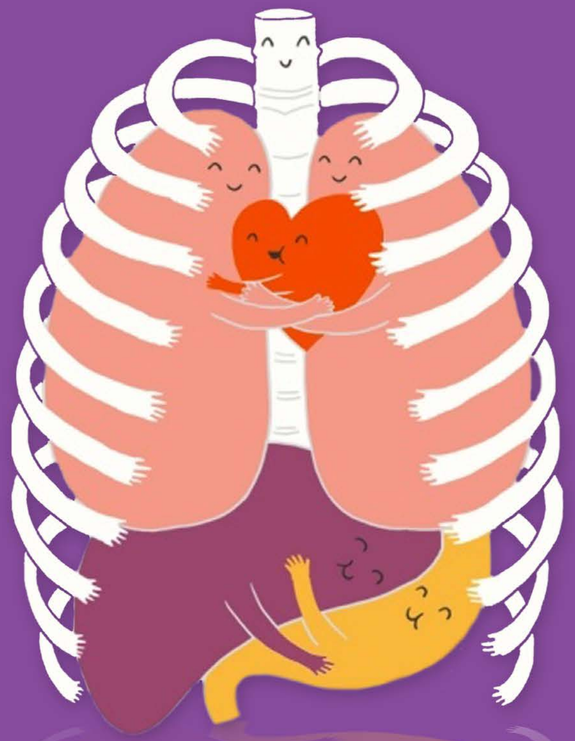
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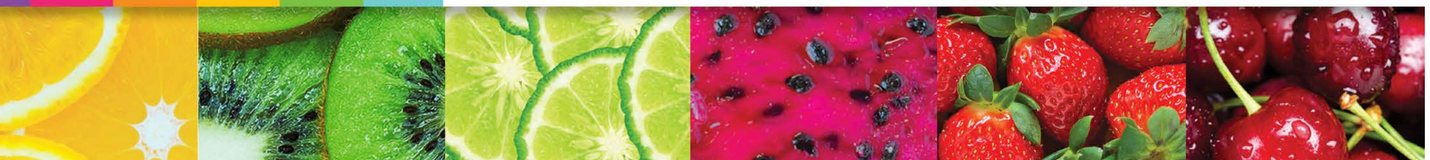
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