Tu alimentación: ¿Debe ser libre de lácteos?

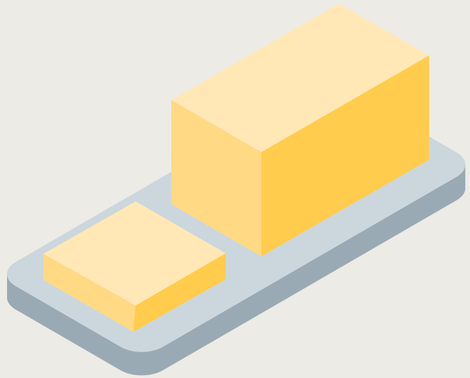


DRA. MARCELA SANDOVAL GARZA

INTERNATIONAL BOARD OF LIFESTYLE MEDICINE CERTIFIED PHYSICIAN

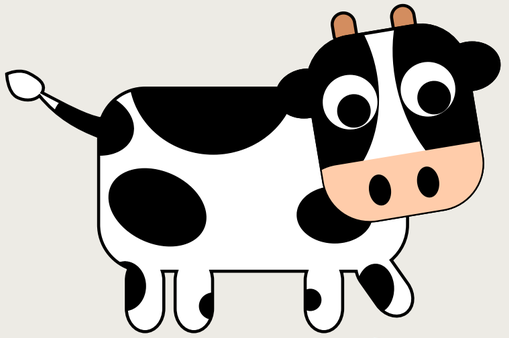


¿Cuáles son?

















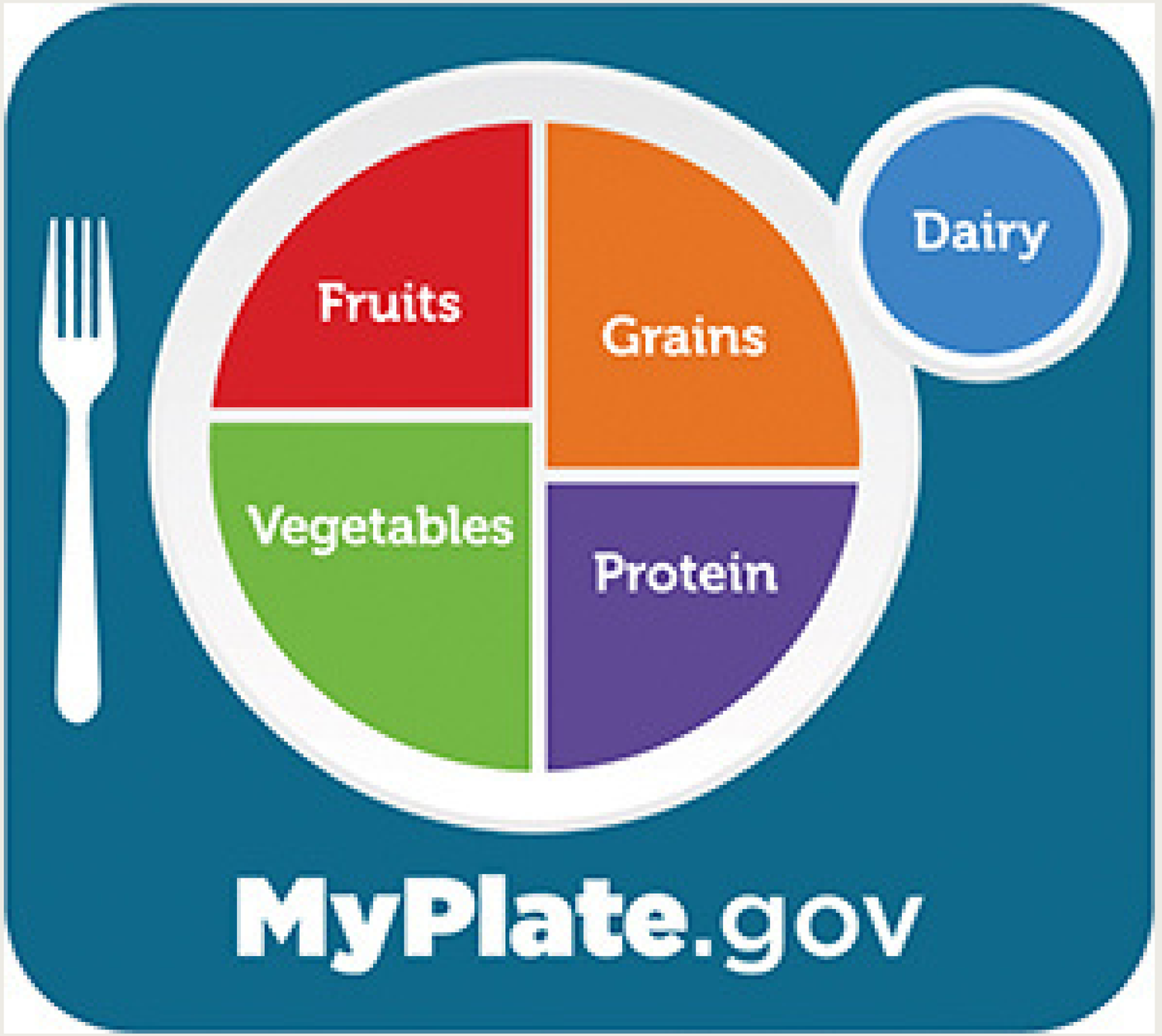


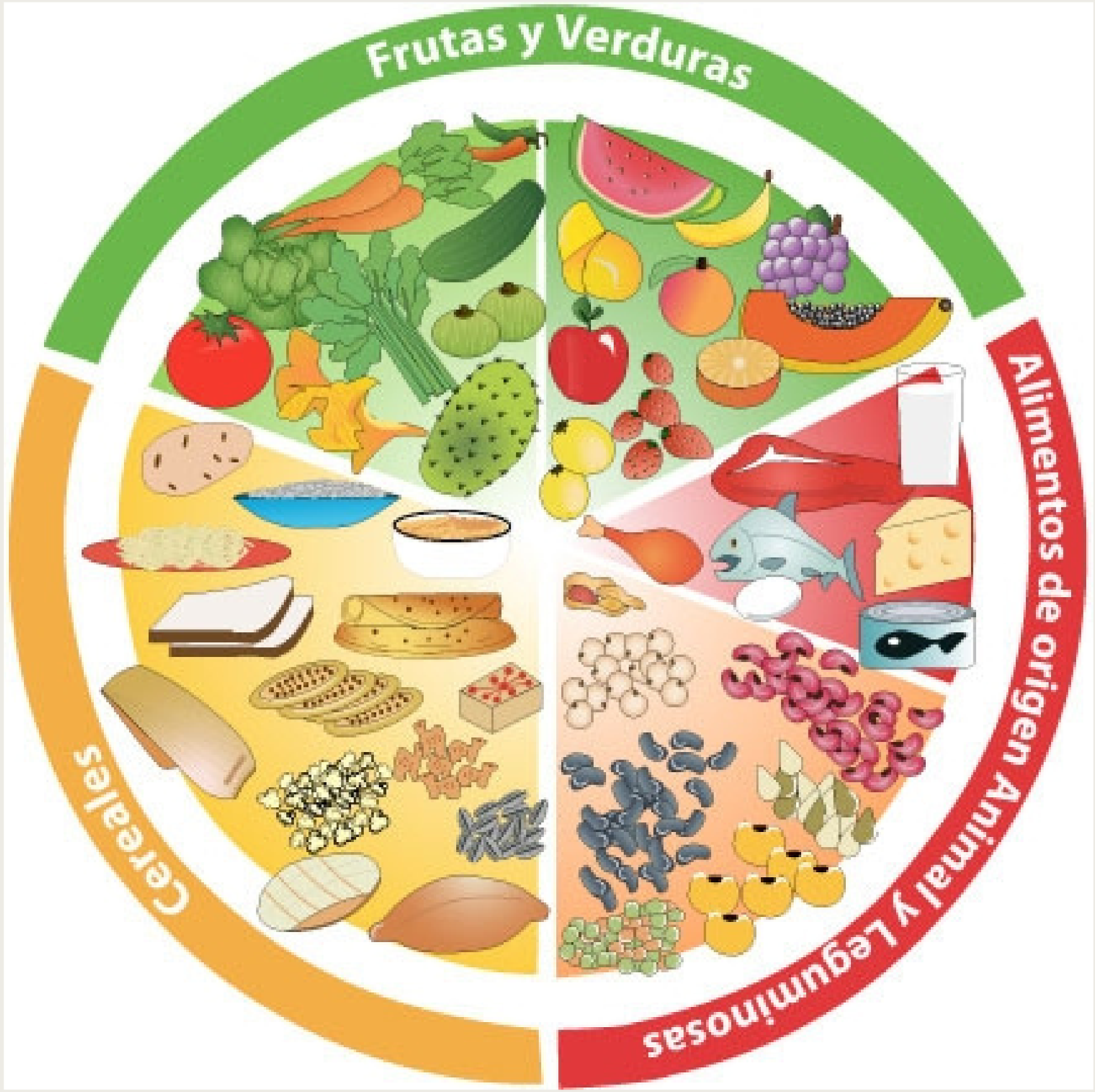
Un poco de historia



y de sentido común…


PCTA


Fruits
Grains
Dairy
Vegetables
Protein
MyPlate.gov


Frutas y Verduras
Alimentos de origen Animal y Leguminosas
Cereales

And Now a Word From Our Sponsors



Are America's Nutrition Professionals in the Pocket of Big Food?

Michele Simon

JANUARY 2013 | EATDRINK POLITICS

TABLE 2: Most Loyal Corporate Sponsors

Academy Sponsors 2001-2012

National Cattlemen's Beef Association	ConAgra Foods	General Mills	Kellogg's	National Dairy Council
12 years	10 years	10 years	9 years	9 years

Academy Partners 2008-2012

ARAMARK | The Coca-Cola Company | National Dairy Council

Partners or Premier Sponsors 2008-2012

Abbott Nutrition | General Mills | Kellogg's | MARS food | PEPSICO



SLIDE FROM CONTINUING EDUCATION WEBINAR ON "BUILDING BETTER BONE HEALTH" SPONSORED BY GENERAL MILLS, MAKER OF KIX, YOPLAIT.[21]

Calcio



Table 4: 2012 Annual Meeting Speakers Employed by Either the Food or Pharma Industries

NAME	TITLE
Elizabeth Arndt, PhD	ConAgra Foods Director R&D
Sara Baer-Sinnott, MRP	President, Oldways
Susan Borra, RD	SVP, Food Marketing Institute *(grocery store trade group)*
Susan Crockett, PhD, RD, FADA	VP Health and Nutrition, General Mills
Amy DeMage, MS, RD	Dietetic Internship Director, ARAMARK
Cheryl Dolven, MS, RD	Director, Health and Wellness, Darden Group *(owns restaurant chains such as Olive Garden)*
Sylvia Emberger, RD, LDN	Corporate Nutritionist, Ahold USA
Sylvia Geiger, MS, RD	Consultant Dietitian, Price Chopper *(supermarket chain)*
Marianne Gillete, MS, MBA	VP Applied Research, McCormick and Company
Cynthia Goody, PhD, MBA, RD, LD	Senior Director - Nutrition, McDonald's Corporation
Mary Hise, PhD, RD, CNSD	Director, Baxter Healthcare
Glenna Hughes, MS	Research Scientist, Solae (owned by DuPont)
Beth Johnson, MS RD	Consultant to leading food companies and lobbying groups
Bonnie Johnson, MS, RD	PepsiCo Global Nutrition Senior Principal Scientist
Kim Kirchherr, MS, RD, LDN, CDE	SUPERVALU/Jewel-Osco Corporate Dietitian; Advisory board for Facts Up Front
Jess Kolko, RD, LD	Healthy Eating RD, Whole Foods Market
Idamarie Laquatra, PhD, RD	Director, Global Nutrition, H.J. Heinz Company
Elizabeth Pivonka, PhD, RD	Produce for Better Health Foundation
Erin Quann, PhD, RD	Director Regulatory Affairs, Dairy Management Inc.
Janice Raymond, MD, RD, CD	Clinical Nutrition Manager, Sodexo
David Schmidt	President and CEO, International Food Information Council *(industry-funded)*
Marianne Smith Edge, MS, RD, LD, FADA	SVP, International Food Information Council *(industry-funded)*
Lori Stockert, MS, RDH	Clinician, Pfizer, Inc.
Lisa Sutherland, PhD	Consultant to Walmart, others
Sara Swiderski, MBA, RD, LDN	Director of Patient Services, ARAMARK
Lindsey Toth, MS, RD	Nutrition Communications, PepsiCo

Additional speakers consulted with the following companies: Sara Lee, Monsanto, McDonald's, Ocean Spray, Nestlé, Coca-Cola, Hershey's, and Burger King, among others.

Toddlers need a variety of fruits, vegetables, grains, protein, and dairy (or fortified soy alternatives) every day. This is a great time to experiment with different flavors, colors, and textures!

What to feed your toddler in a day:

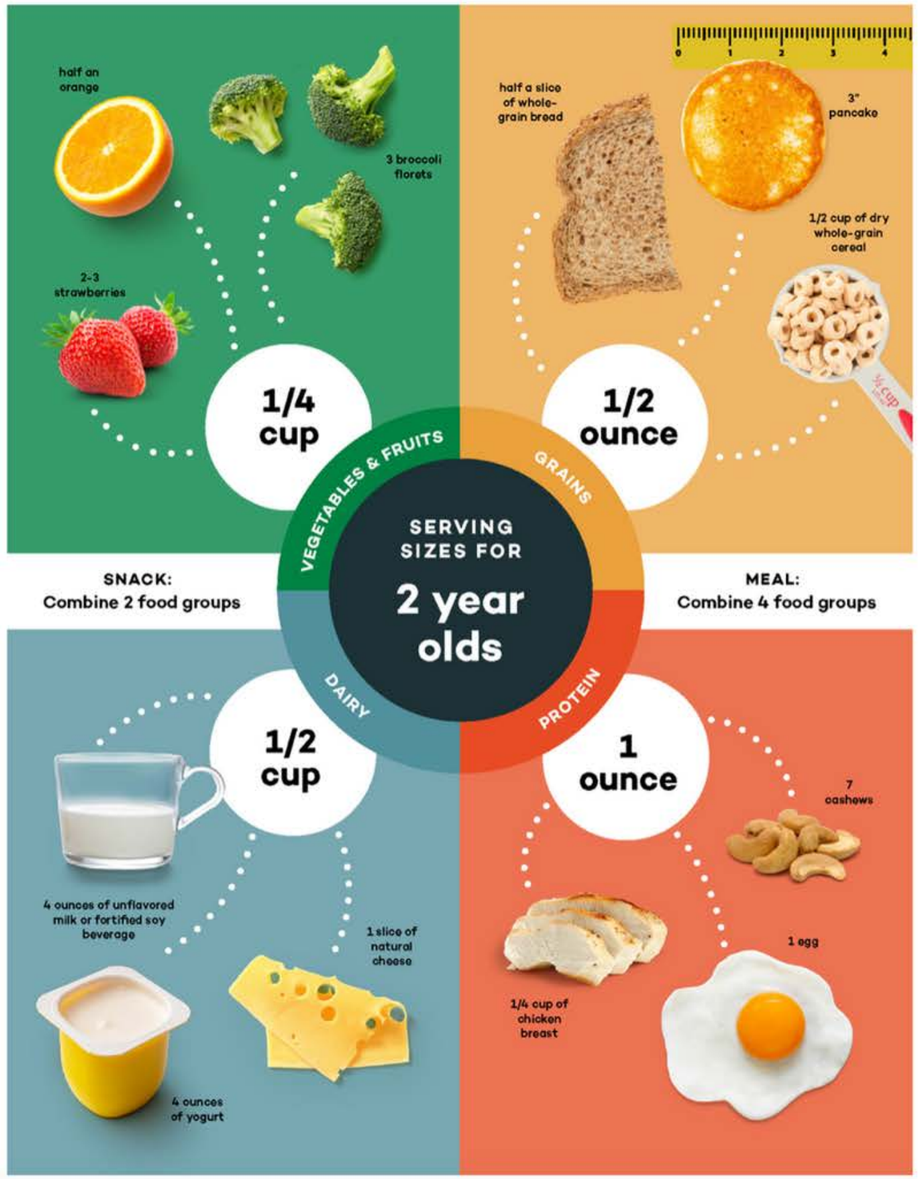
- **Vegetables:** 4 to 8 servings (one serving is ¼ cup)
- **Fruits:** 4 to 6 servings (one serving is ¼ cup)
- **Grains:** 3 to 6 servings (one serving is ½ oz equivalent)
  - Half of these should be whole grains, like whole wheat bread or brown rice
- **Dairy:** 4 to 5 servings (one serving is ½ cup)
- **Protein:** 2 to 5 servings (one serving is 1 oz equivalent)

What to limit:

- Foods and drinks with added sugars, like cookies and fruit drinks
- Foods high in saturated fat and sodium, like French fries and boxed mac and cheese

Offer multiple food groups:

- Snacks should include items from 2 of the food groups (e.g., fruit and dairy).
- Meals should include items from 3 or more food groups (e.g., protein, grains, vegetables).



American Academy of Pediatrics. Toddlers (2 años)



Cheese, mozzarella, low moisture, part-skim

Data Type: Foundation **Food Category:** Dairy and Egg Products **FDC ID:** 329370 **NDB Number:** 1029
FDC Published: 4/1/2019

Components | Individual Samples | Measures | Other Information

Portion: 1 cup (86.2 g)

Name	Average Amount	Unit	Deriv. By	n	Samples	Min	Ma
Proximates:							
Water	41.1	g	Analytical	38	Samples	36.3	43
Energy (Atwater General Factors)	255	kcal	Calculated				
Energy (Atwater Specific Factors)	257	kcal	Calculated				
Nitrogen	3.2	g	Analytical	38	Samples	2.83	3.
Protein	20.4	g	Calculated			18	22
Total lipid (fat)	17.6	g	Analytical	38	Samples	15.3	18

Por cada taza son 17.6 gramos de grasa (saturada) x 4-5 porciones (cada porción es 1/2 taza) = 39.6 GRAMOS DE GRASA

USDA



ARS HOME › FOODDATA CENTRAL › FOOD SEARCH › PORK, CURED, BACON, COOKED, RESTAURANT (FOUNDATION, 749420)

Pork, cured, bacon, cooked, restaurant

Data Type: Foundation **Food Category:** Pork Products **FDC ID:** 749420 **NDB Number:** 10896
FDC Published: 12/16/2019

Components | Individual Samples | Measures | Other Information

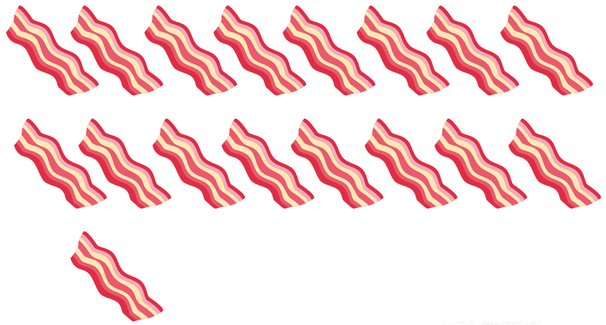
Portion: 1 slice (6.3 g)

Name	Average Amount	Unit	Deriv. By	n	Samples	Min	Max
Proximates:							
Water	0.895	g	Analytical	69	Samples	0.197	1.71
Energy (Atwater General Factors)	31.6	kcal	Calculated				
Energy (Atwater Specific Factors)	32.3	kcal	Calculated				
Nitrogen	0.412	g	Analytical	69	Samples	0.321	0.554
Protein	2.58	g	Calculated			2	3.46
Total lipid (fat)	2.3	g	Analytical	69	Samples	1.62	3.02

Por cada taza son 17.6 gramos de grasa (saturada) x 4-5 porciones (cada porción es 1/2 taza) = 39.6 GRAMOS DE GRASA

=

La misma cantidad de grasa en 17 rebanadas de tocino de puerco.



USDA

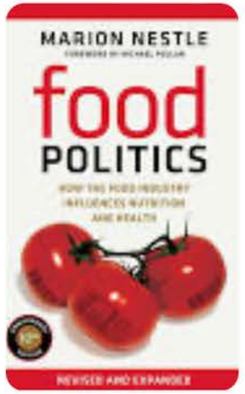


Libros



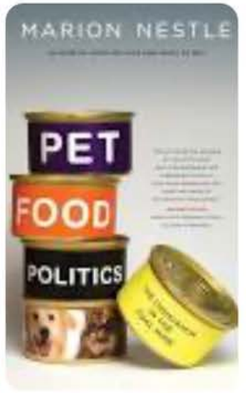
What to Eat

2006



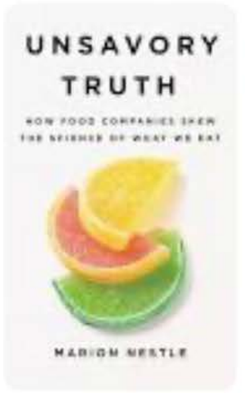
Food Politics: How the Food…

2002



Pet food politics

2008



Unsavory Truth: How Food…

2018



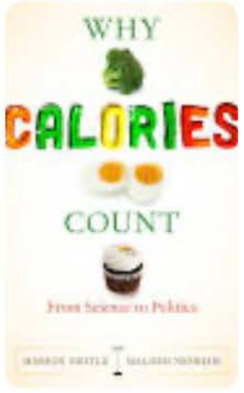
Soda Politics: Taking on Big…

2015



Slow Cooked: An Unexpecte…

2022



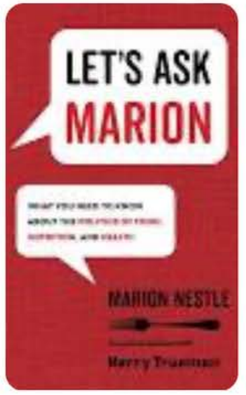
Why Calories Count: From…

2012



Uma verdade indigesta: co…

2019



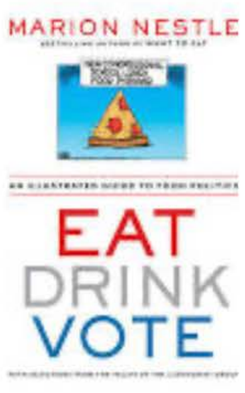
Let's Ask Marion: What…

2020



Feed Your Pet Right: The…

2010



Eat Drink Vote: An Illustrated…

2013



Safe Food

2010

Evidencia científica



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

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

Michaëlsson K, Wolk A, Langenskiöld S, Basu S, Warensjö Lemming E, Melhus H, Byberg L. Milk intake and risk of mortality and fractures in women and men: cohort studies. BMJ. 2014

Consumo de lácteos aumenta en 40% el riesgo de Parkinson's: más en hombres

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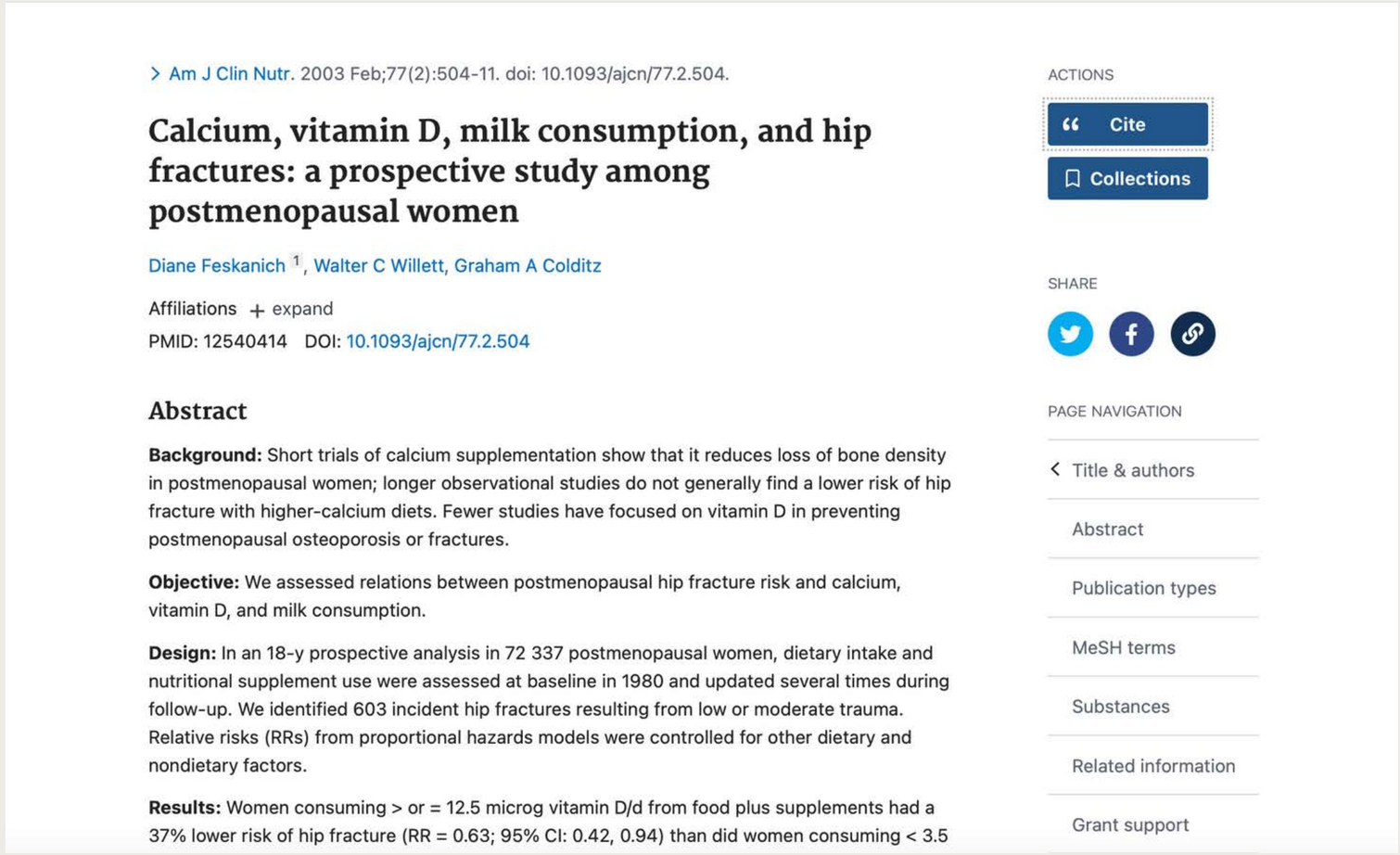
Original Contribution

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.

Chen H, O'Reilly E, McCullough ML, Rodriguez C, Schwarzschild MA, Calle EE, Thun MJ, Ascherio A. Consumption of dairy products and risk of Parkinson's disease. Am J Epidemiol. 2007



> Am J Clin Nutr. 2003 Feb;77(2):504-11. doi: 10.1093/ajcn/77.2.504.

Calcium, vitamin D, milk consumption, and hip fractures: a prospective study among postmenopausal women

Diane Feskanich [1], Walter C Willett, Graham A Colditz

Affiliations + expand

PMID: 12540414 DOI: 10.1093/ajcn/77.2.504

Abstract

Background: Short trials of calcium supplementation show that it reduces loss of bone density in postmenopausal women; longer observational studies do not generally find a lower risk of hip fracture with higher-calcium diets. Fewer studies have focused on vitamin D in preventing postmenopausal osteoporosis or fractures.

Objective: We assessed relations between postmenopausal hip fracture risk and calcium, vitamin D, and milk consumption.

Design: In an 18-y prospective analysis in 72 337 postmenopausal women, dietary intake and nutritional supplement use were assessed at baseline in 1980 and updated several times during follow-up. We identified 603 incident hip fractures resulting from low or moderate trauma. Relative risks (RRs) from proportional hazards models were controlled for other dietary and nondietary factors.

Results: Women consuming > or = 12.5 microg vitamin D/d from food plus supplements had a 37% lower risk of hip fracture (RR = 0.63; 95% CI: 0.42, 0.94) than did women consuming < 3.5

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El consumo de leche no se asocia a menor riesgo de fractura de cadera.

Feskanich D, Willett WC, Colditz GA. Calcium, vitamin D, milk consumption, and hip fractures: a prospective study among postmenopausal women. Am J Clin Nutr. 2003.

Dietas altas en grasas saturadas incrementan riesgo de enfermedad cardiovasc y cerebrovasc.



Comparative Study > J Am Coll Cardiol. 2015 Oct 6;66(14):1538-1548.
doi: 10.1016/j.jacc.2015.07.055.

Saturated Fats Compared With Unsaturated Fats and Sources of Carbohydrates in Relation to Risk of Coronary Heart Disease: A Prospective Cohort Study

Yanping Li # [1], Adela Hruby # [1], Adam M Bernstein [2], Sylvia H Ley [1], Dong D Wang [1], Stephanie E Chiuve [1 3], Laura Sampson [1], Kathryn M Rexrode [3], Eric B Rimm [1 4 5], Walter C Willett [1 4 5], Frank B Hu [1 4 5]

Affiliations + expand

PMID: 26429077 PMCID: PMC4593072 DOI: 10.1016/j.jacc.2015.07.055

Free PMC article

Abstract

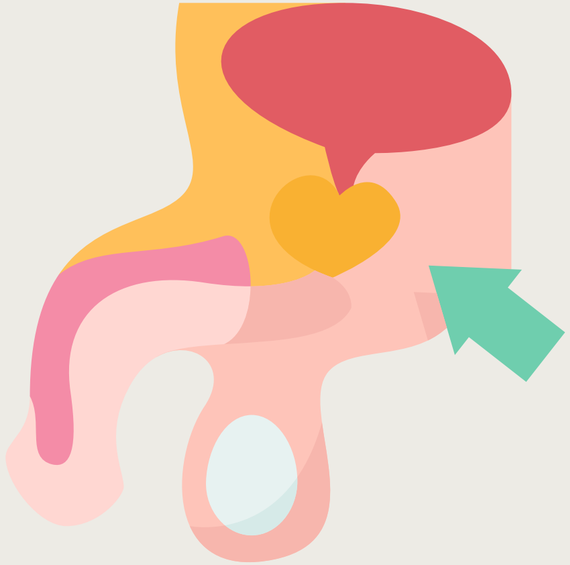
Background: The associations between dietary saturated fats and the risk of coronary heart disease (CHD) remain controversial, but few studies have compared saturated with unsaturated fats and sources of carbohydrates in relation to CHD risk.

Objectives: This study sought to investigate associations of saturated fats compared with unsaturated fats and different sources of carbohydrates in relation to CHD risk.

Methods: We followed 84,628 women (Nurses' Health Study, 1980 to 2010), and 42,908 men (Health Professionals Follow-up Study, 1986 to 2010) who were free of diabetes, cardiovascular disease, and cancer at baseline. Diet was assessed by a semiquantitative food frequency questionnaire every 4 years.

Results: During 24 to 30 years of follow-up, we documented 7,667 incident cases of CHD. Higher intakes of polyunsaturated fatty acids (PUFAs) and carbohydrates from whole grains were significantly associated with a lower risk of CHD comparing the highest with lowest quintile for PUFAs (hazard ratio [HR]: 0.80, 95% confidence interval [CI]: 0.73 to 0.88; p trend <0.0001) and

Li Y, Hruby A, Bernstein AM, Ley SH, Wang DD, Chiuve SE, Sampson L, Rexrode KM, Rimm EB, Willett WC, Hu FB. Saturated Fats Compared With Unsaturated Fats and Sources of Carbohydrates in Relation to Risk of Coronary Heart Disease: A Prospective Cohort Study. J Am Coll Cardiol. 2015





- Relación a cáncer de próstata ligado a incremento en IGF-1

- IGF-1 insulina-like growth factor
- Consumir leche y lácteos de manera regular incrementa IGF-1

- Hombres con los niveles más elevados de IGF-1: 4 veces más riesgo de CA de próstata

Cohen P. Serum insulin-like growth factor-I levels and prostate cancer risk—interpreting the evidence.J Natl Cancer Inst.1998

Shi R, Berkel HJ, Yu H. Insulin-like growth factor-I and prostate cancer: ameta-analysis.Br J Cancer.1998

Chan JM, Stampfer MJ, Giovannucci E, et al. Plasma insulin-like growth factor-1 and prostate cancer risk: a prospective study.Science.1998

- Physicians Health Study: 21,660 por 28 años

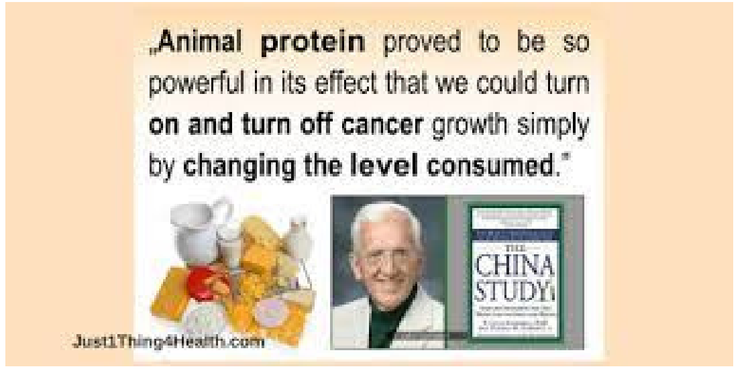
- Incremento en riesgo si consumían 2.5 raciones de lácteos por día versus los que consumían 0.5

- Incremento incluso con leche baja en grasa.

- Mucho calcio de los lácteos, no solo la grasa saturada.



Song Y, Chavarro JE, Cao Y, et al. Whole milk intake is associated with prostate cancer-specific mortality among U.S. male physicians.J Nutr. 2013.



Dietary Protein and AFB_1- Initiated Liver Cancer (Rats)

More Protein? More Cancer?

Dietary Protein (%)	Animals with tumors and hyperplastic nodules
20% (regular)	30/30 (100%)
5% (low)	0/12 (0%)

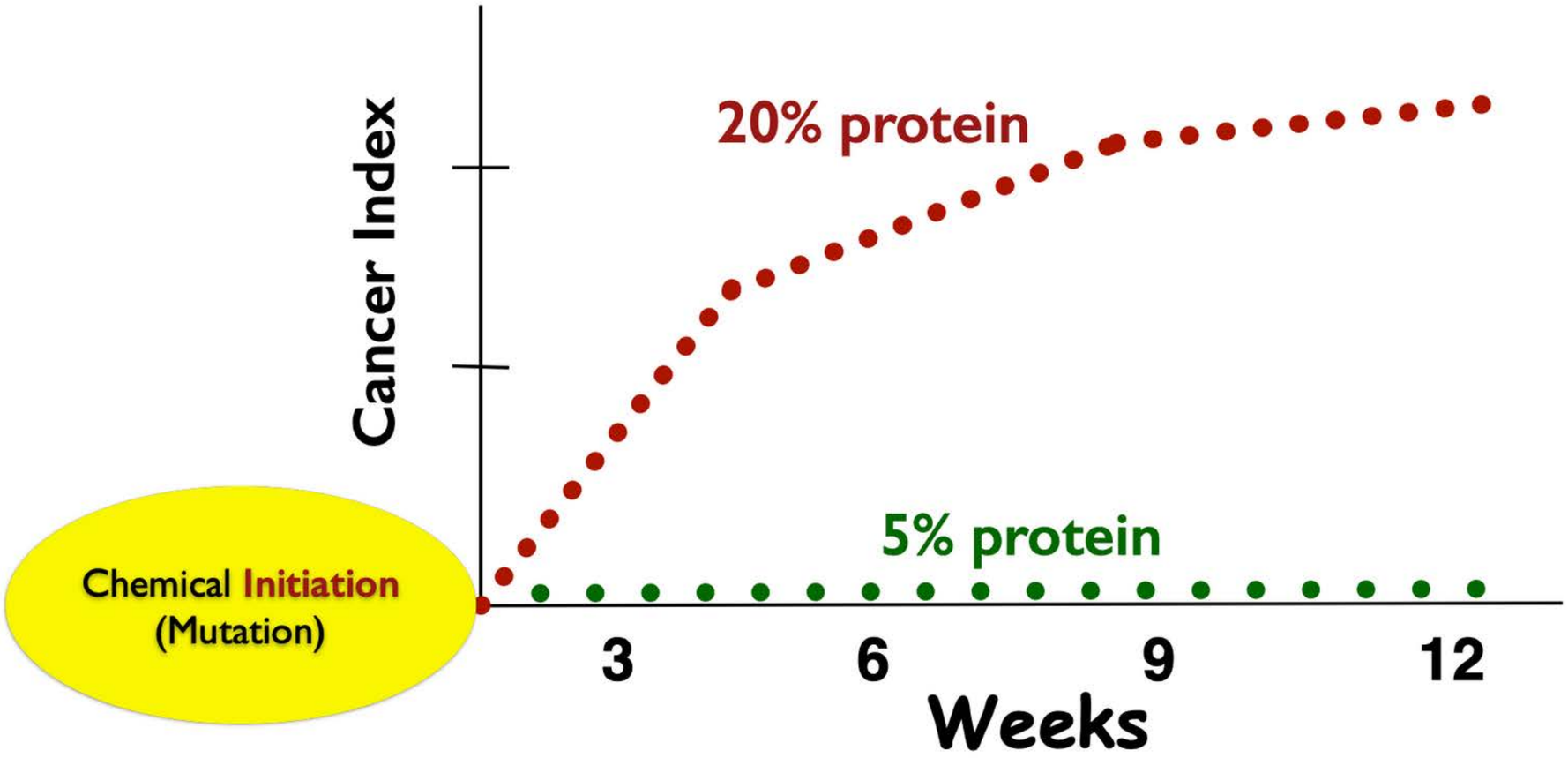
Madhavan and Gopalan, 1968.
Confirmed by Wells et al, 1974.

47 years ago

nutritionstudies.org

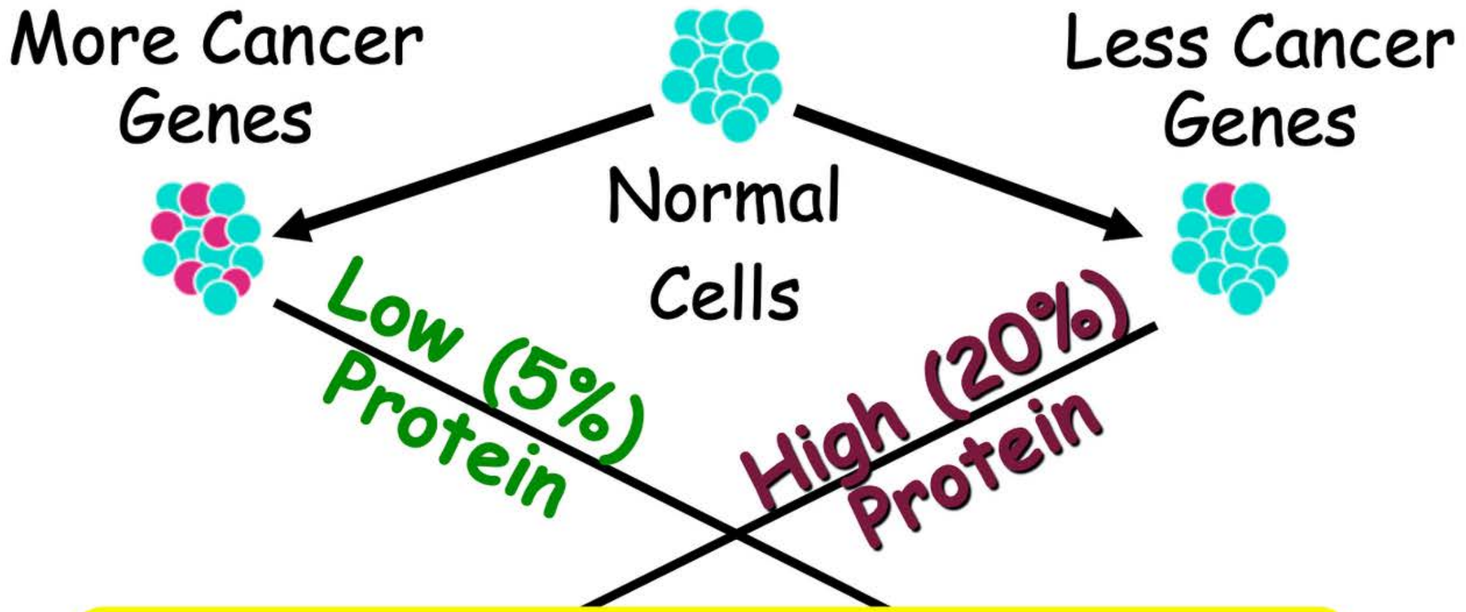
Dietary Protein and EARLY Cancer

(Appleton and Campbell, Cancer Res., 1983; Youngman and Campbell, J. Nutr., 1991, Youngman and Campbell, Nutr. Cancer, 1992)



nutritionstudies.org

Genetics Or Nutrition?
(Early 1980s)



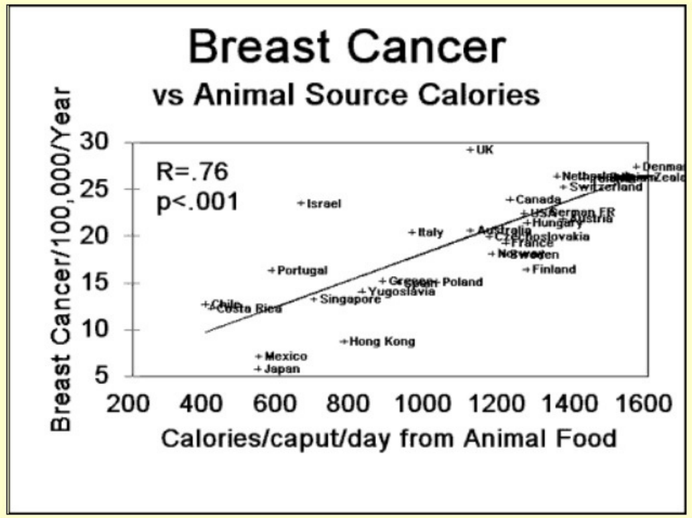
Nutrition controls genes, i.e., high protein 'causes' cancer

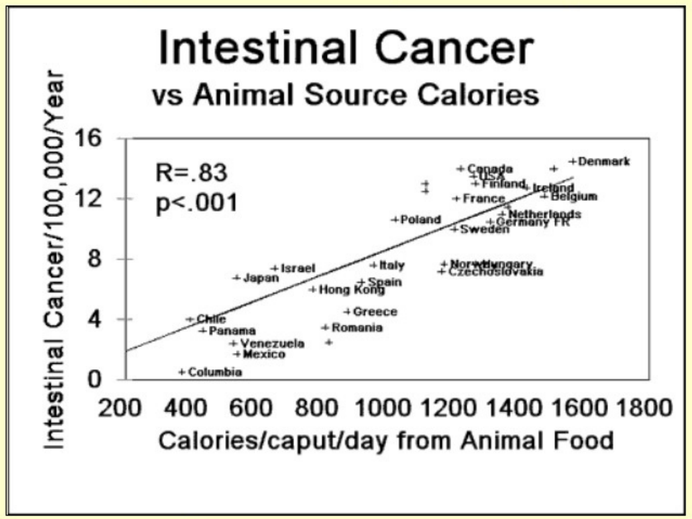
umors

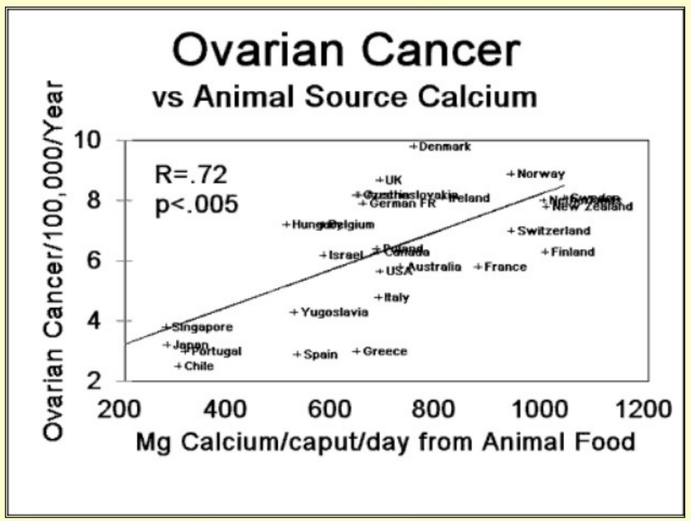
Nutrition Principles

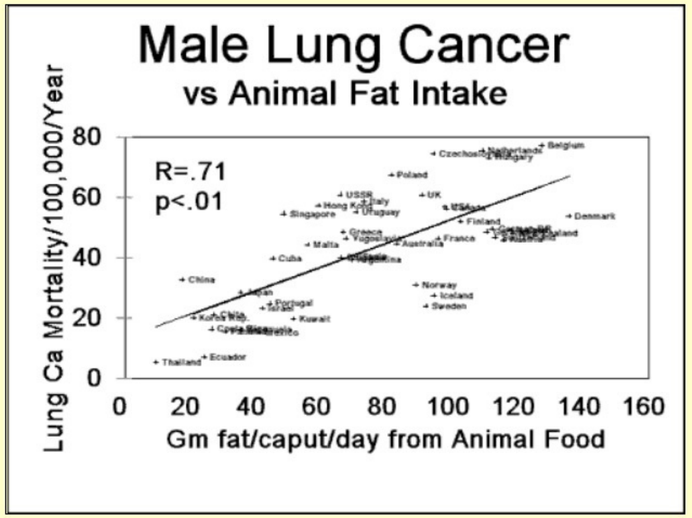
- Cancer is reversible by nutrition
- Each nutrient acts by countless mechanisms
- Nutrition controls gene expression
- Animal and plant based proteins act differently

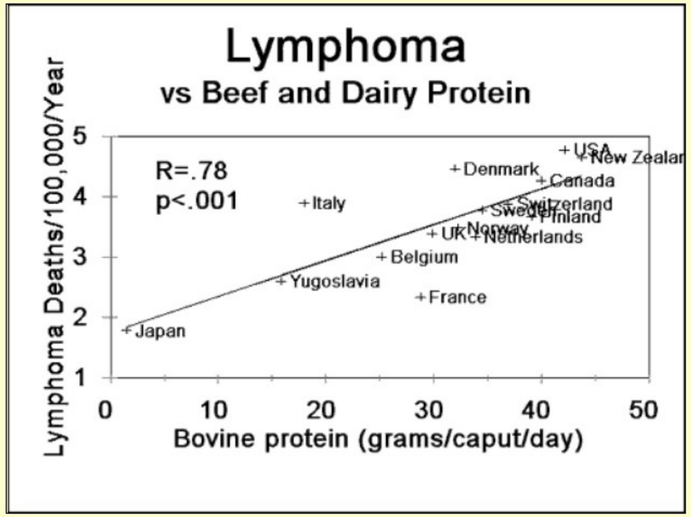


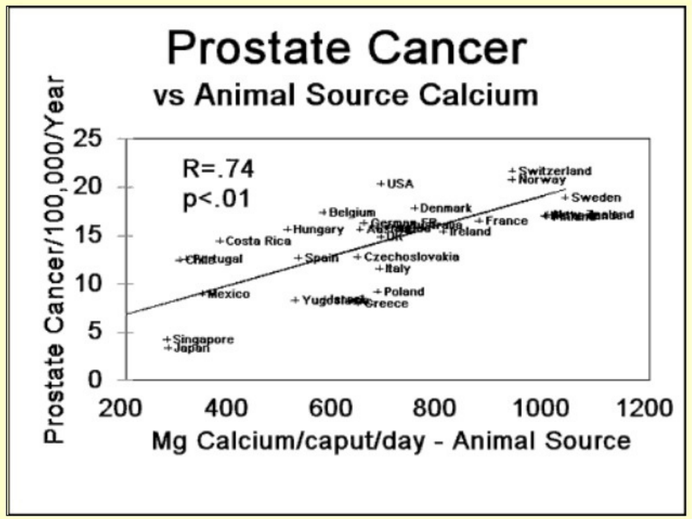












HARRIS, WILLIAM, 1999
KAISER PERMANENTE
57 REFERENCIAS

Reemplazar lácteos



"Es que siento que ya no voy a comer nada"











¿Quieres aprender más sobre este estilo de vida? Consulta nuestra guía de alimentación basada en plantas sin procesar.

Centro de Estudios en Nutrición
T. COLIN CAMPBELL

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3 resultados



Chocolate caliente...
Por LeAnne Campbell, PhD
La combinación clásica de especias en este chocolate caliente resalta una...
★★★★★ (1)



Leche de avena casera
Por Switch4Good
¿Tienes alergia a las nueces? ¡No te preocupes! La leche de avena está oficialmente "de...
★★★★★ (1)



Leche de marañón de tres...
Por Center for Nutrition Studies
¡Nada mejor que una taza caliente de leche vegetal en la mañana! Utilizo mi receta de...
☆☆☆☆☆ (0)

VEGAN



Mayonesa de tofu

Por Evelisse Capó, PharmD, DipACLM

Esta receta de mayonesa casera a base de plantas es fácil de hacer y mucho más...

★★★★★ (2)



Queso de garbanzos

Por Evelisse Capó, PharmD, DipACLM

Sirve este delicioso queso de garbanzos en una tabla para tu próxima fiesta o reunión.

★★★★★ (1)

VEGAN



Chili con “queso” y salsa

Por Chef Allen Campbell

Este untable rico y cremoso de “queso” no lácteo es tan espectacularmente delicioso,...

☆☆☆☆☆ (0)



Queso de marañón

Por Mayim Bialik, PhD

Aquí está el queso a base de marañón que se puede usar como una salsa o en la pizza.

★★★★★ (1)



Salsa de queso cheddar...

Por Helyn Dunn

¡Esta salsa sabe tanto a queso cheddar añejo que quedarás realmente asombrado!

★★★★★ (1)



Aderezo ranchero

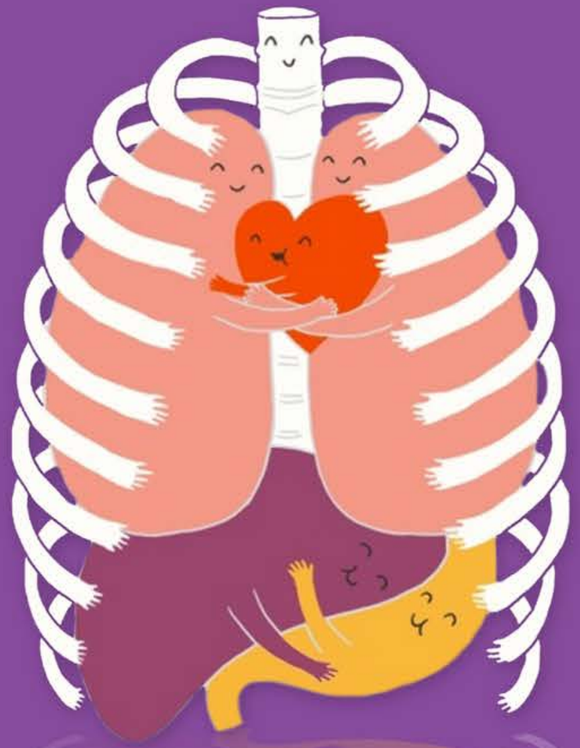
Por Recetas CNS

Espera, ¿el aderezo ranchero puede estar libre de lácteos y ser hecho con tofu? ¡Claro qu...

☆☆☆☆☆ (0)



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Dra. Marcela Sandoval

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