

Avoidance of simple carbohydrates, portion control and accountability in the treatment of insulin dependent type II diabetics

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Seventy six insulin dependent type two diabetics were enrolled in a 6 week program of diet and lifestyle changes. All patients had a full medical evaluation, blood work for lipids and A1C and body measurements. Because of the risk of hypoglycemia all patients stopped regular insulin at the beginning of the program, long acting insulin was reduced by 30% and adjusted as needed. All patients stopped sulfonylureas. Thiazide diuretics were stopped because after restricting simple carbohydrates a spontaneous diuresis occurs. Patients were followed on a weekly basis. Results: Of the seventy six patients forty two were able to discontinue all insulin and the remaining 34 were able to lower their dose significantly. Average weight loss was 20 pounds. Twenty six patients were able to lower blood pressure medications. Average A1C changed from 7.9% to 6.6% in spite of the marked reduction of diabetic medications, average triglycerides changed from 219mg/dl to 179mg/dl. LDL cholesterol changed from 75mg/dl to 78mg/dl. Systolic blood pressure changed from an average of 121mm Hg to 118mm Hg. The program was overall well tolerated, most patients experienced more energy, better sleep, less body pains. They were not hungry in spite of a significant reduction in calories. Severely restricting refined carbohydrates should be considered in the treatment of all type two diabetics.

Biography

Gann is a cardiologist, has published 45 scientific articles while being associate professor at the University of Miami and in private practice in Tucson. Together with his wife Elizabeth he founded the Diet of Hope Institute a program dedicated to the prevention and treatment of obesity, diabetes and heart disease.

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