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A veggie twist for Thanksgiving PAGE 3



STAFF PHOTOS BY JAVIER GALLEGOS

Dr. Corby Martin holds two bags of almonds at Pennington Biomedical Center. A study at the center will examine the possible benefits of adding almonds to the diet of patients taking GLP-1s.

ALMONDS AND GLP-1S?

Pennington doctor thinks there's a nutritious connection

BY MARGARET DeLANEY
Staff writer

A person starting GLP-1 weight loss drugs should also be ready to scrutinize their diet and change some lifestyle habits. Dr. Corby Martin, a psychologist by training, conducts various studies each year at Pennington Biomedical Research Center in Baton Rouge on weight loss treatments to design and deliver "novel lifestyle change programs for time and exercise, for the hope of really helping people manage their life," he said.

His next project: the possible benefits of adding almonds to the diet of patients taking GLP-1s.

Participation requires an eight-week commitment for 76 Louisianans either with a diagnosis of Type 2 diabetes with a body mass index above 27 or those living with obesity without Type 2 diabetes with a BMI of 30 and above, the first level of obesity on the index scale.

"This study is tricky in the sense that we have to recruit people before they start the GLP-1," Martin said.

While the Pennington center will not be providing GLP-1s for patients in the study, they can help potential participants with referrals for weight loss drugs if they qualify.

Once patients qualify, they are separated into two groups: the almond group and the control group. The almond eaters will eat at least 50 grams of almonds each day, or two packets provided by Pennington — or more if they like the taste, Martin said. The control group will maintain their standard diet.

This interview has been edited for length and clarity.

Tell me about the focus on diet when on drugs like GLP-1s.

GLP-1s are special because we've demonstrated that they result in a very significant decrease in food intake. People consume a third or even half as much food as they normally consumed before they started the medication.

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Bags of almonds sit in the kitchen lab at Pennington Biomedical Research Center.

We're wired up, but more lonely

A New Orleans therapist shares some ways to reconnect

BY MARGARET DeLANEY
Staff writer

Social media was built to connect, but research suggests it's making humans more lonely. As online networks have grown, so has the incidence of reported loneliness and dissatisfaction with social contacts, according to an advisory published from the U.S. surgeon general in 2023.

Nearly 1 in 3 Louisianans reported feeling lonely and lacked emotional and social support, according to data from the Centers for Disease Control and Prevention.

Shannon Lovell, a clinical therapist in the psychiatry department at Ochsner Main Campus, said the need for mental health services continues to grow.



Lovell

"We are busy here," Lovell said. "I have been here for over 18 years, and honestly, it's just a nonstop as far as the need."

Traditionally, loneliness and social isolation was common and associated with aging population as an issue, according to Lovell. With social media and online distancing, it's now becoming a wider conversation for younger patients.

"Historically, older adults were the ones that struggled, but now it's kind of gone wonky," Lovell said.

The World Health Organization reports that loneliness is associated with a 29% higher risk of coronary heart disease and a 32% higher risk of stroke. Other risks include increased inflammation, sleep disturbances, obesity and diabetes.

"We have to look at loneliness as a health issue," Lovell said.

Tulane University's Education Research Alliance for New Orleans conducted a survey of 2,000 students in grades six to 11 across 16 charter schools. The study, released in May, found that 40% of the students showed symptoms of depression, 32% reported high anxiety, 18% reported school bullying and 13% experienced cyberbullying.

Nearly 1 in 5 students said they would not reach out to anyone if they felt overwhelmed or stressed.

"This survey helps us move the discussion from the national picture to look at what's happening in our community and thinking about young people," Lovell said. "Their experience in schools, neighborhoods and what's going on with their mental health and how social media has a relationship with that."

Lovell expects that with social media, the toll on mental health for students has grown.

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Simple lifestyle changes men should make

Each decade brings own challenges, doctors say

BY CAMILLA FOSTER
PA Media/dpa



DPA/TNS PHOTO BY CHRISTOPH REICHWEIN

Men, take care of your health with adjustments each decade, say medics.

LONDON — Campaigns are helping propel the topic of men's health into the mainstream, sparking more open conversations about issues like mental health and prostate cancer that were previously often overlooked or brushed under the carpet.

As men age, their bodies go through significant changes and it can be easier to dismiss new aches, symptoms or health concerns as simply part of getting older, rather than taking steps to address them.

However, Dr. Natalie Barclay, a doctor at Nuffield Health in England, says there are plenty of proactive lifestyle changes men can make in their 40s, 50s, 60s, 70s and beyond to help maintain their health and improve their well-being.

Here are the key health and lifestyle recommendations for each decade:

40s

Strength training: "Testosterone is a key metabolic hormone which affects libido, but also helps with muscle mass. However, once you get into your 40s, your testosterone levels tend to decline at a rate of about 1-2% per year," says Barclay. "Due to this natural gradual decline in testosterone, she advises men of this age to crack on with strength training to help build and maintain their current muscle mass.

"Strength training is going to help you build you a really good foundation for your 50s, 60s, and 70s," says the doctor.

"Although recovery can be a little bit slower than it was in your 20s or 30s, you should be able to push yourself in strength training without too much issue in your 40s."

Weight management: Barclay also highlights how your 40s are a time where the bad habits in your earlier decades start to catch up with you.

"The natural decline in testosterone and slowing down of metabolic rate means that many men find that a little bit of weight creeps in during their 40s and becomes harder to lose," says Barclay.

"Therefore, chaps at this stage need to watch their liquid calories and avoid things like takeaways and fast food. They should try to reduce their alcohol consumption to the normal recommended guidelines of 14 units per week."

She explains that being proactive about maintaining a healthy waist circumference at this stage is incredibly important as it helps set you up for a better metabolic future, by lowering the risks of things high blood pressure and Type 2 diabetes.

Stay active: "You want to be aiming for 150 minutes of moderate intensity exercise a week, as it will help drop your risk of heart attacks and strokes later on in life. Go out for brisk walks or play footy with the kids," recommends Barclay.

"Do exercises in your 40s for the body you want in your 70s."

Learn your numbers: "If you have a family history of high blood pressure, diabetes or heart problems, your 40s are a good time to learn your numbers and start doing what you can do to prevent you from going that direction," advises Barclay.

Check what is available in your area. In Britain, a free National Health Service (NHS) Health Check is offered to all adults between 40 to 74 which checks key metrics like blood pressure.

"If you're invited to a NHS Health Check in your 40s, make sure you go," urges Barclay. "People often have no idea that they have high cholesterol or high blood pressure, but by learning your numbers you can take action."

50s

Keep your cholesterol and blood pressure in check: "Blood pressure and cholesterol tend to rise in your 50s, so make sure you check your blood pressure regularly," recommends Barclay.

Staying fit and eating a balanced diet will help.

"Strength training is a nonnegotiable at this point. Muscle mass increases your basal metabolic rate, so the more muscle mass you have, the faster your body will burn calories," explains Barclay.

"Reducing your consumption of things like saturated fats, salt and alcohol is key."

Look after your prostate: You are more likely to get an enlarged prostate if you're over 50, and if others in your family have an enlarged prostate, according to the NHS website.

"Lots of men of this age start to notice that they need to get up in the middle of the night for a wee, can't hold it as long as they used to, or struggle to get a wee started," notes Barclay.

However, there are things you can do that may help with symptoms of an enlarged prostate.

"Make sure that you're hydrated during the day, but reduce your fluid intake after 6 p.m.," advises Barclay. "I would also recommend avoiding bladder irritants such as caffeine, alcohol and fizzy drinks to reduce the need to urinate so often."

Talking to your GP about bladder training tips can also be useful.

Get prostate a check: See what prostate health monitoring is available where you are. In Britain, for example, anyone with a prostate aged 50 or over is entitled to a free Prostate-Specific Antigen blood test from the NHS upon request.

"However, if you've got significant family history or fall into a higher risk group, then you can request a PSA test from 45," adds Barclay.

60s

Switch to lower-impact exercise: Barclays highlights how many men start to struggle with joint pains in their 60s.

"Things like swimming and cycling are lot kinder on the joints and will still give you that beneficial cardiovascular workout," says Barclay.

She adds that men may also start experiencing the effects of a disruption of their vestibular system at this age.

"This is the system that gives you balance, so this disruption can make you feel a little bit less coordinated," says Barclay. "Switching the activities you do to minimize the impact of this is going to be key for maintaining good health."

Cholesterol and blood pressure-lowering strategies: "In this decade we start to see peaks of things like diabetes and cholesterol which need to be treated," says Barclay. "If your levels are high, talk to your GP about medications, statins and other blood pressure control strategies that could help reduce the risk of a cardiovascular event," says Barclay.

70s and beyond

Find exercises that help with mobility and balance: "One of the biggest issues in this decade is mobility due to that decline in muscle mass," says Barclay. "Men of this age might also have weakened bones, particularly if they've been on long-term medications throughout their 50s and 60s.

"We also start to see age-related eyesight deterioration, so that coupled with less mobility and balance disturbances, increases the risk of falls and poor mobility."

To negate these effects, the GP recommends focusing on balance exercises that will gently build strength and mobility.

"Things like tai chi can be particularly useful in this age group," says Barclay.

Boost your brain: "Things like Alzheimer's and vascular dementia can start developing in this age group," says Barclay.

Although there's no cure for dementia, there are some things that can help slow the rate of progression.

"Research suggests that people who remain physically fit, eat a nutrient-dense diet and stay cognitively active by getting involved in things like volunteering and crossword puzzles might be able to slow the onset of dementia," says Barclay.

ALMONDS

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STAFF PHOTO BY JAVIER GALLEGOS

Dr. Corby Martin pours almonds into a bowl to weigh them at Pennington Biomedical Center.

That is good for things like weight loss and Type 2 diabetes management, but it means that people need to eat a much more nutrient-dense diet.

If they're eating a lot of calories that aren't nutritious after they take a GLP-1, they can't eat enough to get all their nutrition needs met.

The almond study is really meant to find a way to help people consume more nutrient-dense foods. So, even though they're eating less, they're going to get all the nutrients needed for their body.

Why almonds?

They're loaded with vitamins and minerals and plant-based protein, all in a really small package.

You don't have to eat a big volume of food because with a GLP-1 you feel full very quickly. With almonds, you can eat a smaller amount of food and get a lot of nutrition for the volume.

Ultimately, almonds have a really good track record to improve cholesterol and glucose management. There's some existing literature suggesting that they're a really good nutritious food that has a multitude of health benefits.

I think among all the tree nuts, they have probably the most research behind them. The study is funded by the Almond Board of California. For the past several decades, that board has funded several studies to evaluate what exactly are in almonds and what potential benefits they have to health.

Pennington can publish the results no matter what. We don't have any restriction on publishing results, whether it's pro-almond or not.

We're hopeful that if we give weight loss drug users almonds, it'll help improve diet quality, but also hopefully magnify the effects of the drug on cholesterol.

Technically one serving is one packet, but we're going to give folks two packets. For some people that really like them, we're going to give them three packets. They can consume as many more almonds as they wish.

Why wouldn't you look at a vitamin E supplement instead of almonds? Why did you choose this instead of other alternatives?

It's a little bit controversial in the sense that many people take supplements and vitamins, but there's some evidence that consuming the vitamins as supplements is not good for you. And whole foods are better for the body.

Many vitamins are not necessarily bad, but it is far better, we believe, to get those nutrients and minerals and vitamins from whole foods.

What do you think you will find?

We're hypothesizing that the almond group will have increased levels of vitamin E in their system — a really important vitamin, and almonds have quite a bit of it.

We're also hopeful that general diet quality will improve. There's an index called the Healthy Eating Index. The (U.S. Department of Agriculture) developed it years ago as an index of the overall health of your diet and controlling calorie level. Americans have a pretty poor Healthy Eating Index.

We're optimistic that we can bump index scores up by five or 10 points with consumption of almonds.

When the study concludes, and we have collected results, we hope that dietitians and physicians will establish meal plans and diets that they can give to people when they're prescribed a GLP-1.

Here in America, when a person gets a medication, it's pretty infrequent for them to get some other kind of diet or behavior management plan. If this line of inquiry and line of research pans out, we would have a blueprint to give people prescribed a GLP-1 a meal plan that will help them improve their diet quality, better manage side effects and bolster nutrition during a period of eating fewer calories.

If you look at the literature, there is some concern about nutritional adequacy when people are on GLP-1s. We suspect patients on weight loss drugs need additional nutritional support, and these types of studies will determine if that's true.

Even with the control group and the almond group, you would still have variability in diet with the people eating almonds. Is there any attempt to counteract that, to encourage them to adhere to the index?

The variability in diet is massive. This is one reason why we need 76 people to complete the study. In a study, we could have a person that enrolls in either group and just naturally their diet goes either better or worse due to other factors.

Critically, we find that when people integrate a food like almonds into their diet, it frequently displaces less-healthy foods. If a person typically had a candy bar for a snack in the afternoon, and they replace that candy bar with almonds, they're getting the benefit of the almonds, plus they're removing the sugar and other things from the candy bar.

This is how by integrating more healthy foods, like integrating more whole grains and more whole foods into the diet, you can replace the same number of calories from foods that were far less healthy.

That magnified effect of overall diet is what we hypothesize.

You are tracking vitamin E. But are you tracking anything else?

We are looking at cholesterol levels as well as body composition. We're also looking at how people feel about their GLP-1 therapy and their diet. We're asking people to report side effects of the medications. We're asking them to report how satisfied they are with the medication, their progress, their diet.

We want to see if perhaps eating almonds shift them into a healthier diet and if that helps manage some of the GLP-1 side effects. GLP-1s are very powerful medications, and the side effects are very real.

One thing that we've hypothesized is that perhaps some of the side effects are magnified because people's eating patterns get disrupted. They don't eat nearly enough food. They maybe aren't drinking enough liquids or beverages.

We're hopeful that the almonds can help stabilize the eating pattern and that may have a secondary benefit of helping to manage side effects.

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LONELY

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Social isolation is defined by the CDC as a person who does not have relationships or contact with others and has little to no social support. This can pose a health risk, even for people who don't feel lonely.

Loneliness, however, is defined as feeling alone or disconnected from others, without meaningful or close relationships or a sense of belonging. It reflects the difference between a person's actual and desired level of connection.

"What's being missed here is meaningful connection," Lovell said. "When you're isolated, you're not having meaningful connection. You're not having those social interactions, a sense of belonging, trust, support. When those things are missing, and they're missing for a significant period of time, then it becomes more of a serious conversation."

'Change is hard, and it's scary'

Social media, according to Lovell, is at the crux of many mental health-related issues connected to loneliness.

"I find a lot of my patients that fit this storyline, they're more voyeuristic," Lovell said. "They're on TikTok and they watch all this stuff, but they're just observing. They get into these people's lives and they follow them, but they're not doing anything for themselves."

Doomscrolling, or continuously absorbing distressing information, may seem unavoidable in the current online world, but exposure to constant negative stimuli can negatively affect mental health, according to the American Brain Foundation.

"I'm not just saying all phones or social media is bad. I'm saying we need to reduce the amount of time we're giving to it," Lovell said. "Change is hard and it's scary."

According to Pew Research Center data, just over 50% of U.S. adults feel they spend too much time on their smartphones, and roughly 25% report being on them "almost constantly."

While many Americans feel their phone takes up too much of their time, only half reported actively trying to change their phone habits. And only a quarter of those well-intended phone-quitters were successful, according to the center's data.

So how can people transition from digital consumption to meaningful face-to-face interaction?

Understanding why people use social media is an important first step, Lovell said. There's a difference between learning and exploring from online networks and living through them.

"That can lead down a harmful path," Lovell said. "If I'm doing self-comparison, and it's feeding into my depression or my anxiety and my low self-esteem, I have to pull back on that."

The most effective interventions require behavioral changes, reducing screen time and replacing it with activities that foster real-world social connection, like art or sewing classes. Pre-planning interesting activities with people can be a good first step to increasing a network of human interaction, Lovell said.

"We should not wait until loneliness contributes to depression or chronic stress or another health problem before strengthening our connections," Lovell said. "Our goal should be to say more hellos than goodbyes."

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WE WANT TO HEAR FROM YOU

The Louisiana Health section is focused on providing in-depth, personal accounts of health in the state. This section looks at medical innovations, health discoveries, state and national health statistics and re-examining tried and true methods on ways to live well.

Health editions will also profile people who are advancing health for the state of Louisiana.

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