

Dear Doctor,

Your patient will be participating in a lifestyle modification program, designed to improve health through weight reduction, regular exercise, and plant-based nutrition. For at least the next 30 days your patient's progress should be monitored closely. This is because the program is often so effective in reversing insulin resistance, hypertension, and hyperlipidemia it is usually necessary to reduce medications.

The program utilizes a plant-based diet emphasizing whole grains, legumes, vegetables, fruits and nuts. This type of diet, along with exercise, helps normalize blood sugar, lower blood pressure, promote weight loss, lower cholesterol, and reverse coronary artery stenosis. For more information visit www.diabetesmiracle.org.

The following guidelines will assist you in the management of your patient.

Laboratory Tests

- Fasting Chemistry Panel, Lipid Profile, HgbA1c*, Insulin* (* diabetics only)
Obtain initially, and 3 months after beginning of program.

Barnard ND et.al., A Low-Fat Vegan Diet Improves Glycemic Control and Cardiovascular Risk Factors in a Randomized Clinical Trial in Individuals With Type 2 Diabetes. *Diabetes Care* 2006;29(8):1777-1783

Sacks FM, Svetkey LP, Vollmer WM, et al. Effects on blood pressure of reduced dietary sodium and the Dietary Approaches to Stop Hypertension (DASH) diet. DASH-Sodium Collaborative Research Group. *N Engl J Med* 2001;344:3-10.

Newby PK, Tucker KL, Wolk A. Risk of overweight and obesity among semivegetarian, lactovegetarian, and vegan women. *Am J Clin Nutr* 2005;81:1267-74.

Jenkins DJ, Kendall CW, Faulkner D, et al. A dietary portfolio approach to cholesterol reduction: combined effects of plant sterols, vegetable proteins, and viscous fibers in hypercholesterolemia. *Metabolism* 2002;51:1596-604.

Esselstyn CB Jr. Updating a 12 -Year Experience With Arrest and Reversal Therapy for Coronary Heart Disease (An Overdue Requiem for Palliative Cardiology). *The Am J of Cardiology* 1999 August 1; 84:339-341



Medications

- *Insulin* – will generally need to reduce early in the program, based on glucose measurements.
- *Oral hypoglycemics* – discontinue at beginning of program. Continue metformin and Januvia if the patient is taking them.
- *Antihypertensives* – will usually need to reduce after first week of the program to avoid hypotension. Reduction should be based on BP readings.
- *Lipid-lowering agents* – can possibly be reduced or stopped, based on 3 month laboratory results.

Patient Visits

- Diabetics should be seen at least twice per week for the first 2 weeks (more frequently if blood sugars are not stable), then once per week until sugars and meds are stable.
- Hypertensives should be seen weekly until blood pressure and meds are stable.
- Other patients should be seen at intervals you feel appropriate medically.
- Patients do best when receiving continuing support and encouragement from their attending physician.

