Case Study #2: Ms. Marco

Ms. Marco is a 67 y o Latina female, 5’1”, 167#, widow who lives alone. She has elevated LDL, low HDL, hypertension, and elevated fasting blood sugar (“pre-DM”). Her doctor has written a referral for “low salt, low cholesterol, low sugar diet instructions.” She has come to see the RD in the outpatient clinic.

Sample Session #1 (demonstrates patient-centered counseling techniques, focus on dietary pattern, and a total diet approach)

RD: Hi Ms. Marco. I’m Toby. Tell me what brings you in today.

MM: My doctor told me I should talk to you. I’m confused, what can I eat? Everything I like is bad for me, it seems.

RD: I know it sometimes seems like that. I’m glad you came in; I’ll try to help clarify things for you today. Now, looking at your doctor’s referral, it seems she is concerned about your blood pressure, your cholesterol, and your blood sugar. Does that sound right?

MM: Yes, yes, my blood pressure and cholesterol have been problems for many years, and she’s always telling me they’re too high. The blood sugar problem just happened last time I went to the doctor, but that’s what scares me the most—both my parents had a terrible time with diabetes and I don’t want to end up like that.

RD: Okay, so the diabetes is the biggest concern at this point. And you want to find out what you can eat that will help you stay healthy. Is there anything else that we should focus on today?

MM: No, I think that’s all.

RD: Okay. Can you tell me how long you’ve been at your current weight?

MM: Oh, I don’t know exactly. I think I’ve gained about 20 pounds in the past 5 years or so.

RD: Blood pressure, cholesterol, and blood sugar are often improved with weight loss. Are you interested in losing weight?

MM: That’s what my doctor said too. But I think I’m fine just the way I am. I don’t think I need to lose any weight. I don’t want to get too skinny.

RD: Thank you for your honesty; that will help us develop a realistic plan. Ms. Marco, I see that you brought a three-day food record with you. Thanks for doing that. Can we take a look at that now?
MM: Of course.

RD: (Pause to look at food record.) I see that breakfast and dinner are your main meals. It looks like these meals are pretty consistent: cereal with whole milk and fruit for breakfast, then canned soup and crackers for dinner. Is that right?

MM: Yes, I don’t mind eating the same thing every day. It makes my life easier. Plus, I’m on a tight budget.

RD: Uh-huh, that makes sense. I see that in the afternoons you have a pastry and coffee. Is your coffee black or do you put something in it?

MM: I put about ¼ cup of milk and two spoons of sugar.

RD. Okay. How many cups of coffee do you typically have?

MM: Oh, several. Maybe… five.

RD: I see. Are there other things you snack on during the day that maybe you didn’t write down here?

MM: Hmmm, let’s see. Oh, of course there’s my candies and nuts. I like to eat peppermint candies all the time—see, I have them in my purse right now—and I go through a lot of nuts, probably two cups each day—I know those are fattening, but they have the healthy fat, right?

RD: You’re right. The fat that’s in nuts is healthy for your heart. Too much of any kind of fat isn’t healthy for you, though, and I think you may be getting too many nuts each day. Plus, since they’re salted nuts, they may be raising your blood pressure.

MM: Oh, I didn’t think about that. You’re right. No wonder they taste so good!

RD: Ms. Marco, I think the nuts are a good snack choice for you, but I’m wondering if you’d be willing to cut back on how much of them you’re having. Instead of 2 cups, could you cut back to one handful, or about ½ cup, of the nuts? And maybe you could buy the “lightly salted” version instead of the regular kind.

MM: I can still have a handful? I can do that. I just go through them when I’m watching my TV and I don’t even pay attention. But if I measure them out into a bowl I then I can keep it to ½ cup. And I think I’ve seen those less salt kind at the store—they probably don’t taste good but I’ll try them.

RD: Great! I’m glad you’re willing to give that a try. How about the peppermints? How important are those to you?
MM: Oh, I don’t care about those. I just keep those around for my grandkids. But the kids don’t even really like them, and now I just eat the candies out of habit, they keep my breath fresh and give my mouth a sweet taste. But I can give them up. In fact, when this bag is gone, I’ll stop. I know these aren’t good for me and I’ve been thinking of giving them up for a while.

RD: Wow, that’s great. I think that cutting out all that sugar will really help your blood sugar levels.

MM: Okay, I’ll do it.

RD: Great. Now, I also see that you have a pastry every day in the afternoon, with your coffee. Pastries are high in fat and sugar. How would you feel about cutting back on the pastry, or finding an alternative snack?

MM: I don’t think so. I grew up eating an afternoon pastry my entire life, since I was a kid, and it’s my favorite part of the day. Nothing else will taste good with the coffee.

RD: Okay, that’s fine. How about the coffee? You mentioned you put two spoons of sugar in each cup, and you have as many as five cups. That’s ten spoons of sugar! That’s definitely affecting your blood sugar.

MM: Oh, that’s bad. I didn’t realize it was so much. I have those yellow packets of sugar substitute at home, I guess I could use that instead. Would that be better for me?

RD: Yes, sugar substitute doesn’t have calories or raise your blood sugar, so it would be an excellent replacement for your sugar.

MM: Okay, well, I can do that.

RD: That’s great. Ms. Marco, we have just a couple more minutes together, and there’s one more topic I’d like to address. Another thing I noticed on your food record is that there’s no lunch, no midday meal. Can you tell me about your daytime routine?

MM: Well, I don’t do much. I mostly stay at home, watch TV, and do a few chores around the house. Once in a while my children come over with their kids. But most of the time I’m just sitting. I don’t really get hungry for lunch, so I figure I should just skip it. Plus, I spent my whole life cooking for my family, and I have no interest in doing it for myself now.

RD: I understand. You know, blood sugar levels tend to be more stable when people eat small meals throughout the day, and don’t skip meals. Even adding a simple lunch, like, for example, a cup of fruit with cottage cheese, or salad with half a tuna sandwich, or even a couple of eggs scrambled with some onions and mushrooms and one piece of toast, would be a great addition. What do you make of those ideas?
MM: mmm…that does sound good. When you said lunch, I thought you meant a full meal, like with meat and things. But the ideas you mentioned sound simple. I love cottage cheese and fruit. Actually all of the things you listed sound good to me. And they’re not too hard to make. I sometimes make a salad to have with my dinner, so I could just save some leftovers to make for lunch the next day. That’s easy enough.

RD: That’s a great idea. I think that since you’ll be cutting back on the nuts and not eating the candies, you might find that you’re hungrier around lunchtime. Try adding lunch for the next two weeks, see how your appetite is, and then we can check in about it when you come back in two weeks.

MM: I don’t promise I’ll do it every day, but I can do it at least three times a week.

RD: That’s fine. Three times a week is a great start. So, in addition to adding lunch, remind me what your other plans are?

MM: Let’s see, the nuts--I’m going to cut back to one handful, and I’ll try the lower salt kind. I’m also going to give up the candies. I agreed to use the sweetener instead of the sugar in my coffee—that’s easy. That’s it, right?

RD: Yes, I think that’s all. Your plan sounds great. Do you have questions about anything we talked about today?

MM: No. To be honest, this was much less painful than I thought it would be. I’ll see you in two weeks.

RD: I’m glad to hear that Ms. Marco. I’ll see you then.