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Navy Nutrition and Weight Control Guide

FORGE THE FUTURE

Fit Today for Tomorrow's Challenges

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Encl: (1) Navy Nutrition and Weight Control Guide

1. This Guide (enclosure (1)), will assist you with your command physical readiness program described by reference (a). Initial copies have been distributed to Command Fitness Coordinators and Food Service Officers.

2. This revision of the original guide provides lesson plans with accompanying materials to the Command Fitness Coordinator to develop a Level I program for members who require assistance in meeting Navy Physical Readiness standards. The reference and media sections will assist in promoting and providing nutrition education to all members of your command.

3. In addition to the weight control program plan, this new guide includes Navy Food Service Systems Office guidelines for the General Mess and general information on cholesterol, sodium, sugar, and fiber.

4. This material is essential to assist our people in meeting Physical Readiness and body composition standards and provide nutrition education to all members and their families.

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SNDL Parts 1 and 2 (less Marine Corps field addressees not having Navy personnel attached)

PREFACE

To the Command Fitness Coordinator (CFC)

This guide, when used with the Navy Physical Conditioning Guide will help you develop your command's Health and Physical Readiness Program. Sections One and Two outline a plan for the nutrition/weight control portion of the Level I program and provide materials for the member. Section Three contains calorie and food exchange lists. Section Four contains nutrition reference information to start a file or to offer members interested in a particular topic. Section Five gives Plan of the Day Notes and articles for local Public Affairs. The goal is to promote healthy lifetime eating habits to assist members and their families to make the right food choices at home, at school, and at work.

To the Food Service Officer

Many of you already assist members who do not meet body fat standards by offering lower calorie menu plans and food choices. Section Two of the guide provides you the same nutrition information given to members by their Command Fitness Coordinators.

Section Three includes information familiar to you from the Navy Food Service Systems Office (NAVFSSO). The Calorie List will be updated with each recipe change or revision. Sections Four and Five provide you additional nutrition reference information about why the healthy choices you provide are vital to all of us. Keeping a notebook with the nutrition education component and food service guidance from NAVFSSO will help you provide choices to members to promote both morale and good health.

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SECTION ONE

HOW TO SET UP A LEVEL ONE PROGRAM

HOW TO SET UP YOUR LEVEL I PROGRAM

Your program for members who do not meet percent body fat standards should include physical conditioning, nutrition education, and referral to a support group, if available. This plan provides a program design for the nutrition education portion with handout materials and record keeping charts for both you and the member. These materials were designed for the majority of CFCs who are non-medical personnel who do not have regular access to a dietitian for assistance. You should encourage all members to make an appointment to see a dietitian, if available, for individualized instruction.

The handouts in Section Two are listed in order of presentation to the member. Distributing one not less than every two weeks (except the daily food and exercise logs) will allow the member time to digest and work the material. The food lists in Section Three will benefit members who desire calorie information or food pattern lists. The articles listed in Section Four can be given to members who are interested in a particular topic other than weight control.

You should take height, weight, and percent body fat measurements at the start of each member's program. Weigh no more than once per week. Measure percent body fat no more than once every two weeks. Weighing and measuring more frequently will only reflect water weight gains and losses, not true progress. Perform measurements mid-week if possible, since weekend eating and exercise patterns vary. Although weight is not the official measurement for administrative purposes, it is required on the risk factor form and will assist you and the member in tracking progress.

If a member meets body fat standards between testing cycles, his/her official percent body fat is still that of the last test cycle. The member should continue in the Level I program until the next test cycle. The first 90 days of maintenance is the most crucial. You will provide the member this valuable tracking to help assure continual success.

STEP BY STEP LEVEL I PROGRAM GUIDE

Session 1
Require each member to keep a folder with all materials.

Take height, weight, percent body fat measurements.

Provide Initial Personal Inventory (handout 1). This is for the member's self evaluation of past history.

Provide Introduction (handout 2) and Weight and Fat Loss (handout 3). This sets the tone for expectations and motivations. Emphasize that the member, not you the CFC, makes his/her program work. You can monitor the program, but the member must provide the interest and desire. The program will succeed only as well as the participation put forth by the member.

Set requirements for physical conditioning (group or individual). Refer to the Navy Physical Conditioning Guide for assistance. Ensure all members over 26% body fat (male) and 36% body fat (female) have been evaluated by medical for diagnosis of obesity and permission to participate in your physical conditioning program.

Provide information on support groups, if available. The local Counseling and Assistance Center may have lists of local groups, for example Overeaters Anonymous or Weight Watchers. Check the yellow pages of your local phone book.

Set requirements for weekly weigh-ins and turning in records.

Review with your participants the portions of the OPNAVINST 6110.1C affecting members who do not meet body fat standards. These should include the tables on fitness report/eval entries and administrative action, Level I, II, III rehabilitation, and the NAVOP 046/87 on transfer of obese personnel. Members need to be informed of their status.

Any other requirements for your program:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

Session 2
Provide Body Composition (handout 4) and Body Composition Worksheet (handout 5). These show how to determine goal body weight based on percent body fat and how persons with the same height and weight can differ in percent body fat.

Session 3
Provide Weekly Diary (handout 6). This sheet requires the member to track his own progress. Accountability and honesty with oneself are the most important factors in any program. Writing down these thoughts promote facing the problem head on.

Session 4
Provide Daily Food Record (handout 7) and Recording Caloric Intake and Eating Behavior (handout 8) and Directions for Completing Food Record Sheet (handout 9). For this week, members should complete the food record sheet (except for the column marked "calories"). The goal is to recognize all the thoughts that are related to eating.

Session 5
Provide New Healthy Choices Reduced Calorie Meal Plan (handout 10). This guide was developed for use in the General Mess. It is based on the Dietary Guidelines emphasizing portion sizes and choices, not "diet" foods.

Session 6
Provide Do Calories Count (handout 11). You may want to give the Navy Food Service Systems Calorie List or the Calories in Fast Foods List both in Section Three to the members if they are interested in counting calories. This technique works for some individuals. However, it is not desirable to become compulsive about counting calories. Total calories does not indicate an adequate and nutritionally balanced diet. Calorie lists do show which foods are high and should either be eaten less often or in smaller portions. Personnel who need to concentrate on eating behaviors should continue to complete handout 7 each week. Others who desire to complete a simplified food record should use the Weekly Food Diary (handout 12). Everyone should complete some form of food diary. This forces the member to accept responsibility for food intake and self-analysis.

Session 7
Provide Carbohydrate-Fat-Protein-Alcohol (handout 13). This is basic nutrition information to assist with choices. You may use pamphlets and some of the information in your reference and public afairs sections to supplement these sheets.

Session 8
Provide Exercise and Calories (handout 14), Calories Burned for Ten Minutes of Activity (handout 15), and Weekly Exercise Diary (handout 16). Refer to the Navy Physical Conditioning Guide for additional information on individualized conditioning programs. Exercise in itself is not the cure for overeating, but it does aid in weight reduction and weight maintenance. Keeping an exercise diary forces members to accept responsibility and focus on starting a new behavior pattern.

Session 9
You may want to continue providing handout 14. Provide Fad Diets (handout 17). The majority of members in your program have fallen into the fad diet trap. Listen to some examples and why they ultimately don't work in the long run.

The handouts below have been organized around one particular topic. You do not necessarily need to present them in that order. However, it would be beneficial to keep handouts 34 and 35 at the end of your program to provide closure. Continue to provide only one handout a minimum of every two weeks.

Handout 18- Mid-Program Personal Inventory. This requires a checkup of specific behaviors identified in the Initial Personal Inventory (handout 1) and asks new information about specific foods eaten.

Handout 19- Fast Foods- Should You Give Them Up.
This session is designed to encourage the member to continue eating at fast food establishments if desired. The goal is to evaluate present eating behaviors there and make appropriate changes by changing portion sizes and content. Plan for the calories and enjoy. Just remember that fast food is usually higher in fat and should not be the mainstay of anyone's diet.

Handout 20- Dining Out Sheet.
The goal is to be able to eat at all types of restaurants and have an enjoyable experience. Remind members that, yes, they are paying for the food. But that means it is their choice to eat as much or as little as they want. Part of losing weight is dealing with choices. It would be much easier to avoid eating out when starting a diet. However, our lifestyles and jobs make that impossible.

Handout 21- Eating in the General Mess.
This sheet accompanies the Healthy Choices...Sheet. The emphasis is again on personal choice not on blaming others for weight problems. Ask members if their general mess displays labels providing calories, has the menu available, or a sample calorie control meal on the serving line. These options will vary from one general mess to another. The best advice is to depend on oneself for knowing what and how much to choose. In that way we carry the knowledge from one situation to another.

Handout 22- Self Talk.
Self talk can make the difference between success and failure. This sheet addresses positive and negative thought patterns. Breaking up thought patterns into before, during, and after a stressful situation can change the outcome.

Handout 23- Smart Thinking.
This sheet addresses rational and irrational beliefs and how to identify them. The concentration on failure, blaming of others, unwillingness to accept responsibility for behavior, and lack of flexibility often make the best intentions go astray.

Handout 24- Setting Goals- Benefits and Costs.
This handout deals with setting realistic goals and provides examples of goals. What are the benefits of losing weight or of gaining weight? What are the costs? Consider both of these as long term and short term. Realistically, short term goals are more easily attained, but always keep the long term goal in sight.

Handout 25- Affirmations Guide.
Affirmations are repetitive thoughts that can help build permanent habits. While this technique is not successful for everyone, some people can channel negative thoughts into positive ones by writing and concentrating on a particular thought, feeling, or action to accomplish. It is best to keep the written affirmation as a positive statement to encourage positive thinking.

Handout 26- Eating Techniques.
Eating techniques deals with some specific eating behaviors targeted in the daily food diary that may have been identified earlier in the program but need a second look or refresher. Food cues (the environment and friends) that influence us to eat when we are not hungry can provide a source of extra calories.

Handout 27- Controlling Negative Behaviors.
What to do when reality hits- questioning motivation and the desire to continue on. Is the program not working because the member is not working the program?

Handout 28- Snacks Are Not All Bad.
Snacking is not bad when it is planned and controlled. Good and bad snacks are listed.

Handout 29- How to Read Labels.
It is often difficult to find the words "salt", "fat", and "sugar" on a label because the label usually contains the chemical, which will include the nutrient. Here are some easy methods to decipher labels.

Handout 30- Basic Four Food Groups and Handout 31- Basic Four Food Group Worksheet. The Basic Four is the easiest way to recheck your diet. What is the most commonly lacking food group among adults? Dairy is first, because many adults trade milk for soda and coffee. Fruits and vegetables are next, because we are eating out more often, especially at fast food restaurants. The worksheet is a tool to assess a diet and make changes.

Handout 32- Exchange List and Sample Pattern and Handout 33- Daily Food Pattern Form. Both provide food lists for members who need to learn portion size control.

Handout 34- How to Maintain Your Weight Loss.
Losing the weight is really the easiest part. That's why diets in themselves work so well for a short time. Long term eating habit change and exercise will help to keep the weight off. Included here are tips on tapering off onto maintenance.

Handout 35- Final Personal Inventory.
This is a final tool for the member to provide an honest assessment of accomplishments, progress, and goals still to be achieved. Members who still do not meet standards should continue on their program, especially the food diary and exercise log.

SECTION TWO

LEVEL I HANDOUTS

Name_____ Date_____

INITIAL PERSONAL INVENTORY

This form is for your own self-evaluation to reflect on your past weight history and factors influencing your eating behavior.

1. age___yrs. ht___(in.) current weight___lbs. % body fat___

2. skeletal frame: large___ medium___ small___
   (excess weight/fat does not mean large frame)

3. What did I weigh at:

	Weight	Year
high school graduation	____lbs.	____
entering the service	____lbs.	____
marriage	____lbs.	____

		Weight	Year	% body fat
adult weight:	Highest	____lbs.	____	____
	Lowest	____lbs.	____	____

4. What contributed to my highest adult weight and percent body fat in no. 3 above?

_____

_____

_____

5. My current job description is largely sedentary. yes___ no___

6. My supervisor provides time to exercise during the work day. yes___ no___

7. I exercise during my work day. yes___ no___

8. I exercise before or after my work day. yes___ no___

9. I have been at what I consider my ideal weight. yes___ no___
   When? _____

10. Are/were either of my parents overweight? yes___ no___

11. Are/were my brothers/sisters overweight? yes___ no___

12. When growing up, meals at home were pleasant. Yes___ No___

INITIAL PERSONAL INVENTORY, CONTINUED

DIET HISTORY QUESTIONS

13. I have been on a diet to lose weight. yes___ no___

14. List each kind of diet I have followed in the past two years. How much weight did I lose? How long did I keep it off?

Diet	Weight Loss	How Long I Kept It Off
_____	_____	_____
_____	_____	_____
_____	_____	_____

15. List any organized diet programs attended. For each, how much weight was lost? How long did I keep it off? How much did it cost to join the program?

Program	Weight Loss	How Long I kept it off	Cost
_____	_____	_____	____
_____	_____	_____	____
_____	_____	_____	____

SMOKING AND ALCOHOL HISTORY

16. I currently smoke. yes___ no___

17. If I quit smoking, how long did I smoke. ____years

18. If I quit, what year did I quit? ____

19. I gained weight after I quit. yes___ no___

20. How much alcohol I drink per week? ____cans beer___shots
____ glasses wine

PHYSICAL HISTORY

21. Chronic illness (examples below) yes___ no___
(diabetes, high blood pressure, heart disease)

22. Currently on medications yes___ no___

23. I have physical disabilities that would prevent regular exercise. yes___ no___

INITIAL PERSONAL INVENTORY, CONTINUED

FOOD PATTERN HISTORY

yes	no	sometimes	Check the column that applies.
24.__	__	_____	I pre-plan most meals.
25.__	__	_____	I consciously choose all foods picking some foods I really like.
26.__	__	_____	I do not limit myself to diet foods when on a diet.
27.__	__	_____	I keep "fattening" or "bad" foods out of the house when dieting.
28.__	__	_____	I have replaced some "bad" foods with healthier foods.
29.__	__	_____	I budget my calories, saving some for special events or foods.
30.__	__	_____	I eat until satisfied, not stuffed.
31.__	__	_____	I try not to limit myself to 3 meals per day if that is not my preferred lifestyle.
32.__	__	_____	I take smaller portions of foods.
33.__	__	_____	I try to leave some food on my plate even if it's only a bite.
34.__	__	_____	I keep serving dishes out of sight while eating.
35.__	__	_____	I eat and taste while preparing meals.
36.__	__	_____	I eat while clearing away leftovers.
37.__	__	_____	I try not to skip meals, especially breakfast and lunch.
38.__	__	_____	I eat breakfast.
39.__	__	_____	I am a night snacker
40.__	__	_____	I eat between meals
41.__	__	_____	I currently count calories.

42. I eat more when I am: (check all that apply)
depressed ___ stressed___ angry___ alone___ happy___
with others___

43. I eat my meals at: (Check those that apply)

	Breakfast	Lunch	Dinner
fast food or restaurant	_____	_____	_____
ship/shore mess	_____	_____	_____
home	_____	_____	_____

INITIAL PERSONAL INVENTORY, CONTINUED

SUPPORT

44. Other family members at home are overweight. yes___ no___

45. Other family members are currently dieting. yes___ no___

46. Friends/family are supportive of my losing weight. yes ___ no___

47. I feel currently stressed (over and above the ordinary) on the job or at home. yes___ no___

48. Why do I want to lose weight now? _____

_____

_____

49. My short term weight/fat loss goal is _____lbs. or____ % fat. (goal for one month)

50. My long term weight/fat loss goal is _____lbs. or ____% fat. (ultimate goal

You have identified "factors", not excuses, that you need to be aware of as you begin this program. You will reassess some of these behaviors at the middle and end of this program.

INTRODUCTION

This program will offer many suggestions to help you lose weight/fat. They are only suggestions because what helps one person may not help another. You have probably encountered countless dieting tips that worked great for someone else, but not you. Try to think of these suggestions as lifestyle changes. Many programs that require weight reduction activities fail because those activities end when the program ends. Do not fall into the merry-go-round trap of "on a diet" or "off a diet". This is a self-directed set-up for eventual failure.

Any attempt at weight loss needs to begin with the assumption that <u>you</u> really want to lose weight and are motivated. Although you might be required to lose body fat to meet Navy standards, the Navy should not be your all encompassing reason for this program. Your sincere motivation will make your program work for you. The old excuses of "I was fat when I entered the Navy", "My command won't let me work out during the day", or "I'm too old to have to meet standards" do not hold water. Your personal concern for your health should be your primary motivation. Successful achievements are more easily attained from sincere self-driven motivation not from outside sources. These achievements are more easily maintained.

Consider joining a support group to associate with others who are also trying to lose weight. Check your local telephone directory and ask your Command Fitness Coordinator (CFC) and local Counseling and Assistance Center (CAAC) for assistance in finding an appropriate group to meet your needs. You should try several groups before making a decision about which is most effective. The members of a group directly influence the tone and direction of that group. Don't give up if you have a negative experience. You alone are the best judge if the power of the group will help you and of the type of individuals with whom you feel most comfortable.

Read on, and good luck with your program. Remember, the three key elements to losing fat and keeping it off are eating less, exercising more, and making eating and exercise behavior changes for a life time.

WEIGHT AND FAT LOSS

Weight and fat are not the same. Weight on a scale measures the total body mass, which includes muscle, fat, bones, water, organs, etc. Fat, measured by underwater weighing or the tape measure method, is the percent of our body that is fat. We have all seen the body builder who weighs heavy on a scale but who also has very little fat. Of course, there are also individuals with excess fat who try weight lifting instead of aerobic activity to add additional muscle mass especially around the neck with the misconception that they are reducing their percent body fat. Fat does not change into muscle or muscle into fat. Building muscle mass does not address the problem of an overfat or obese physical condition. Excess fat, not total body weight, is clearly associated with increased risks for chronic diseases. Measuring percent body fat is a much better indicator of health.

When beginning on a program to reduce body fat, it is important to remember that weight/fat loss does not occur evenly. Initial weight loss on the scale (essentially water) usually occurs rapidly during the first few weeks. Although this loss is a positive reinforcement for success, the body then begins to reach a plateau and will start to lose fat, but at a slower pace. It is desirable to achieve a slow weight loss to lose fat, not muscle mass. A slow loss will allow for permanent lifestyle habit change. Fast losses often indicate another diet doomed for failure.

The scale can be an incentive for some dieters and an enemy for others. Some dieters weigh themselves daily and even several times a day. Many would say that this is part of the total compulsive behavior exhibited. Concentrating on the scale loss does not focus on the real issues of why one eats.

It is generally recommended that weighing not more than once per week and measuring percent body fat every two weeks or once per month will show an accurate picture of fat loss, not fluid shifts. Progress can be considered as an average of one to two pounds per week loss on the scale or one percent body fat loss every two weeks. Individuals who are very obese may at first see a large loss on the scale but not in percent body fat. This is due to the large amount of water lost at the onset of a program. Weighing <u>and</u> measuring will more accurately reflect progress. Progress over a six month period that reflects losses, plateaus, and hopefully only small gains, will determine the true success of a program.

The next handout on body composition will provide more information on body composition to assist you with goal body weight and percent body fat.

BODY COMPOSITION

Although the Navy does not use weight measurements for administrative reasons, it is meaningful to define a goal body weight to allow you to make short term weight loss goals to meet percent body fat standards. First we need to understand the difference between percent body fat and percent body lean.

PERCENT BODY FAT- the percent of total body weight that is fat tissue. If I weigh 135 pounds and am 24 percent body fat, then .24 % X 135 pounds or 32.4 pounds are fat. We need a certain amount of fat on our bodies to protect our internal organs and supply energy if needed. However, excess fat can place unnecessary strain on the heart, muscles, ligaments, and bones.

PERCENT BODY LEAN- The percent of the total body weight that is tissue other than fat (muscle, bones, organs, water, etc.) If I weigh 135 pounds and am 24 percent body fat, then 100 % - 24 % = 76 % body lean. So .76 X 135 pounds= 102.6 pounds of lean tissue other than fat.

Let's look at two people who are both the same height and weight, but they have different percent body fat measurements due to lifestyle.

Joe
Joe has a sedentary job, but he exercises at least three times per week, eats a diet low in fat, high in fiber, tries not to snack at night.

Joe's measurements	
ht-	72 in.
wt-	190 lbs.
body fat-	15 %
body lean-	85 %
fat pounds-	28.5 lbs.
lean pounds-	161.5 lbs.

Sam
Sam also has a sedentary job, but he never exercises, watches TV at night and snacks, eats at the local fast food establishment, always has a can of soda or a cup of coffee with extra cream/sugar in his hand at work.

Sam's measurements	
ht-	72 in.
wt-	190 lbs.
body fat-	24 %
body lean-	76 %
fat pounds-	45.6 lbs.
lean pounds-	144.4 lbs.

If we weigh Joe and Sam, they are the same. If we look at them, there will be a noticeable difference. Sam's extra fat will reflect his 24 percent body fat. He does not meet body fat standards and is overfat. Sam can decrease his fat weight without losing lean weight with a well rounded exercise program and establishment of a balanced nutritional eating plan. This is the ideal way to decrease percent fat and make appropriate life style changes.

Turn to worksheet (handout 5) to find Sam's goals body weight and then find your own.

BODY COMPOSITION WORKSHEET

Percent fat changes slowly. To monitor progress and establish goals lets determine a goal weight for Sam based on percent fat, assuming his lean body weight is not going to change.

Sam
weight- 190
current percent body fat- 24%
current body lean- 76% (100% - 24%)

Goal body weight- To determine goal body weight based on percent body fat, you must assume that lean body weight will not change.

$$\text{Goal body weight} = \frac{\text{current body weight X current \% body lean}}{\text{goal \% body lean}}$$

example: Sam's first goal is to reduce to 20 % body fat
100 % - 20% = 80% body lean

$$\text{Goal body weight} = \frac{190 \times .76}{.80} = 180.5 \text{ pounds}$$

This weight will provide Sam a goal weight range to meet percent body fat standards. If he wants to reduce to 15%, he would plug in the new numbers and find his new goal weight of 170 pounds.

To find your goal body weight:

weight-_____pounds

current percent body fat-____%

current percent body lean = 100 - current percent body fat___ =

____%

goal percent body fat-____% (this is your goal percent body fat, not your current percent body fat)

goal percent body lean = 100 - goal percent body fat ___ = ___ %

$$\text{goal body weight} = \frac{\text{weight } (\quad) \times \text{current \% body lean } (\_\_\_\_)}{\text{goal \% body lean } (\_\_\_\_\_)} = \_\_\_\_\_ \text{ lbs.}$$

developed by CDR D. Spillane, MSC, physical therapist

Name_____ Date_____

WEEKLY DIARY

Write a few essentials about how the week passed - comments (good or bad) about your diet, exercise and general feelings.

Week of _____ _____

Week of _____ _____

Week of _____ _____

Week of _____ _____

Week of _____ _____

Week of _____ _____

Week of _____ _____

Week of _____ _____

Week of _____ _____

DAILY FOOD RECORD NAME_____ DAY: M T W T F S S DATE: _____

TIME OF DAY	MOOD	HUNGER 0 TO 5	SPEED 0 TO 5	WHERE EATEN	WHO EATEN WITH	FOOD EATEN	AMOUNT	CALORIES	WHY DID YOU EAT?	DID SOMEONE INFLUENCE WHAT YOU ATE?

RECORDING CALORIE INTAKE - DAILY FOOD LOG

The calorie maintaining method of dieting is not the only way to lose weight. Individuals vary in genetic make up, gender, exercise habits, metabolism, past dieting history, and other factors that can influence rate of weight reduction. It is important however, to be aware that caloric intake is one good indication of existing dietary behavior. Evaluation is helpful in making changes.

Daily food records have been suggested as a major factor in highlighting awareness of habits and helping individuals to achieve weight loss. Food records may involve plotting daily intake, mood, degree of hunger, time, eating place, etc. Trends will be easily seen allowing for changes to be made.

The following food diary sheet with accompanying directions may be helpful for evaluation purposes. One sheet is to be completed daily. It is best to record information each time you eat, because memories grow short as the end of the day approaches. It is not necessary to keep a diary constantly throughout your program unless you feel it significantly helps. You <u>should</u> keep records initially for at least two weeks. You may later decide to use an abbreviated diary listing just foods eaten and total calories. The behaviors on which you need to focus should be emphasized in your diary.

Calories may be counted using some of the lists provided. You may need to purchase a calorie book. There are many books available at paperback bookstores. Calorie counting is very approximate as you will be guessing at portion sizes and ingredients. None the less, you will gain invaluable information for your personal program and weight maintenance.

DIRECTIONS FOR COMPLETING FOOD RECORD SHEET

Above all - BE HONEST (You are only fooling yourself!)

1. Time of Day - write down the time you begin eating.

2. Mood - write in your mood at the time of eating.
"happy", "relaxed", "depressed", "bored", "angry" etc.

3. Hunger - on a scale of 0 to 5; 5 is ravenous,
0 is not hungry.

4. Speed - on a scale of 0 to 5; 5 is fast, 0 is a leisurely paced meal.

5. Where did you eat?
"kitchen table", "in front of the TV", "at a restaurant", "mess hall"

6. Who did you eat with? - you don't need to be specific - the idea is to distinguish alone vs group eating.
"alone" "coworkers" "spouse"

7. Food Eaten - write what you ate and estimate the amount.
1 hamburger 1 bun 1/2 cup green beans 1 can cola
1 large apple 1 chicken breast 1 scoop ice cream

8. Amount - measure as accurately as able.
quarter pound hamburger 2 inch brownie medium apple
whole bun small bag chips 1 scoop ice cream
1/2 cup green beans large chicken breast

9. Calories - make sure you account for the amount of food, cooking method (frying or baking changes the calories greatly), any hidden foods (mayo on your sandwich bread).

10. Why did you eat? - why did you choose to eat at that time?
"walked past ice cream shop" "my friend was hungry"
"It was 5:00, time to eat" "I was at the movies"
"I was very hungry"

11. Did someone influence what you ate? yes or no answer is fine, but think carefully on this one. If the commercial on television gave you the idea to eat, you were influenced by someone!

NEW "HEALTHY" CHOICES REDUCED CALORIE MEAL PLAN

Navy Food Systems Office

August 1987

NAVY FOOD SYSTEMS SERVICE OFFICE

NEW "HEALTHY" CHOICES REDUCED CALORIE MEAL PLAN (APPROXIMATELY 1500 - 1700 CALORIES)

The following meal pattern can be used as a guide for selecting nutritionally balanced meals that add up to a daily total of approximately 1500 - 1700 calories. Note that the major food groups--fruits and vegetables, breads and cereals, milk and milk products, meat/fish/poultry/beans--are included to provide the variety of foods essential to good nutrition. There are no special or "diet" foods. There is no requirement for special "diet plates." This flexible meal plan allows selection of a 1500-1700 calorie menu from a typical serving line. Remember, weight control is a personal responsibility. Here are some suggestions to assist you.

- Sensible portions are essential for successful weight control so request smaller portions when necessary.
- Choose skim milk or 2% low-fat milk.
- Select an entree without gravy, if possible.
- Choose the low-calorie salad dressing and tossed green salads when green salads are available.
- Select the entree that isn't fried.
- Choose the lower calorie dessert such as fruit, low-fat yogurt, smaller dessert portions, sherbet or gelatin. (Note: fruit and yogurt are the most nutrient dense, i.e., nutrients in proportion to calories).
- Keep fats, fatty foods and sugar to a minimum. Fats have more than twice the calories of protein and carbohydrates; therefore, fats are the most concentrated source of calories.
  - One teaspoon of butter has 45 calories.
  - The typical soft drink has 9 to 12 teaspoons of sugar in a 12-oz serving.
- Choose a plain cooked vegetable.
- Trim visible fat from meat; discard poultry skin to reduce the poultry fat and calories.
- <u>It is OK</u> to eat bread, potatoes, and other starches. Bread and starches such as spaghetti are no more "fattening" than any other food. Most of the calories come from the company they keep--calorie-rich butter, sauces and gravy.

"Healthy Choices" Reduced Calorie Breakfast
(approximately 400-500 calories)

Number of Servings	Menu Item
1	Breakfast appetizer (fruit or 1/2 cup juice)
1	Breakfast Entree (1 egg or 1 oz meat or 1/2 portion hash, minced beef or chipped beef)
2	Starch/Bread servings (starch servings include cereal, toast (1), biscuit (1), muffin (1), pancakes (1), french toast (1 whole slice)
1	Fat Serving (1 tsp butter or 1 slice bacon)
1 cup	Skim milk or 1 cup 2% low-fat or 1/2 cup whole milk)

Coffee or tea--as desired (no cream or sugar)

Some Healthy Breakfast Hints: If you want to moderate your intake of cholesterol, select eggs (egg yolks) no more than three times per week. Select a whole grain cereal to provide some dietary fiber. (A whole grain will be listed as the first ingredient on the label.) Include a good source of Vitamin C such as citrus fruit or juice or melon. To jazz up your bowlful of cereal, add fresh fruit, if available.

"Healthy Choices" Reduced Calorie Lunch (approximately 600-650 calories)

Number of Servings	Menu Item
1	Lunch Entree (3 oz serving meat or fish without sauce or gravy, or 3/4 cup cottage cheese; or 1 cup serving casserole-type entree)*
2	Starch Servings (1 serving equals 1/2 cup of the following: potatoes, rice, cooked pasta, dried beans, baked beans, dried peas, lima beans, corn, winter squash, green peas, sweet potatoes or 1 slice of bread, 1 roll, 1 tortilla or 6 saltines)

Vegetables (plain--as desired or 1/2 cup lightly buttered vegetable)

Number of Servings	Menu Item
1	Salad (lettuce-type as desired plus 2 tbsp low-calorie dressing or 1/2 cup fruit or other vegetable salad)
1	Fat Serving (1 tsp butter or 2 tsp salad dressing, mayonnaise-type, or 2 tbsp sour cream)
1 cup skim milk (or 1 cup 2% low-fat or 1/2 cup whole milk at lunch or dinner)	

Coffee or Tea --as desired (no cream or sugar)

*Some casserole items include one starch serving also. One-half-3/4 cup of cooked dry beans will equal 1 oz cooked meat. For instance, a day's choice could include chili at lunch and meat for dinner.

"Healthy Choices" Reduced Calorie Dinner (approximately 500-600 calories)

Number of Servings	Menu Item
1	Dinner Entree (3 oz serving meat or fish without sauce or gravy, or 3/4 cup cottage cheese; or 1 cup serving casserole-type entree)

1 Starch Serving (see lunch for 1 serving portions)

Vegetables (plain--as desired or 1/2 cup lightly buttered vegetable)

1 Salad (lettuce-type as desired plus 2 tbsp low-calorie dressing or 1/2 cup fruit or other vegetable salad)

1 Fat Serving (1 tsp butter or 2 tsp salad dressing, mayonnaise-type, or 2 tbsp sour cream)

1 Fruit or 1/2 portion dessert. (Choose fruits more often than other desserts)

Coffee or tea--as desired (without cream or sugar)

Some Healthy Lunch and Dinner Hints: Lean red meats, fish and poultry without skin are lower in calories than equal amounts of other more fatty meats. A three-ounce portion of cooked meat is approximately equal to one medium pork chop, 1 small hamburger, 1/2 of a whole chicken breast, 1 average fish fillet, or cooked meat about the size of a deck of cards. Vegetables and fruits are generally low in calories, have little or no fat, contain vitamins and minerals, and provide fiber. Fresh fruits can satisfy an urge for sweetness in your diet. Deep yellow or dark green vegetables (for Vitamin A) should be included frequently. In order to maintain a well-balanced diet, include whole grain, enriched and fortified breads and pastas.

Alternate Reduced Calorie Lunches

1 Sandwich (2 slices meat and/or cheese with 2 slices bread, 2 tsp butter or mayonnaise-type dressing or 1/2 submarine-type sandwich)

1 Salad (lettuce--as desired plus 2 tbsp low--calorie dressing or 1/2 cup fruit or other vegetable salad) or vegetable relishes (skip the olives)

1 Fruit or 1/2 cup juice

1 cup skim milk (or 1 cup 2% low-fat or 1/2 cup whole milk)

1 Hamburger on Bun--with onion, lettuce, tomato, catsup and mustard (1 tbsp catsup and mustard)

1	Salad Bar (lettuce--as desired with up to 1 cup raw vegetables) with 2 tbsp low-calorie dressing
1	Starch such as 1/2 cup beans
1	Fruit or 1/2 cup juice

1 cup skim milk (or 1 cup 2% low-fat or 1/2 cup whole milk)

SAMPLE "HEALTHY CHOICES" REDUCED CALORIE MENUS

Sample Menu No. 1

Breakfast

1/2 cup orange juice
1 ounce ham, regular (11% fat)
1 box raisin bran cereal
1 slice whole wheat toast
8 ounces skim milk
coffee or tea

Note: Breakfast includes a whole grain cereal and a whole grain bread to provide B complex vitamins and fiber. A citrus juice was selected for Vitamin C.

Lunch

4 ounces baked halibut (a typical serving)
1/2 cup green beans (canned variety)
A tossed green salad containing 1 cup lettuce, some cucumbers, carrots and green peppers
2 tablespoons low-calorie French dressing
1 enriched dinner roll
1 teaspoon butter
8 ounces skim milk

Dinner

3 ounces beef pot roast (without gravy)
1/2 cup simmered dry beans
1/2 cup spinach
A tossed green salad containing 1 cup lettuce, some cucumbers, carrots and green peppers
2 tablespoons low-calorie French dressing
1/2 cup regular applesauce (any canned fruit could have been chosen)

Note: lunch and dinner have moderate portions of an entree, vegetable and starch. Skim milk, a low-calorie salad dressing, and some of the lower calorie vegetable items on the salad bar were chosen.

This day's menu contains 30% fat (below the Navy recommendation of 35%); 1540 calories, 46% carbohydrate and 2800 mg sodium, even though one canned vegetable was used. Because of the fruit and vegetables, Vitamin A and Vitamin C requirements are above standard. Ninety percent of the recommended fiber allowance was met because of whole grains, fruits and vegetables.

Sample Menu No. 2

Breakfast

1/2 cup orange juice
1 hard-cooked egg (lower in fat than a fried egg)
1 blueberry muffin
1 teaspoon butter
8 ounces skim milk
Coffee or tea

Lunch

1 cup macaroni and cheese
1/2 cup steamed mixed vegetables
A tossed green salad containing 1 cup lettuce, some cucumbers, beets and green peppers
2 tablespoons low-calorie dressing
8 ounces skim milk

Dinner

1/2 chicken breast
1 baked potato
1/2 cup broccoli
A tossed green salad
2 tablespoons low-calorie dressing
1 1/4 cups watermelon

This menu contains 1545 calories and 34% fat. Removing the skin from the chicken prior to eating reduces the saturated fat and calories contained in the skin. The macaroni and cheese entree includes a starch serving also. Seasonal fruit adds interest and variety to low calorie meals.

Sample Menu No. 3

Soup and Sandwich Lunch

8 ounces chicken noodle soup
1/2 submarine sandwich
A tossed green salad with 1 cup lettuce, some cucumbers and carrots
2 tablespoons low-calorie French dressing
8 ounces skim milk
1 raw medium apple

Approximately 500 calories and 30% fat. Note that 1/2 submarine sandwich is served and the soup is a broth type which is lower in calories.

Sample Menu No. 4

Hamburger Lunch

1 hamburger (3 ounces cooked) and 1 bun
1 tablespoon catsup
Sliced tomato, lettuce, onions
Carrot and celery sticks
8 ounces skim milk
Fresh fruit

Approximately 600 calories and 35% fat. Note that one hamburger is served. Fresh fruit and vegetables contribute to the nutrient value of the meal.

DO CALORIES COUNT?

What is a calorie? How are calories in food determined? How does the body use calories?

A calorie is a unit of heat. Foods are placed in a box called a bomb calorimeter (a small chamber surrounded by water) and burned. The amount of heat given off by the burning food is measured by how hot the water becomes. This unit of heat is called a calorie.

Your body in a sense "burns" the foods you eat. The body uses the calories burned (heat) to perform various processes to keep you alive. The extra calories not needed are stored as fat. These extra calories can come from any food. When you don't get sufficient calories from food, your body pulls from its reserves (fat stores) to keep your life processes working. If you are very active, your body may need more calories from food or stored body fat. In this way you can gain or lose weight by adjusting the calories you eat or your activity to add or subtract from your fat stores.

There are 3500 calories in one pound of fat. Weight loss is determined by eating fewer calories than needed or burning calories in exercise. A simple method to determine your caloric needs if you are <u>overweight</u> is to multiply your current weight by 10. This number represents the calories needed to maintain your weight. To lose one pound per week, decrease your daily caloric needs by 500 calories. A loss of 500 calories per day for 7 days totals a loss of 3500 calories per week, which equals one pound of fat.

NAME_____ WEEK OF_____

WEEKLY FOOD DIARY

	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	
BREAKFAST	FOOD	CAL	FOOD	CAL	FOOD	CAL	FOOD	CAL	FOOD	CAL	FOOD	CAL	FOOD	CAL
LUNCH														
SUPPER														
SNACK														
TOTAL CALORIES														
EXERCISE														

Note: Much of the following section on Carbohydrate, Fat, Protein, and Alcohol comes from USDA/HNIS Home and Garden Bulletins 232 Series of April 1986. Feel free to make copies, but please do not edit the material.

CARBOHYDRATE-FAT-PROTEIN-ALCOHOL

CARBOHYDRATE- 1 gram provides 4 calories

SIMPLE - found in sugars, honey, syrup, jam, jelly, many desserts (pie, cake, cookies),

COMPLEX - Starches, vegetables, dried beans, whole grains, breads, cereals, pasta, foods high in fiber

COMPLEX CARBOHYDRATES

Good News About Starch

Major sources of energy (calories) in the American diet are carbohydrates and fats. When you cut down on fat and sugars as suggested by the Dietary Guidelines, you may need to increase the amount of starchy foods you eat to help supply your body's energy needs. Unlike sugars and sweets, starchy foods provide many vitamins and minerals as well as energy.

But Isn't Starch Fattening?

Many people think that starchy foods such as bread and potatoes are fattening. In fact, most of the calories come from the company they keep- calorie-rich additions such as butter or margarine, sour cream, gravies, jam, or jellies.

Starches provide only 4 calories per gram, while fat provides 9 calories per gram. Eating more starchy foods is a good way to fill up with fewer calories, if you watch those additions.

Check Your Diet For Starch and Fiber

How often do you eat:	seldom never	1 to 2 times per week	3 to 4 times per week	almost daily
1. Several servings of bread, cereal, pasta, rice	_____	_____	_____	_____
2. Starchy vegetables like potatoes, peas, corn, beans, dishes made with dry beans or peas.	_____	_____	_____	_____
3. Whole-grain breads/cereals	_____	_____	_____	_____
4. Several servings of vegetables	_____	_____	_____	_____
5. Whole fruit with skins and/or seeds (berries, apples, pears, etc.)	_____	_____	_____	_____

(from USDA/HNIS Home and Garden Bulletin 232-4, April 1986)

CARBOHYDRATE, CONTINUED

Dietary fiber is the parts of plants that humans can't digest. It is not clear exactly how much and what types of fiber we need in our diets daily. However, for most Americans, a moderate increase in dietary fiber by eating more fiber-containing foods like those listed on this page is desirable. There is no reason to take fiber supplements or to add fiber to foods that do not already contain it.

" It is the policy of the Army Surgeon General, as Department of Defense Executive Agent for Nutrition for all the services, that as long as the menus served to our soldier, sailors, airmen, and marines offer a variety of foods containing good sources of fiber, there is no need to promote the exclusive use of oats or oat bran over other sources of high fiber foods". Oct 88
(Department of the Army, Office of the Surgeon General)

Some foods for fiber: whole-grain breads, breakfast cereals, and pasta; vegetables, especially with edible stems, skins, seeds; dry beans and peas, whole fruits, especially with edible skins or seeds; nuts and seeds.

Whole grains are products that contain the entire grain, or all the grain that is edible. They include the bran and germ portions which contain most of the fiber, vitamins, and minerals, as well as the starchy endosperm. Whole grain doesn't have to mean bread or cereal. Try these: brown rice, corn tortillas, unbuttered popcorn, scotch barley (in soups), tabbouleh (bulgur wheat salad), and whole-wheat pasta.

All whole-wheat bread is brown, but not all brown bread is whole-wheat. By law, bread that is labeled "whole wheat" must be made from 100 percent whole-wheat flour. The type of flour present in the largest amount is listed first on the ingredient label. Sometimes a dark color is provided by "caramel coloring," also listed on the label.

You don't have to switch to whole wheat bread to increase your intake of whole grains. Many products on the market are made of a mixture of whole-grain flours and enriched flour. Try those listed below for variety in taste and texture, as well as a bonus of fiber and nutrients. Or, try substituting whole-grain flour for half the amount of white flour when you bake quick breads or cookies: bran muffins, cornbread, from whole, ground cornmeal, graham crackers, cracked wheat bread, oatmeal bread, pumpernickel bread, and rye bread.

The form of the food will affect its fiber content.
apple juice, 3/4 cup: 0.2 grams fiber
applesauce, 1/2 cup: 2.1 grams fiber
whole apple with peel: 3.6 grams fiber
(from USDA/HNIS Home and Garden Bulletin 232-4, April 1986)
(except for Dept. of the Army Memo)

CARBOHYDRATE,CONTINUED

Most foods are not labeled for total dietary fiber content. "Crude fiber" values, shown in many tables of the nutrient content of foods, do not include all types of dietary fiber. Some cereals now provide both total dietary fiber and crude fiber values on the label. Look for the "dietary fiber" content.

(from USDA/HNIS Home and Garden Bulletin 232-4, April 1986)

SIMPLE CARBOHYDRATES

What is sugar? To most people, "sugar" means white table sugar. In the Dietary Guidelines, "sugar" means all forms of caloric sweeteners, including white sugar, brown sugar, raw sugar, corn syrup, honey, and molasses.

Table sugar, or sucrose is the most commonly used sugar. Corn-based sweeteners are also used in large amounts in food processing.

Sugars are found naturally in some foods. Most fruits and some vegetables contain sugars such as glucose, fructose, and sucrose. Another sugar, lactose, is found in milk and milk products. Legumes and cereals contain small amounts of maltose. Besides sugars, these foods provide needed vitamins and minerals.

Sugars are added to foods during processing, preparation in the home, or at the table. These sweeteners, such as sucrose and corn syrups, are used to flavor and preserve foods. Soft drinks and sweetened beverages, sugars and sweets, and bakery products provide most of the sugar in the American diet.

Sugar supplies energy (calories) but few nutrients. If eating sugar keeps you from eating nutritious foods, you may not get enough vitamins and minerals. Amounts of sugar should be limited by everyone, but especially by individuals with low calorie needs.

The major problem that results from eating too much sugar is tooth decay. Sugar has been blamed for obesity, diabetes mellitus, heart disease, and hyperactive behavior in young children. However, scientific studies have not shown a direct link between sugar and any of these conditions, except tooth decay.

Obesity results from eating too many calories, regardless of their source. Cutting back on added sugars is a good way to reduce calories without reducing nutrients. Too much sugar has not been shown to cause diabetes or heart disease, but obesity is associated with an increased risk for both of these disorders.

(from USDA/HNIS Home and Garden Bulletin 232-5, April 1986)

CARBOHYDRATE, CONTINUED

Names of Sugars Used in Foods:
sugar sucrose lactose mannitol glucose honey corn syrup dextrose sorbitol fructose maltose maple syrup molasses high-fructose corn syrup

Rating Your Diet: How Sweet Is It?

How often do you:	Less than once per week	1 to 2 times per week	3 to 5 times per week	almost daily
1. Drink soft drinks, sweetened fruit drinks, punches or ades? (bug juice)	_____	_____	_____	_____
2. Choose sweet desserts and snacks? (cakes, pies, cookies, and, ice cream)	_____	_____	_____	_____
3. Use canned or frozen fruits packed in heavy syrup or add sugar to fresh fruit?	_____	_____	_____	_____
4. Eat candy?	_____	_____	_____	_____
5. Add sugar to coffee or tea?	_____	_____	_____	_____
6. Use jam, jelly, or honey on bread or rolls?	_____	_____	_____	_____

What about Artificial Sweeteners?

Saccharin and aspartame are artificial sweeteners commonly used in diet beverages, tabletop sweeteners, and other products to provide sweetness without unwanted calories. Aspartame (marketed commercially as "Nutrasweet (R)" is also used in gelatins, puddings, dessert toppings, and even cereals. Since saccharin does not have the same baking characteristics as sugar, special recipes must be used for preparing baked products using this sweetener. Aspartame decomposes with heat and is not appropriate for baking purposes. It is not necessary to use artificial sweeteners to avoid too much sugar in your diet.

The safety of artificial sweeteners as food additives is continuously under review by the Food and Drug dministration (FDA). For current information about specific food additives, contact the FDA Consumer Affairs Office in your region.

(from USDA/HNIS Home and Garden Bulletin 232-5, April 1986)

The following excerpt is from a June 1987 memo on dietetic foods from the Dept. of the Army, lead service for all the services on nutrition issues.

Nutritional standards for feeding are identified for the Navy by NAVMEDCOM. Foods currently available in the supply system allow menus to be planned within these standards. The items that have been introduced into the federal supply system such as low calorie salad dressing, low fat and skim milk, and unsweetened beverages help reduce total fat and calorie intake. These items are readily available in comparable commercial establishments (restaurants); whereas, generally low sodium or other "diet" products are not. The purchase of additional products solely for their claimed dietary properties (i.e., low sodium, low cholesterol, etc.,) is not necessary, nor recommended. This policy should not preclude the evaluation of foods which are competitively priced and may be lower in fat or sodium, but otherwise meet the specifications for similar items.

There is no need for dietary supplements or nutritionally complete single foods in military weight control programs. These programs are planned to encourage individuals to select from a wide variety of foods and thereby establish life-long eating patterns that the military patron can also use at home. END

Don't replace "real" food with dietetic foods. Dietetic foods also contain sugar and fat and may be only a few calories lower than the real food. Switching from "real" to "diet" does not teach the concept of portion control and choice.

<u>What can you do to eat less sugar?</u>

1. Gradually use less sugar and creamers (non-dairy creamers contain coconut oil and corn syrup) in your coffee.

2. Cut back on the soft drinks and bug juice. Remember, fruit juice in large amounts is no lower in calories.

3. Choose desserts and sweets less often. Eat a smaller portion.

4. If you have no fresh fruit, just choose canned fruit and don't eat the syrup.

5. Choose unsweetened cereals. Be careful with the "healthy" granola cereals. They are loaded with fruits and nuts covered with sugar, coconut, honey, and oil.

6. Choose plain donuts, not pastries. Use less jam, jelly.

7. Don't substitute honey for sugar.

8. Limit portions of low fat ice creams and frozen yogurts.

PROTEIN

PROTEIN- 1 gram provides four calories

COMPLETE - HIGHER FAT - Pork, Beef, Eggs, Cheese, whole milk products

LOWER FAT - shellfish, poultry, lowfat cheese, skim milk

INCOMPLETE - combinations of beans, lentils, nuts, seeds, grains (wheat, corn, oats, rice)

Protein is found both in animals and plants. All protein is made up of small building blocks called amino acids. There are approximately 20 amino acids. Our body can make all but 9 of these. The 9 that we can't make are called "essential amino acids". We must get them from food, and we need all 9 at one time so our body can function properly. The only foods that contain all 9 are animal foods (meat, milk, eggs, etc.). For this reason, animal foods are called "complete" proteins.

Plants (grains such as rice, corn, beans, wheat) each contain several but not all 9 "essential amino acids". If rice has 4 "essential amino acids" and beans have the other 5, eaten together they will provide all 9. This is how vegetarians can get the complete protein they need. The key is knowing what combinations of plant foods to eat together.

Contrary to belief, protein does not "build muscle", but it is used for tissue building and repair. A high protein diet puts excess stress on the kidneys to get rid of the waste when the body breaks down the protein. Increasing total calories <u>from all foods</u> combined with a weight lifting program builds muscle.

High protein-low carbohydrate diets for weight loss are very unhealthy. The initial weight loss is water, not fat. The kidneys are working extra hard to get rid of the protein wastes. High protein diets are often high in fat and salt, contributing to cholesterol and high blood pressure risks to an already overweight person at risk. Protein and carbohydrate each contain 4 calories per gram, so why eat fewer carbohydrates. High protein diets do not supply all the nutrients we need daily. Liquid protein diets came into vogue in the 1970's. Many of those liquids did not contain complete protein, were very low calorie, and resulted in several deaths. Liquid protein diets should only be consumed under close medical supervision by individuals who are very obese. However, the weight loss will not be maintained unless eating and exercise behaviors are addressed.

Rating Your Diet: How Much Protein Do You Eat?

How Often Do I Eat:	seldom to never	1 to 2 times per week	3 to 4 times per week	almost daily
1. Eggs	_____	_____	_____	_____
2. Cheese	_____	_____	_____	_____
3. Beef, pork	_____	_____	_____	_____
4. Chicken, turkey	_____	_____	_____	_____
5. Fish, seafood	_____	_____	_____	_____
6. Fried meats	_____	_____	_____	_____
7. Baked,broiled meats	_____	_____	_____	_____

Protein requirements range from 5 to 7 ounces per day. One piece of meat the size of your hand is 5 to 7 ounces! Most Americans eat several times that much in one day. Unless we're careful with choices, extra protein often means extra fat. Milk, cheese, and yogurt are good sources of protein and calcium, but beware of the high fat choices.

What can you eat to get adequate low fat protein?

1. Choose smaller servings of lower fat meats (chicken, fish, turkey) and pull off the skin or breading if fried.

2. Drink skim or low fat milk. 2 glasses per day will meet needs of the average adult except in pregnancy.

3. Choose non fat or low fat yogurt, preferably plain. Mixing drained fruit or a packet of sweetener will improve the taste of plain.

4. Limit nuts and seeds. It's difficult to eat just a small amount of these. Limit peanut butter to small amounts.

5. Decrease your serving sizes. For example, the old diet plate of hamburger and cottage cheese is really a high fat, high calorie meal. Have one entree or the other.

6. Alternate eggs with low fat milk/cereal for breakfasts. Pancakes with a little syrup for flavor and some low fat milk will provide protein. On the days you eat eggs, choose toast instead of bacon or sausage to provide starch, not more fat.

Milk is a good source of calcium. Calcium helps to build strong bones and teeth. Many older people who develop osteoporosis (brittle bones) have had very little calcium in their childhood and adult years. Some adults have a lactose intolerance. This means that their body does not have adequate lactase (made by the body) to break down the lactose (milk sugar) in the milk.

What if you can't or don't drink milk?

If you have trouble digesting milk, try to-

- drink a small amount at a time

- eat yogurt or cheese

- drink milk to which lactase (an enzyme which breaks down milk sugar-lactose) has been added or add it yourself. Lactase can be purchased at many drug stores.

If you don't drink milk, eat more of other foods that provide some calcium, such as-

- eat foods made with milk or cheese

- tofu, a soy product that is sometimes made with calcium sulfate. Check the label. One-half cup (4 ounces) of tofu made with calcium sulfate has about the same amount of calcium, protein, and fat as 1 cup whole milk.

- dark-green leafy vegetables (spinach, greens)

- tortillas made with cornmeal fortified with calcium

- canned or dried fish with edible bones, such as salmon

People who do not drink milk or eat milk products should check with a dietitian, nutritionist, or physician. They can help to plan ways to get enough calcium. This is very important for children, teens, pregnant and nursing women, and people at risk for osteoporosis.

(from USDA/HNIS Home and Garden Bulletin 232-1, April 1986)

ALCOHOL

ALCOHOL provides 7 calories per gram.

Alcoholic beverages are high in calories, but low in nutrients. People who want to lose weight, or maintain weight at a desirable level, should limit their intake of alcoholic beverages to make room for foods with added nutrients. The table below gives you an idea of how different alcoholic beverages compare in calories. Pay close attention to serving size when comparing items. A serving of beer is 12 fluid ounces- the size of the average bottle or can- while a serving of wine is only 5 fluid ounces- a little more than one-half cup. How big is <u>your</u> wine glass?

Drinks	Approximate Calories
<u>Beer</u>	
Regular	12 oz. can = 150
Light	12 oz. can = 95
<u>Liquor</u>	
Gin, Rum, Vodka, Whiskey (86 Proof) (higher proofs have more calories)	1 jigger = 105
Vermouth, sweet	1 jigger = 70
Vermouth, dry	1 jigger = 55
<u>Wine</u>	
Sweet	5 fluid oz. = 200
Dry table red	5 fluid oz. = 110
Dry table white	5 fluid oz. = 115
Cordials and Liqueurs	1 jigger = 145

If you're making a mixed drink, you have to count the calories in the mixer, too.

<u>Carbonated Drinks</u>	<u>Approximate Calories</u> for 6 fl. oz. (1/2 can)
fruit-flavored	= 90
cola	= 80
ginger ale	= 55
low-calorie soda (contains artificial sweeteners)	= 0 to 1
club soda	= 0
<u>Unsweetened Fruit and Vegetable Juices (6 oz. large juice glass)</u>	
pineapple	= 105
orange	= 90
grapefruit	= 75
tomato	= 35

(from USDA/HNIS Home and Garden Bulletin 232-7, April 1986)

Alcohol Quiz

True False

____ ____ 1. Heavy drinking may lead to malnutrition if alcoholic beverages replace foods that have more nutrients.

____ ____ 2. Cutting out or cutting back on alcoholic beverages is a nutritionally sound way to reduce calories.

____ ____ 3. Ounce for ounce, beer contains more calories than wine.

____ ____ 4. During pregnancy, it is safest not to drink alcoholic beverages.

____ ____ 5. Alcohol provides most of the calories in many mixed drinks.

Did You Know

Carbohydrates, as well as alcohol, provide calories in beer and wine. When cooking with wine, some of the alcohol (and some of the calories) may evaporate. But the calories provided by carbohydrates and by any alcohol that does not evaporate remain.

Studies show that many people who drink obtain 10 percent or more of their total calories from alcohol.

One-half of the traffic deaths that occur on U. S. highways are alcohol related.

(from USDA/HNIS Home and Garden Bulletin 232-7, April 1986)

(answers 1. T 2. T 3. F 4. T 5. F)

FAT

ALL TYPES OF FAT provide 9 calories per gram.

SATURATED- animal products (meats, eggs, cheese, milk, butter), some plant products (coconut and palm oils)

UNSATURATED- oils (safflower, sunflower, corn, olive, peanut, margarine (liquid oils are more unsaturated)

A certain amount of fat is necessary in the diet. Fat is used for energy and to transport certain vitamins. It gives the body a "full" feeling because it is digested more slowly. Fats are the highest source of calories (9 calories per gram). Americans eat up to 40 to 50% of their total daily calories as fat compared to a recommended level of 30% or less. Processed foods, fast foods, and increased restaurant eating have all contributed to this increase. The goal is to reduce total amount of fat we eat. The fat we do get should be more unsaturated than saturated fat.

Rating your diet: How Do You Score On Fat?

How Often Do I eat:	seldom or never	1 to 2 times per week	3 to 4 times per week	almost daily
1. Fried, deep-fat fried, or breaded foods?	____	_____	_____	_____
2. Fatty meats such as bacon, sausage, luncheon meats, and heavily marbled steaks and roasts?	____	_____	_____	_____
3. Whole milk, high-fat cheeses, and ice cream?	____	_____	_____	_____
4. High-fat desserts such as pies, pastries, and rich cakes?	____	_____	_____	_____
5. Rich sauces and gravies?	____	_____	_____	_____
6. Oily salad dressings and mayonnaise?	____	_____	_____	_____
7. Whipped cream, table cream, sour cream, cream cheese?	____	_____	_____	_____
8. Butter or margarine on vegetables, dinner rolls, toast?	____	_____	_____	_____

(USDA/HNIS Home and Garden Bulletin 232-3, April 1986)

Definition of Cholesterol- fat-like substance found in the body cells of humans and animals. Cholesterol is needed to form hormones, cell membranes, and other body substances. The body is able to make the cholesterol it needs for these functions. Cholesterol is not needed in the diet.

Fat, Cholesterol, and Your Health

For the U. S. population as a whole, it is sensible to reduce daily intake of total fat, saturated fat, and cholesterol. Why? High blood cholesterol levels increase the risk of heart disease and the blood cholesterol level of many Americans is undesirably high. Eating a diet high in fat- especially saturated fat and cholesterol causes elevated cholesterol levels in many people.

For many, high blood cholesterol levels can be reduced by eating diets lower in saturated fat and cholesterol. However, some people can eat diets high in total fat, saturated fat, and cholesterol and still maintain normal blood cholesterol. Others have high blood cholesterol levels even on low fat, low cholesterol diets. For adults, blood cholesterol is considered to be high if it measures more than 200 to 240 milligrams of cholesterol per deciliter of blood, depending on age.

Reducing lietary fat is an especially good idea for those limiting calories. The fat in foods provides many calories but few vitamins and minerals. So, decreased fat intake results in fewer calories without a reduction in most nutrients.

Fat and Cholesterol...True or False? (answers on page 45)

	True	False
1. Fruits, vegetables, and most breads and cereals have little fat.	____	____
2. Fruits contain cholesterol.	____	____
3. Chicken without skin contains less fat than chicken with skin.	____	____
4. Cholesterol is found in both the lean and fat of meat.	____	____
5. Skim milk has almost no fat.	____	____
6. Cholesterol is found in both egg yolk and white.	____	____
7. Mozzarella cheese (part skim milk) has less fat than natural cheddar cheese.	____	____
8. Chicken is a better choice than lean beef or pork to moderate dietary cholesterol.	____	____

(from USDA/HNIS Home and Garden Bulletin 232-3, Apr 86)

Trading Off

"Avoid too much fat and cholesterol" doesn't mean "never eat cheese" because it contains fat or "never eat egg yolks" because they contain cholesterol. It's the total amount of fat, saturated fat, and cholesterol in your diet that matters. While you may want to moderate your intake of some foods, you needn't eliminate them from your diet completely. Instead, balance high-fat foods with other foods that contain less fat and cholesterol.

The "tradeoffs" below are equations that show approximately how much fat is in some typical foods. Foods on each side of the equation provide about the same amounts of vitamins and minerals. Use these tradeoff equations along with the fat equivalents shown in the box below to help you moderate fat. For example, if you prefer to drink whole milk rather than skim, you can moderate your fat intake by omitting 2 teaspoons of fat elsewhere in your day's meals. For example, you might balance the fat in a cup of whole milk by omitting the sour cream on your baked potato or reducing the dressing on your salad.

(Think of 1 tsp. as about the same as 1 pat of butter/margarine)

1 tsp. margarine, butter, or oil = each amount in the box below.

---

5 tsp. sour cream, 3 tsp. mayo type dressing, 1 tsp. mayonnaise
5 tsp. whipped cream, 3 tsp. cream cheese, 2 tsp. imitation marg.
4 tsp. light (table) cream, 2 tsp. Italian/French dressing

Meat Tradeoffs*

2 ounces bologna** = 1 ounce (oz.) lean meat, fish, poultry + 3 tsp. fat

2 tablespoons peanut butter = 1 oz. lean meat, fish, poultry + 3 tsp. fat

1/4 cup seeds = 1 ounce lean meat, fish, or poultry + 4 tsp. fat

1/3 cup nuts = 1 ounce lean meat, fish, poultry + 5 tsp. fat

*Tradeoffs are approximate based on the calories and nutrients in these types of foods. Individual foods vary.

You can also tradeoff according to food preparation method. For example:

18 potato chips** = 1 medium boiled potato + 3 tsp. fat

10 french fries** = 1 medium boiled potato + 2 tsp. fat

** These foods are usually high in sodium.
(from USDA/HNIS Home and Garden Bulletin 232-3, April 1986)

Milk Tradeoffs* (remember 1 tsp. fat is like 1 pat butter/marg.)

1 cup whole milk = 1 cup low fat milk + 2 tsp. fat

1 cup 2% low fat milk = 1 cup skim milk + 1 tsp. fat
(1 cup skim milk has no fat)

1 cup (8 ounces) low fat fruited yogurt = 1 cup skim milk + 1 tsp. fat + 7 teaspoons sugar

1 cup (8 ounces) plain low fat yogurt = 1 cup skim milk + 1 tsp. fat

1 cup plain regular yogurt = 1 cup skim milk + 2 tsp. fat

2 ounces process American cheese** = 1 cup skim milk + 4 tsp. fat

(almost 2 thin slices)

1/2 cup ice cream = 1/3 cup skim milk + 2 tsp. fat + 3 tsp. sugar

*, ** (see previous page)

answers to quiz on page 43 = 1.T, 2.F, 3.T, 4.T, 5.T, 6.F, 7.T, 8.F

(from USDA/HNIS Home and Garden Bulletin 232-1 and 232-3)

Hidden Fat

Many foods contain hidden fat used in preparation. For example, a chicken pot pie includes fat used in the crust, butter or margarine in the filling, and milk and/or cream in the sauce. One pie may contain over 600 calories, half from fat.

The word "healthy" does not always mean the food is a good choice, especially for someone on a weight reduction program. Many of these products are high in fat, especially cereals, muffins, and granola snacks.

A "healthy" granola cereal may contain nuts, seeds, and coconut or other oil. Typical total calories for a 1 cup serving is 500 calories compared to 1 cup of corn flakes averaging 110 calories.

How to Avoid Too Much Fat and Cholesterol

1. Fruits and Vegetables
   - Don't let your salad dressing take over your salad. That's where the fat's at. By the way, the bacon bits, nuts, seeds, croutons, cheese also provide fat calories.

   - Avoid deep fried vegetables, and sauces. Ask for plain vegetables. Don't add butter or margarine at the table.

2. Breads, Cereals, and Baked Products
   - Choose plain cereals which are unsweetened. The sweetened, "healthy" cereals tend to be higher in sugar, fat, and calories.

   - Choose plain doughnuts, bagels, toast instead of pastries, heavy muffins. Use very little butter or margarine.

   - Don't eat baked goods routinely for desserts. Eat smaller portions. Choose fresh or canned fruit instead.

3. Milk and Milk Products
   - Drink low fat or skim milk. Try mixing low fat and whole to help acquire the taste for low fat milk.

   - Use small amounts of sour cream and cream cheese.

   - Eat low fat yogurt instead of regular yogurt.

   - Limit cheese. If making a sandwich choose meat or cheese or small amount of each.

4. Meat and Eggs
   - Don't eat eggs every day for breakfast. Alternate with cereal, pancakes, waffles, and yogurt.

   - Choose one egg servings, not doubles or omelets.

   - Choose lean meat (fish, chicken, turkey) and pull off skin and breading if fried.

   - If your choice is between beef and a casserole, the beef may be lower in fat than the casserole (if it has a creamy sauce, cheese, meat).

   - Don't eat large servings of meat. One medium slice is adequate. Leave the fat on your plate.

   - Avoid organ meats such as liver. These are high in fat and cholesterol.

5. Fats and Oils
   - Cook without added fat
   - Use less fat at the table. Margarine does not have fewer calories than butter.
   - Use soft margarine rather than hard margarine.
   - Use oil rather than shortening or lard in baked products.

6. Snacks
   - Limit potato chips, corn curls, cheese puffs, pork rinds, tortilla chips, nuts, crackers, and popcorn popped in oil.
   - Pretzels and unbuttered air popped popcorn are lower in fat and calories.

Remember that many high-fat meats, entrees, and snacks are also very salty. Salt may be used in processing (cheese), curing (lunch meats), coating (potato chips), seasoning (garlic salt, soy sauce, MSG) in casseroles and soups. Salt does not contain calories, but it is important to remember that some people's bodies tend to retain water after a salty meal. This may reflect a temporary water weight gain on the scale. (Another reason against daily weigh-ins). Drinking more fluid will help flush the salt out.

EXERCISE AND CALORIES

Calories are simply a measure of energy. Calories measure the energy available from food and the energy cost to live and perform various other physical demands. Calories alone hold no magic. The magic of weight control is a balancing act of caloric intake and exercise expenditure. So whether the goal is weight loss, gain, or maintenance, the key is calculating your balance point where the scale tips in the direction you desire. In the long run, just as small snacks can add up to extra pounds, small increases in activity can add up to give you an edge in combating those extra pounds.

The number of calories you burn in an activity depends on your body weight and the intensity of the exercise. A lighter weight woman will burn fewer calories than a heavier man doing the same activity. Many charts list the calories burned for certain activities. This allows the individual to calculate the amount of extra calories burned in exercise. Charts may tend to discourage dieters because certain activities (for example walking) do not consume many calories. If it seems apparent that there are no pluses, think again. Exercise increases the metabolic rate (how fast your body burns calories), and there is evidence to indicate that it remains elevated for several hours following the exercise session.

The next two pages may be used as an exercise diary for beginning programs. An abbreviated chart showing calories burned for ten minutes of activity can be used to calculate total calories burned. Remember this is activity beyond what you have been doing at present. Speed is not important. What is important is the length of time and routine habits established. Choose an activity you enjoy and can perform within your given lifestyle on a routine basis.

Refer to the Navy Physical Conditioning Guide for beginning your physical conditioning program.

CALORIES BURNED FOR TEN MINUTES OF ACTIVITY

	Body Weight in Pounds		
	125	175	250
Walking Downstairs	56	78	111
Walking Upstairs	146	202	288
Walking 2 m.p.h.	29	40	58
Walking 4 m.p.h.	52	72	102
Running 5.5 m.p.h.	90	125	178
Running 7 m.p.h.	118	164	232
Running 12 m.p.h.	164	228	326
Cycling 5.5 m.p.h.	42	58	83
Cycling 13 m.p.h.	89	124	178
Swimming backstroke	32	45	64
Swimming crawl	40	56	80
Racquetball	75	104	144

from Brownell, K.
The LEARN Program for Weight Control 1986

Name_____ Date_____

WEEKLY EXERCISE DIARY

DATE	TYPE OF EXERCISE	DURATION (mins)	CALORIES per min	CALORIES USED
MON				
TUE				
WED				
THUR				
FRI				
SAT				
SUN				
			GRAND TOTAL OF ADDITIONAL CALORIES USED THIS WEEK	

GRAND TOTAL = DAILY AVERAGE INCREASE OF CALORIES USED

_____ = ☐
7

FAD DIETS (DIETS COME AND DIETS GO)

Millions of dollars are spent every year on the latest diet books, pills, and equipment. Unfortunately, diets begin and end rather quickly. Our wallets tend to get thinner than our bodies. People who diet frequently find that it becomes increasingly difficult because their bodies become experts at conserving energy and storing fat.

Most diets will work regardless of the kind of food consumed if they are lower in calories than one needs to maintain weight. For example, the egg and grapefruit diet may work as well the cottage cheese and "rabbit food" diet if both are equally low in calories. However, new research shows that obese people and even men and women react differently to fat. Overweight individuals consume more calories from fat than their normal weight counterparts. In fact, fat not sugar is the main contributor to obesity. Of course, many foods (desserts) contain both. Women tend to deposit even more calories as fat from a high fat diet than men. Many of the traditional weight loss diets and diet plates (egg/grapefruit, hamburger/cottage cheese, high protein-low carbohydrate diets) are very high fat.

Very low calorie diets are always popular. After all, let's get this diet over with so you can go back to junk food! Unfortunately your body adapts to very low calorie diets rather quickly by burning calories at a slower rate. When you begin to eat more, your body does not adjust back as rapidly. The weight you quickly lost was water and muscle. The weight you gain back is fat. Why the difference? Very low calorie diets cause your body to use tissue other than fat (muscle) as a source of energy. But what if you are on a low calorie protein diet? Does this make a difference? Not really. All calories taken in will be converted to that source which is in demand by your body. For example, your brain gets the "first choice" so to speak of what you eat. The brain uses only glucose (a kind of sugar) to function. Your body has the ability to take the food you eat and convert it through a long process into what it needs most. If you are still short on protein, your body takes from its protein stores (your muscle). Following a very low calorie diet with no monitoring and trying to maintain a normal lifestyle, especially with some of the Navy's physically demanding jobs becomes difficult, counter productive and not to mention, unsafe.

Some diets advocate certain combinations of foods or pills. Pills including grapefruit, Vitamin B6-kelp-vinegar, and "fat burners" promise fat dissolving properties. <u>There is no food or pill that breaks up or burns fat.</u> Eliminating food groups (for example all dairy products or carbohydrates) is not a healthy approach. Each food group provides different nutrients that we need daily. Many women do not meet their daily allowances for calcium from dairy products. Many adults do not meet the needs for Vitamins A and C from fruits and vegetables. However, the dairy and carbohydrate groups contain many low calorie choices.

FAD DIETS, CONTINUED

High protein diets are popular with Americans, who are primarily meat eaters. In fact, the largest percentage of the fat calories we consume is from the meat we eat. High protein diets cause the kidneys to work harder to get rid of the waste products. The end result is an initial temporary water loss, which looks great on a scale. The protein in these diets usually includes large amounts of meats, cheese, and eggs, many choices high in fat and salt. Since both protein and carbohydrate contain only 4 calories per gram compared to 7 calories per gram for fat, the better choice would be a diet higher in complex carbohydrates (starches, fruit, vegetables).

Diets that accompany over the counter diet pills may or may not be healthy depending on the variety, serving sizes, and total calories. It is best to evaluate these diets using a basic four food group pattern. Remember, it is the diet, not the pill that will promote weight loss.

Commercial weight loss clinics do not necessarily offer healthy programs. Their "nutritionist" may be someone who the clinic has taught to counsel patients in that specific diet developed by the clinic. Some clinics require their patients to purchase special foods, some very high in fat and salt. Others promise money back for maintaining weight loss. The money made is a tradeoff between enough successes to bring in clients coupled with the hope that many people will not keep the weight off or will quit the program. Effective programs that teach nutrition, exercise, and behavior change from the outset and focus on individual responsibility will have more long term success. Some people need to spend a fortune to ensure their own dedication to the program. Others like the approach of prepackaged food because they need to turn over control of shopping or cooking to someone else for a while. Everyone has different limitations, problems, and a price they're willing to pay. The diet centers and clinics are always very willing to take your money. If that is your intended choice, study the program, ask some of the questions below, and make sure you know the total cost before you sign.

1. Does the diet emphasize <u>food habits</u> <u>and</u> <u>exercise</u> as long term goals for permanent weight loss?

2. Does the diet include foods from all four food groups?

3. Are the foods easy to find and prepare?

4. Can the family eat the same foods the dieter eats?

5. Is the diet safe, realistic, easy to follow?

6. Does the diet advocate quick weight loss (less than 1500 calories for men and 1000-1200 calories for women)?

7. Does the diet require special pills or liquid formulas?

8. Does the diet keep "forbidden" foods to a minimum?

9. Does the diet suggest obtaining medical advice if needed before starting?

10. Is there a maintenance plan? Is the plan introduced at least a few weeks before the client reaches goal weight?

11. What is the total cost? (Including special foods)

Remember, the key to any permanent weight loss is lifestyle change in eating and exercise habits. A slower weight loss is more likely to be maintained. Fad diets are exactly as the term implies - a passing fad. No real long term changes are made. They are at best only a temporary solution. If you are at the local book store lost in the shelves of diet books or thinking of spending a thousand dollars on a diet program, you are not alone. Making it to the best seller list or television talk show is no guarantee that a diet is safe. In this case, it really pays to be aware. After all, dieting is no fun. Pick a program that is safe, meets your needs, and one you can live with for a long time.

Name_____ Date_____

MID-PROGRAM PERSONAL INVENTORY

Use this questionnaire as a checkup on the lifestyle changes you have made. Compare answers with your initial inventory. You may find the need to revise goals, work on new lifestyle changes, or refocus on some more difficult issues.

EXERCISE HISTORY

1. My current job description is largely sedentary. yes___ no___
2. My supervisor provides time to exercise during the work day. yes___ no___
3. I exercise during my work day. yes___ no___
4. I exercise before or after my work day. yes___ no___

SMOKING AND ALCOHOL HISTORY

5. I currently smoke. yes___ no___
6. If I quit smoking since starting this program, how long did I smoke. ____years
7. If I quit, when did I quit? (Provide date) _____
8. I have gained weight after I quit. yes___ no___
9. How much alcohol I drink per week? ____cans beer___shots ____ glasses wine

FOOD PATTERN HISTORY

yes	no	sometimes	Check the column that applies.
10.__	__	_____	I pre-plan most meals.
11.__	__	_____	I consciously choose all foods picking some foods I really like.
12.__	__	_____	I do not limit myself to diet foods when on a diet.
13.__	__	_____	I keep "fattening" or "bad" foods out of the house when dieting.
14.__	__	_____	I have replaced some "bad" foods with healthier foods.
15.__	__	_____	I budget my calories, saving some for special events or foods.
16.__	__	_____	I eat until satisfied, not stuffed.
17.__	__	_____	I try not to limit myself to 3 meals per day if that is not my preferred lifestyle.
18.__	__	_____	I take smaller portions of foods.
19.__	__	_____	I try to leave some food on my plate even if it's only a bite.

MID-PROGRAM INVENTORY, CONTINUED

20.__ __ _____ I keep serving dishes out of sight while eating.
21.__ __ _____ I eat and taste while preparing meals.
22.__ __ _____ I eat while clearing away leftovers.
23.__ __ _____ I try not to skip meals, especially breakfast and lunch.
24.__ __ _____ I eat breakfast.
25.__ __ _____ I am a night snacker.
26.__ __ _____ I eat between meals.
27.__ __ _____ I currently count calories.

28. I eat more when I am: (check all that apply)
depressed ___ stressed___ angry___ alone___ happy___
with others___

29. I eat my meals at: (Check those that apply)

	Breakfast	Lunch	Dinner
fast food or restaurant	_____	_____	_____
ship/shore mess	_____	_____	_____
home	_____	_____	_____

FOOD HABITS

Check Your Diet For Starch and Fiber

How often do you eat:	seldom never	1 to 2 times per week	3 to 4 times per week	almost daily
1. Several servings of bread, cereal, pasta, rice	_____	_____	_____	_____
2. Starchy vegetables like potatoes, peas, corn, beans, dishes made with dry beans or peas.	_____	_____	_____	_____
3. Whole-grain breads/cereals	_____	_____	_____	_____
4. Several servings of vegetables	_____	_____	_____	_____
5. Whole fruit with skins and/or seeds (berries, apples, pears, etc.)	_____	_____	_____	_____

(from USDA/HNIS Home and Garden Bulletin 232-4, April 1986)

Rating Your Diet: How Sweet Is It?

How often do you:	Less than once per week	1 to 2 times per week	3 to 5 times per week	almost daily
1. Drink soft drinks, sweetened fruit drinks, punches or ades? (bug juice)	_____	_____	_____	_____
2. Choose sweet desserts and snacks? (cakes, pies, cookies, and, ice cream)	_____	_____	_____	_____
3. Use canned or frozen fruits packed in heavy syrup or add sugar to fresh fruit?	_____	_____	_____	_____
4. Eat candy?	_____	_____	_____	_____
5. Add sugar to coffee or tea?	_____	_____	_____	_____
6. Use jam, jelly, or honey on bread or rolls?	_____	_____	_____	_____

(from USDA/HNIS Home and Garden Bulletin 232-5, April 1986)

Rating Your Diet: How Much Protein Do You Eat?

How Often Do I Eat:	seldom to never	1 to 2 times per week	3 to 4 times per week	almost daily
1. Eggs	_____	_____	_____	_____
2. Cheese	_____	_____	_____	_____
3. Beef, pork	_____	_____	_____	_____
4. Chicken, turkey	_____	_____	_____	_____
5. Fish, seafood	_____	_____	_____	_____
6. Fried meats	_____	_____	_____	_____
7. Baked, broiled meats	_____	_____	_____	_____

MID-PROGRAM INVENTORY, CONTINUED

Rating your diet: How Do You Score On Fat?

How Often Do I eat:	seldom or never	1 to 2 times per week	3 to 4 times per week	almost daily
1. Fried, deep-fat fried, or breaded foods?	_____	_____	_____	_____
2. Fatty meats such as bacon, sausage, luncheon meats, and heavily marbled steaks and roasts?	_____	_____	_____	_____
3. Whole milk, high-fat cheeses, and ice cream?	_____	_____	_____	_____
4. High-fat desserts such as pies, pastries, and rich cakes?	_____	_____	_____	_____
5. Rich sauces and gravies?	_____	_____	_____	_____
6. Oily salad dressings and mayonnaise?	_____	_____	_____	_____
7. Whipped cream, table cream, sour cream, cream cheese?	_____	_____	_____	_____
8. Butter or margarine on vegetables, dinner rolls, toast?	_____	_____	_____	_____

(USDA/HNIS Home and Garden Bulletin 232-3, April 1986)

WEIGHT AND PERSONAL EVALUATION

1. Pounds lost since beginning this program. _____ lbs.
2. Percent body fat lost since beginning this program. _____ %
3. I am attending a support group. yes____ no____
4. Two most significant lifestyle changes I am working on are:
   1. _____
   2. _____
5. Two lifestyle changes that I still need to focus on are:
   1. _____
   2. _____

FAST FOODS- SHOULD YOU GIVE THEM UP?

Fast foods are here to stay. Many military bases now have a Burger King or McDonalds. Dieters need not avoid their favorite fast food place, but just increase their awareness regarding their choices. Most fast foods are higher in fat and salt, but occasional meals keeping within calorie limits need not be devastating. Many establishments have added salad bars with low cal dressings, juice, and low fat milk to provide healthy reduced calorie choices for their patrons. The calorie lists provided in this guide can assist you in making choices. Below are a few suggestions to assist in planning your meal followed by sample meals.

1. Order diet or lower calories beverages. These include diet sodas, orange juice, and low fat or skim milk.

2. Order regular or small size burgers, not "double", "whopper", or "deluxe". The regular may be 300 to 400 calories less, and the difference is usually due to fat in the meat, cheese, or special sauce.

3. Hold salad dressing/mayo on burgers. One tablespoon of mayo can add an extra 135 fat calories.

4. Limit the amount of fried items. (This is probably the ultimate test!). Here's where the tradeoffs enter. If you really want fries, then get a regular burger or salad with the fries instead of another fried food (fish, chicken pattie, etc.).

5. Order separate items instead of combination dinners. Good example- the seafood platter, probably all fried. If you really want the fish, order it separately and complement it with non-fried items.

6. With salad bars, limit the creamy dressings. Stick with fresh vegetables and small portions of beans/crackers. Avoid mayo or gelatin salads. Don't overload with cottage cheese, bacon bits, shredded cheese, canned fruit in syrup, nuts and seeds. If you order over-the-counter salads, skip the extras. Just because it comes with oriental noodles and croutons doesn't mean you have to take advantage! If you don't accept them, they won't tempt you. Remember, the "loaded" salad may have more calories and fat than the deluxe hamburger and fries.

7. Both the combination breakfasts and the sandwiches contain meat (eggs, bacon, sausage), starch (muffin, biscuit, hash browns, toast), and plenty of fat (to fry the meats, on the bread item, or in the meat itself). Average calorie range is about 400. Juice and milk can raise the total to around 600. If your total calorie requirement is 1500 per day (men) or 1000 per day (women), you will need to either adjust your lunch and dinner or reduce the entree at breakfast to provide less meat and fat.

FAST FOODS, CONTINUED

The following are examples of high and low calorie choices at fast food establishments. Refer to the calorie sheets. A general guideline is to try and limit the total to 500-600 calories for a lunch. Plan what you want before you get inside. We all know what these establishments sell, so the menu should not surprise anyone! Try to order at least one thing you really want. Remember, you are trying to change your habits, lose weight, and continue to enjoy foods you like.

McDonalds

(1)		(2)		(3)	
Hamburger	260	Chef Salad	226	Big Mac	570
Small(reg)Fries	220	Lite Dressing	50	Reg Fries	220
Coffee/Diet Soda	0	Low Fat Milk	120	Choc Shake	380
TOTAL	480	TOTAL	396	TOTAL	1170

(4)		(5)		(6)	
Hotcakes	260	Biscuit, with		Eggs	180
Butter/Syrup	240	Sausage and Egg	590	Juice	80
Sausage	210	Hash Browns	145	Muffin	190
Juice	80	Juice	80	TOTAL	450
TOTAL	790	TOTAL	815		

The above six meals are meant to show variety. Not all combinations provide foods from each of the four food groups (fruit/vegetable, breads/cereal/grains, meat, milk/dairy). Can you find those that do contain each food group? Try to think of ingredients in the food, etc. pancakes contain milk. (Answers at the bottom of the page).

The menu below shows how the entree can reduce total calories.

Kentucky Fried Chicken	
Chicken sandwich	436
Fries	184
Coleslaw	121
TOTAL	741

Kentucky Fried Chicken	
1 orig. Breast	199
1 Fries	184
1 Coleslaw	121
TOTAL	504

Answers: Only (3) and (4), but they are weak.
(1) is missing fruit/vegetable and milk/dairy groups
(2) is missing bread/cereal/grain and meat groups
(3) has all groups, but tomato slice and lettuce is very small serving of fruit/vegetable and milk/dairy group milkshake is very high in sugar and fat.
(4) has all groups, but milk in pancakes is probably not adequate serving from milk/dairy group
(5) is missing milk/dairy group
(6) is missing milk/dairy group

You can (1) alter the beverages to complete the meals or (2) try to get adequate servings of the missing groups in other meals.

DINING OUT

Trips to restaurants, parties, and eating at friends' homes can be disastrous. Many dieters avoid these situations, but coping skills can never be learned by not facing problems. What is important is dealing with your feelings before the event, the event itself, and the aftermath. It is best to have a game plan as not only the food but the people may influence your decision making.

Types of Restaurants

1. Try to avoid "all you can eat" and buffet or smorgasbord type restaurants. This is an open invitation to stuff yourself. After all, you paid for it, so you need to get your money's worth, right? No!

2. Order a la carte rather than the full dinner. This way you get only what you really want to eat and can use extra calories for later.

3. Avoid pre-dinner drinks and bread baskets. Order diet drinks, sparkling water (club soda), coffee/tea. If the bread basket will temp you, ask the waitress to take it away or better yet, not to bring it at all.

4. Order salad with dressing on the side. If no low calorie dressing is available ask for Italian (vinegar/oil) or French. These are lower in calories.

5. Avoid desserts unless you have planned it in your calorie allowance. If you have your mind set on a favorite dessert, plan your meal to be lower in calories in order to have the dessert. Remember, dieting and weight maintenance does not mean giving up your favorites, but learning to cope with and enjoy special treats.

6. Ethnic restaurants

   Chinese
   - avoid deep fried items and entrees with heavy sauces
   - order separate items rather than combination plates
   - avoid dishes like Egg Foo Young if you are also watching cholesterol
   - ask that MSG not be added if you are watching your salt intake
   - order plain rice, which is low in fat and calories and is a good filler

   Mexican
   - Tostadas and tacos are lower in calories
   - order one item, not the combo plate
   - order beans or rice
   - don't load up on tortilla chips before your meal
   - order chicken more than beef
   - salsa is lower in calories and fat than guacamole and sour cream

DINING OUT, CONTINUED

Italian - order tomato or clam sauces rather than meat sauce
- order plain salad not antipasto
- order plain bread not buttered garlic bread
- order thin crust pizza with cheese and vegetables
- pastas are great as long as they are not filled with excessive meat, cheese and topped with cream sauces- spaghetti is a good choice

French - beware of the sauces (high in fat, eggs, cream)
- wine sauces may be lower in fat and calories
- "Nouvelle" does not always mean low calorie
- order steamed entrees and vegetables
- ask for a small amount of sauce on the side

7. Steakhouses
   - order smaller size steaks
   - have bread or potato (order baked rather than fried) limit butter and sour cream
   - eat fresh vegetables from salad bar with diet dressing
   - have the salad bar instead of the cole slaw or potato salad
   - limit alcohol intake

8. Health Food Restaurants (healthy does not mean low calorie)
   - avoid dishes with many nuts and seeds, which are high in fat
   - dishes made with excess oil and dairy products (milk, cream, cheese) may be high fat and calorie
   - whole grain breads, muffins, and desserts may be high fat and calories (nuts, seeds, honey, oils)
   - avoid oily and creamy salad dressings
   - try steamed vegetables and lightly stir fried entrees without sauces
   - order fruits for dessert without cream or syrup
   - fruit juices without added sugar are good in small to medium size (tomato is a low calorie choice)

Learn the terms on a menu.

1. These are a few terms which may mean fat has been added.
   "buttered" "sauteed" "creamed" "au gratin"
   "marinated in oil" "crispy fried" "braised"

2. These terms may mean less or no added fat.
   "steamed" "broiled" "poached" "in its own juice"
   broiled dry- no oil is brushed on the meat or in the pan

3. Some other hints.
   Stir fried does not always mean low fat.
   Casseroles and mixed dishes often have hidden fat.

EATING IN THE GENERAL MESS

Eating in the General Mess did not cause you to be overweight. Food Service personnel do not control what you select to eat. Lower calorie options are available, and portion control can allow you to eat some of your favorite high calorie foods. The NAVFSSO Healthy Food Choices Reduced Calorie Meal Plan provides detailed guidelines. This is a short checklist.

1. Breakfast - choose cereal and milk or eggs and toast. Do not choose more than one meat item. Be careful with syrups and butter. If you eat eggs, choose just one egg serving and fill in with toast or unsweetened cereal.

2. Beverages - Black tea or coffee, diet sodas, and water are calorie free. Choose low fat/skim milk if available. Reduce intake of sweetened fruit flavored drink (bug juices), sodas, and fruit juices. Use extra ice in your glass or smaller glasses for higher calorie beverages.

3. Be careful at the salad bar. Opt for the fresh vegetables. Avoid the gelatin and mayonnaise-type salads. Shredded cheeses, avocado, bacon bits, seeds, nuts, croutons can add up quickly so use sparingly.

4. Use diet dressing. If none is available, use French or Italian as they are lower in calories than thick creamy dressings.

5. If you choose a sandwich, pick bread rather than large buns. Hold the mayonnaise and/or salad dressings, use mustard. Choose turkey or beef over lunch meats if available.

6. Soups can accompany salads, but remember that creamy soups and thick stews will provide many more calories than broth based soups (chicken noodle). If you choose Navy Bean Soup and cornbread, then have a salad and fruit instead of baked goods for dessert.

7. Balance your meal. Most casserole items contain a starch serving. Choose a low cal or unbuttered vegetable as a side dish.

8. Select a non fried entree, vegetable, and potato (starch) or bread if available. If meat is breaded or chicken has crispy skin, take off breading and discard it. Ask for small portions.

9. Ask the server to leave off the gravy or sauce.

10. Use very little or no butter/margarine on breads and vegetables. Use little honey/syrup on breakfast items.

11. Desserts - choose fruits, low fat yogurt, or very small portions of desserts and baked goods.

SELF TALK

Self talk is the constant "chatter" or thought that races through our minds during our waking moments. This self talk can be positive or negative. The positive self talk builds, coaches, and reassures. The negative self talk criticizes, demoralizes, and prevents success.

Here are some examples of positive and negative self talk that apply to weight loss and lifestyle change.

Negative Thoughts

1. I'm not losing weight fast enough. I need to eat less.

2. I hate running. I'm too slow. It doesn't help me lose weight if I run slow.

3. I can't eat fast food. It will make me go off my diet.

Positive Thoughts

1. I've tried starving in the past to lose weight. It didn't work. I regained all the weight.

2. Running fast is not important for weight loss. Running at a comfortable pace will allow me to run longer, enjoy the run, and still assist in losing weight.

3. I can eat fast food if I plan what I eat. I like to eat there sometimes, and to say that I will never go there is setting myself up for something that I will never be able to stick to.

Three negative thoughts I often have that are connected with my inability to reduce my weight/body fat.

1. _____

_____

2. _____

_____

3. _____

_____

SELF TALK, CONTINUED

Turn each thought into a positive.

1._____

_____

2._____

_____

3._____

_____

Use self talk to help handle any situation that involves stress. Positive thinking before, during, and after the event can help get through situations by making the appropriate choices.

Example- My coworkers asked me to eat lunch with them at the local fast food restaurant. I already brought my "rabbit food lunch" to work. What should I do.

1. My negative thoughts are that last week I went there for lunch and ate my entire calorie allotment for the day. I thought I could just skip dinner that evening, which I didn't do. I know the same thing will happen again.

2. My positive thoughts are that my friends have included me in their lunch plans and that I really want to go with them. I can keep my bag lunch for tomorrow. What happened last week does not mean it will happen again. I will give it my best try. I know what I want to eat before I go. I will deal with just this situation and not all the past times I have failed.

Deal with events in three stages: before, during, and after. Use the above example.

1. Before- I plan what I want to eat. I decide that the past does not dictate what I will do today.

2. During- I choose to stay with my plan or eat a high calorie meal. Both are my own conscious decisions. If I decide not to follow my plan, I will need to deal with the consequences of my actions.

3. After- This depends on what choice I made. If I followed my original plan, I feel good because I carried out my original decision this time. I will deal with each decision as it arises. If I ate the high calorie meal, I need to think about why I made that choice, and then get on with other things. That was not my last meal or my last chance. I cannot spend excessive time worrying about why I couldn't carry out my original plan.

SELF TALK, CONTINUED

Think of a recent situation you encountered that involved your current weight/fat loss program. It might deal with eating, exercise, going to support group, etc. (Any situation that involved making a decision to do or not to do!)

Write down any negative thoughts (self talk) about the situation.

Change these negatives to positives.

Write thoughts about before the situation (both negative and positive).

Write thoughts during the situation. What was the final choice.

Write thoughts after the situation. How did the choice made affect thoughts after the fact?

How did the choice, if it turned out to be different from the original plan, affect later situations and thoughts that day?

SMART THINKING

As you review the thought patterns below, note how each can hinder successful weight loss or any lifestyle change.

A. Conscious/awareness thinking- taking charge of your eating

1. Commitment- review the benefits and costs.

2. Techniques- are they working; if not, why not?

3. Effort- are you really putting forth what's needed?

4. Motivation- what is your main reason?

B. Concentration on failures, avoiding social situations

1. Automatic failure- do you set your self up to fail?

   - past failures do not need constitute future failure.

   - do you stay home to avoid dealing with decisions?

2. Meaning of food- is the food or the situation more important?

C. Rational and irrational beliefs

1. Perfection and control

   - overcontrol produces more compulsive behavior.

   - compulsive behavior leads to lack of control.

2. Failure at not achieving perfection

   - perfection is impossible to maintain.

   - perfection varies among individuals.

3. Dependency at blaming others for failure

   - others can influence, but the choice is ours alone.

   - excuses will only delay, not provide results.

4. Flexibility

   - "life" does not flow smoothly.

   - responding to good <u>and</u> bad times can be stressful.

   - use your mind, not food to get through situations.

5. Responsibility- take the lead

   - don't depend on others to do your work for you, but

   - ask for assistance when you need it.

6. Fairness- life is not always fair

   - sometimes situations make it really difficult to accomplish a goal.

   - you might not be motivated to begin a weight reduction program when you are required.

7. Values- yours versus others

   - losing weight may not be important to you.

   - you may value food differently.

8. Expectations- be realistic

   - you are your best advocate and worst critic.

   - make goals, but review and revise frequently.

SMART THINKING, CONTINUED

Answer the questions as they relate to this program. Answer "always" "most of the time" or "never"

Provide comments as needed. Pay special attention to the "always" and "never" answers. Are the "always" answers realistic? What can you do to improve the "nevers"?

A. I am conscious/aware of what I eat. _____

1. I feel that I am committed to my program. _____

2. My program techniques work. _____

3. I put forth enough effort into my program. _____

4. My motivation is myself. _____

My comments on these answers_____

_____

_____

_____

_____

B. I concentrate on the present, not on failures. _____

1. I avoid social situations involving food. _____

2. I set myself up to fail. _____

3. Eating is more important the social activity. _____

My comments on these answers_____

_____

_____

_____

_____

SMART THINKING, CONTINUED

C. I have irrational beliefs regarding my program. _____

1. I try to maintain complete control for my actions. _____

2. I feel my actions are at times compulsive. _____

3. I feel my compulsive behavior leads at times to lack of control. _____

My comments on these answers._____

_____

_____

_____

_____

4. I constantly strive to achieve perfection. _____

5. I tend to blame others or situations for my inability to lose weight, exercise, or change other lifestyle habits. _____

6. I make excuses for my inability to lose weight, exercise, or change other lifestyle habits. _____

My comments on these answers_____

_____

_____

_____

_____

7. I am flexible in work and home situations. _____

8. I respond to stressful situations with food. _____

My comments on these answers_____

_____

_____

_____

SMART THINKING, CONTINUED

D. I take responsibility for my actions. _____

1. I ask for help when I need it. _____

2. I don't depend on others for assistance. _____

Comments on these answers_____

_____

_____

_____

E. I feel I have not been treated fairly. _____

1. I blame my situation (job, personal life, etc) on my inability to lose weight. _____

2. I am presently motivated to lose weight. (my own, not the Navy's motivation) _____

Comments on these answers_____

_____

_____

_____

F. My values toward losing weight have changed since start of this program. _____

1. Losing weight is important to me. _____

2. I value food differently since starting this program. _____

G. I feel my current expectations are realistic. _____

1. My expectations have changed since I began this program. _____

2. I feel positive about my accomplishments so far. _____

Comments regarding these answers_____

_____

_____

_____

SMART THINKING, CONTINUED

3. I often criticize my inability to meet my goals. _____

4. I have revised my goals since starting this program to be more realistic. _____

Comments regarding these answers_____

_____

_____

_____

_____

Name_____ Date_____

SETTING GOALS- BENEFITS AND COSTS

Set Realistic Goals

- Concentrate on the specific behavior, not the weight
- You can't change the weight until you change the behavior
- Think short term- too long is frustrating and unattainable
- Don't set yourself up for failure
- Past failures don't indicate present failure
- Don't try to change everything at one time
- Don't use the words "always" "never" "should"
  ("I'll never eat another bite after supper again")
  ("I will always exercise every day")
  ("I should not go out to eat unless I stayed on my diet all day") These are all very common but never last!

Check These Examples of Goals. Are they realistic?

	yes	no
- I will try and lose 2 pounds this week.	___	___
- I will not eat or drink anything at the party tonight.	___	___
- Last night I overate, so today I won't eat anything.	___	___
- I will try to exercise three times this week.	___	___
- Ice cream is my downfall, so I won't eat it anymore.	___	___
- I will limit myself to 2 sodas per day.	___	___

List two of your long term goals:

1._____

2._____

How can you reduce each to a short term realistic goal:

1._____

2._____

What are your weight loss goals? Total loss____ weekly loss____

Do these goals differ from past goals?___ If so, how? _____

_____

SETTING GOALS- BENEFITS AND COSTS, CONTINUED

Cost-Benefit Analysis

There are two sides to weight loss. To reap the benefits at the end, you have to pay. Is the benefit worth the cost?

What are your motivations toward weight loss? (BE HONEST)

_____

_____

What positive rewards will come from losing weight?

_____

_____

What do you need to give up to lose weight?

_____

_____

What are the rewards for not losing weight?

_____

_____

What negatives will come from not losing weight?

_____

_____

AFFIRMATIONS GUIDE

An affirmation is a positive thought that you consciously choose to immerse in your consciousness to produce a desired result.

By repetition, you can feed your mind positive thoughts and achieve your desired goal. There are various ways to use affirmations.

INSTRUCTIONS FOR USING AFFIRMATIONS

1. Work with one or more every day. The best times are just before sleeping, before starting the day and especially whenever you feel "bummed out."

2. Write or type each affirmation 10-20 times. Or you may want to tape it on a recorder and repeat play it several times a day. Either method will help your mind to reinforce the new thought. Using the affirmation at crucial times may help you. For example, if you have an affirmation about snacking after dinner, it may help to write the affirmation at that time.

3. Say and write each affirmation to your self in the first, second and third persons as follows:

"I (your name) am ready to lose weight now."

"You (your name) are now ready to lose weight."

"He/she (your name) is now ready to lose weight."

Remember to put your own name in the affirmation. Writing in the second and third person is also very important since your conditioning from others came to you in this manner.

4. Continue working with the affirmations daily until they become totally integrated in your consciousness. You will know this when your mind responds positively, and when you begin to experience positive results. You will then experience mastery over your goals. You will be using your mind to serve you.

5. It is important to say or write affirmations for 21 days consecutively. It takes 21 days to make or break a habit.

6. Record your affirmations on cassette tapes and play them back when you can. Try playing them while driving in the car or when you go to bed. If you should fall asleep with the earphone still in your ear and the tape is going, the auto-suggestion is still working.

7. Turn to the next page for examples of affirmations.

AFFIRMATIONS GUIDE, CONTINUED

Here are some examples of affirmations.

1. I,_____, now can resist eating sweets.

2. I, _____, now experience ease and enjoyment when losing weight.

3. I,_____, now like and concentrate on eating only nutritional, low calorie foods.

4. I,_____, now find it easy to let go of excess pounds and body fat.

How to develop your own affirmations

1. Make a list of some of your negative thoughts about weight loss. Write down everything that comes to mind. (examples- I hate the way I look, I can't stop eating at night, I hate being on a diet).

1._____ _____

2._____

3._____

4._____

2. Change your above statements from negative to positive. You want to think positive to reinforce your ability to make positive change.

examples: I, _____, will look and feel better by losing weight.

I, _____, will try to eat less at night.

I, _____, am changing the way I eat for a lifetime.

1._____

2._____

3._____

4._____

developed by LCDR E.S.G. Speece, MSC, registered dietitian

EATING TECHNIQUES

After you have identified some problems, choose those you feel most capable to work with first. Do not overload yourself with goals. Evaluate your progress on a day to day basis. Most dieters set themselves up for failure. When they do fail, they prove that the diet "did not work". The following present some tips on how to work on lifestyle changes.

1. Time of the day - many people say their work schedule dictates their eating pattern, but there's more control than we realize. Time can be made for even a small breakfast. Snacks can be lower in calories. We can pack a lunch rather than buy one or order a different meal at our favorite fast food restaurant. We can make lower calorie choices in the General Mess. There is always a way; just think rationally about how you can overcome those time factors.

Do you skip meals? yes___ no___
If so, which meals? Breakfast___ Lunch___ Dinner___

2. If your mood triggers automatic eating, tune yourself into your feelings. As soon as your mind wanders to food, start a "self-talk" process with yourself. Everyone constantly talks silently to themselves. Yell "stop" to yourself immediately and think for a few minutes about what you are planning to do. Will eating make the anger, boredom, or depression go away or will it bring on guilt in addition to what you're feeling, at the moment? That five minutes you stop and think may give you time to regroup your feelings, gain control, and win! It does work. But you have to make a conscious effort each time.

Does your mood trigger eating? yes___ no___
What moods trigger eating? _____

3. Did your parents raise you to "clean your plate"? What can you do? Try to slow your eating pace by putting your fork down between bites. If you are eating a sandwich, put it down on your plate after each bite. You might drink some water or diet drink after a few bites. It will help fill you up and lengthen your eating time. Try to leave one bite of food on your plate. This may be very difficult at first, but remember this is your choice. It is your food and you are in control.

Do you always eat everything on your plate? yes___ no___
Do you eat very fast? yes___ no___
Do you put down your utensils in between bites? yes___ no___
Do you drink beverages with your meals? yes___ no___

EATING TECHNIQUES, CONTINUED

4. Where you eat can affect the amount you eat. If you are watching TV, you may eat that whole bag of chips without even realizing how much you had. Eating in a restaurant may give you the excuse to "take a break" from your diet and go "full speed." Some people stand at the refrigerator or "graze" from the kitchen cabinets. If you are at home, choose a place where you will eat and only eat. Sit down with your food and eat, paying attention to what you eat. At a restaurant, enjoy the surroundings and other positive aspects besides food. Make the social benefits a reason to dine out, not just the food.

Do you eat your meals at the table? yes___ no ___
Do you eat in front of television? yes___ no ___

5. Who we eat with may determine the amount we eat. Eating with others may encourage overeating. For others, eating alone out of boredom may influence overeating. You are the best judge of who influences your eating habits.

Do you eat larger portions at a restaurant than at home? yes___ no___
Do you let friends/family influence what you eat? yes___ no___
Do you eat larger portions or more often when you are alone? yes___ no___

6. Why are you eating? Many cues in the environment cause us to eat. Television ads are purposely placed at certain hours of the day to attract the audience. Kids' cereal ads appear on Saturday mornings, beer commercials during sports events, fast foods all day long. Pictures of food and display cases entice you into the cookie, ice cream, and bakery shops. When any of these signals entice you, first think, "Am I hungry?" Never shop on an empty stomach. Always stop yourself before you act. If you decide that yes, you are hungry and you have sufficient calories to spare, then go for it! If not, immediately turn around and walk away from the ice cream so that you can think it over. Turn the TV to another station. Do anything to erase the food cue so you can think clearly. You can be in control, but you have to make the effort. It takes work.

Do you eat only when you are hungry? yes___ no___
Do you shop when you are hungry? yes___ no___

EATING TECHNIQUES, CONTINUED

4. Where you eat can affect the amount you eat. If you are watching TV, you may eat that whole bag of chips without even realizing how much you had. Eating in a restaurant may give you the excuse to "take a break" from your diet and go "full speed." Some people stand at the refrigerator or "graze" from the kitchen cabinets. If you are at home, choose a place where you will eat and only eat. Sit down with your food and eat, paying attention to what you eat. At a restaurant, enjoy the surroundings and other positive aspects besides food. Make the social benefits a reason to dine out, not just the food.

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Do you eat only when you are hungry? yes___ no___
Do you shop when you are hungry? yes___ no___

CONTROLLING NEGATIVE BEHAVIORS

Negative thoughts may be the result of reaching a long plateau, backsliding into an old habit, or influence from family and friends. The key is recognizing these thoughts before they become uncontrollable. Don't let negative thoughts result in negative actions. Learn to recognize and turn them into positives. Don't set yourself up for failure. Your program will work and you will lose the weight only if you work your program.

1. "I'm not losing weight fast enough."

   Are you making downward progress.
   Don't be a scale watcher. Once a week is plenty.
   There will be some weeks with no drop.
   If you lose too fast, your calorie intake is too low.
   If you have reached a plateau and are <u>following your program,</u> you may need to step up your exercise and slightly lower calorie intake.

2. "I know what to do, but I keep sliding backwards".

   Some changes are sideways, not forward.
   Take it one meal at a time. Just recognizing the problem and trying to cope is progress.
   What else is going on in your life? There is always an underlying cause.

3. "I keep procrastinating".

   Is this the right time to diet. (You may have no choice- That in itself may, in your mind, cause you to do the opposite of what someone else wants you to do).

4. "I'm too stressed out to deal with this diet".

   Another excuse. Our environments are stressful at times, but stress is not always bad. How we deal with stress differs among all of us.

5. "I'm starting to binge eat because I've been on this diet too long".

   Try to rearrange the diet. Include some of your favorite foods.
   Are you too compulsive with your program (not eating out with friends, trying to eat at set times).

CONTROLLING NEGATIVE BEHAVIORS, CONTINUED

Write down two negative thoughts you are now having. For each one, write what you can do to change. It often helps to see the thoughts on paper to think more logically of solutions.

1. Negative thought_____

Solution_____

2. Negative thought_____

Solution_____

For those of you who are really trying but not losing- why not? Answer the following questions.

- Review your commitment (benefit vs. cost). How much weight/fat have you already lost? ____lbs. ____%fat

- What past habits have you made a serious attempt to change with some success? Please list four.

  1._____

  2._____

  3._____

  4._____

- Do the food and/or exercise diaries work for you? yes___ no___

- Have you stopped using the diaries? yes___ no___

- Check your efforts. Are you <u>really</u> working your program as conscientiously as you were in the past? yes___ no___

- How much do you need to lose to reach your goal? ___lbs. ___%

- Are you still motivated? yes___ no___

- Is the source of your motivation different? yes___ no___
  (Remember, it must come from you first).
  If so, why is it different_____

  _____

- Do you still really want to lose weight? yes___ no___

- Do you need to talk to someone? yes___ no___
  (If so, don't wait. Pick someone who sincerely wants to listen, not sabotage).

Name_____ Date_____

SNACKS ARE NOT ALL BAD

Snacks can be part of a weight reduction diet. There are two deciding factors: the issue of control and the kind/amount of snack you eat. If snacking might set you on a binge, then it's better to limit yourself to three meals per day. But if you plan a small portion of your total calories and choose low calorie snacks, you may prevent overeating at your next meal.

Let's say you drink up to six cans of soda per day. Can you still have just one soda without exceeding your daily calories. The typical man needs about 1500 calories for a two pound weight loss per week. At ten percent of calories (150) for a snack, one can of soda would be allowed. The 150 calories is an empty source (no nutritional value) of calories, but provide a choice in the total meal plan. The goal here is not to completely eliminate everything you like.

<u>What are some good snacks?</u>

1. diet sodas, club soda
2. small cans of fruit
3. fresh fruits and vegetables
4. low fat or non fat yogurt
5. saltine or low fat crackers
6. pretzels, air popped popcorn

<u>What are some snacking don'ts?</u>

1. Take only the portion you want, not the whole bag.
2. Avoid high fat/calories
3. Don't watch TV and eat.
4. Don't drink alcohol and eat.
5. Avoid candy/sweets/desserts.

List foods you normally eat for snacks.

_____

_____

_____

Circle the foods you think are good snacks.

SNACKS ARE NOT ALL BAD, CONTINUED

The Psychologists Eat Anything Diet by Pearson divides food into "hummers" and "beckoners". A "hummer" is a food that you know you really want (either physically or emotionally) before eating it. You eat the food and then forget about it. A "beckoner" is a food you want from an external cue which has nothing to do with hunger. These foods are usually readily available (walking by a bakery) or require no preparation (bag of chips, candy bar). There is no specific need to eat the food other than seeing it on the spur of the moment.

List 2 foods that are "hummers" for you 1._____ 2._____

List 2 foods that are "beckoners" 1._____ 2._____

Where do you most often find "beckoners"?_____

_____

So, you are walking past the local ice cream shop just after you've eaten lunch. You are already full, but the ice cream sure looks good. What do you do now? Here's where self talk comes in.

1. First, ask yourself, "Am I still hungry?"

2. Then, if I'm still hungry, "Is this what I really want to eat?"

3. "Was I thinking about how hungry I was or about ice cream before I passed by the shop?"

4. "Is this food low in calories to fit into my total daily plan?"

5. If you give yourself permission to eat the ice cream, then enjoy, and don't beat yourself up for the rest of the day. Some days we eat the ice cream, some days we don't! Remember, never say never. That's not being realistic. Always try to make a conscious decision.

HOW TO READ LABELS

HOW CALORIE CONTENT IS DETERMINED

Food labels list ingredients by weight. The ingredient in the largest amount is listed first. The Food and Drug Administration does not require that all packages contain ingredient lists, but many companies voluntarily do so in response to public interest. Food companies are very smart and advertise their product to its best advantage. Keep this in mind when evaluating information on packages.

Here are two typical labels. Notice the differences.

carbohydrate = 4 calories per gram
protein = 4 calories per gram

fat = 9 calories per gram
alcohol = 7 calories per gram

NUTRITION INFORMATION (PER SERVING)= 1 OZ.			
SERVINGS PER CONTAINER = 12			
protein	2 grams	X 4=	8
carbohydrate	35 grams	X 4=	140
fat	0 grams	X 0=	0
Total calories		=	148

This food will provide 148 calories <u>per serving only if</u> you divide the contents into equal portions. The whole package contains 1776 calories!

NUTRITION INFORMATION (PER SERVING)= 8 OZ.			
SERVINGS PER CONTAINER = 1			
protein	12 grams	X 4=	48
carbohydrate	38 grams	X 4=	152
fat	20 grams	X 9=	180
Total calories		=	380

This label tells you that 20 grams come from fat. It doesn't say that 180 of the total calories from fat (9 cal. per gram of fat X 20 = 180). Almost half of this food is fat!

Food companies are now adding special ingredient labeling for fat and cholesterol, fiber, and sodium. This labeling is a good start, but you need to understand how the numbers fit into a total daily food intake, not just the food by itself.

For example, a label that states "300 mg. of cholesterol per serving" on a package of steak means nothing if:

- you don't know what one serving size is

- the label does state the serving size, but you don't weigh the serving and eat a larger amount

- you don't know if 300 mg. is high or low in cholesterol

- you can't judge how that food would fit into your total daily intake of cholesterol (a 300 mg. serving of steak for supper may be too high if you already had an egg for breakfast but fine if you ate foods low in cholesterol all day).

HOW TO READ LABELS

The labels below show how fat, cholesterol, and sodium can be listed. The information is only as good as your interpretation.

FAT LABEL FOR MAYONNAISE (grams= g., milligrams= mg., tablespoon= tbsp.)
Remember, fat has 9 calories per gram

Nutrition Information (per serving)		Ingredients
Serving size	1 tbsp (14 g.)	Soybean oil, eggs, water,
Servings per package	32	vinegar, egg yolks, salt,
Calories	100	sugar, lemon juice, paprika,
Protein	0	dehydrated garlic,
Carbohydrate	0	dehydrated onion, calcium
Fat (provides 99%		disodium EDTA to protect
of calories)	11 g.	flavor, natural flavor
Polyunsaturates	6 g.	
Saturates	2 g.	(Ingredients are listed
Cholesterol	5 mg.	from largest amount to
Sodium	70 mg.	smallest)

(from USDA/HNIS Home and Garden Bulletin 232-3, April 86)

- If you eat more than 1 tbsp., you will get more than 100 calories

- This food's source of cholesterol is from eggs and egg yolks

- The cholesterol (5 mg) may seem low, but this product is 99% fat. Check the label (11 g. X 9 cal. fat per g. = 99 rounded off to 100 calories)

- This mayonnaise may be higher in unsaturated fat than saturated fat, but the calories from fat are all the same!

SALT/SODIUM LABELING (1 teaspoon salt = 2,000 milligrams sodium)

Nutrition Information (per serving) for Oat Cereal

serving size	1 oz.	- what amount is 1 oz.?
servings per container	12	- you don't know if 330 mg. is
calories	110	high or low (it's high for
protein	4 g.	cereal and probably not needed)
carbohydrate	20 g.	- how does this product fit into
fat	2 g.	your total salt/sodium for the
sodium	330 mg.	day?
(1,155 mg. per 100 g.)		- what does 1,155 mg. per 100 g. mean?

Note- The National Research Council of the National Academy of Sciences recommends 1,100 to 3,300 milligrams sodium per day. Most Americans eat 4,000 to 10,000 milligrams per day.

HOW TO READ LABELS

FIBER

Starch, dietary fiber, and crude fiber may be listed specifically on food labels, especially cereals and other grain products. The label may list the amount of carbohydrate in grams per serving. The carbohydrate list could include starch, sugars, crude fiber, and dietary fiber.

Carbohydrate Information on a Cereal Box
per serving

	1 oz. cereal	with 1/2 cup milk
starch and related carbohydrates	13 g.	13 g.
sucrose and other sugars	5 g.	11 g.
dietary fiber	5 g.	5 g.
Total carbohydrates	23 g.	29 g.

Each serving contains 5 grams of dietary fiber, including 1.4 grams (5 percent by weight) non-nutritive crude fiber)

- The label provides for "dietary fiber", not "crude fiber". This is important, because the dietary fiber is part of the plant that humans can't digest. Crude fiber is what is left of the food after it has been burned or chemically treated in a lab. Total dietary fiber is the amount to look for.

- Again, what is 1 oz. of cereal? (1 small bowl)

- Is 5 g. dietary fiber high or low? (5 g. - 1.4 g. crude = 3.6) a whole apple is 3.6 g. This cereal is a good source of fiber, but fruit is an equally good source.

- sucrose is added table sugar (is it really needed?) (and how much sugar do you add at the table?)

from USDA/HNIS Home and Garden Bulletin 232-4, April 86

HOW TO READ LABELS

Another kind of information you might see is the following: PERCENTAGE OF U.S. RECOMMENDED DAILY ALLOWANCE (U.S. RDA). These are recommendations for daily amounts of protein, vitamins, and minerals for adults and older children. You need to remember that you are eating more than just that one food in a day. So don't buy a product just because you only have to eat one bowl instead of twelve bowls to get adequate nutrition!

Here's an example of a label displaying U.S. RDA information.

PERCENT OF USRDA		
Protein	2	Each number is expressed as a percent.
Thiamine	8	If you eat this product, you will get 2%
Niacin	4	of your total protein for the day, 8% of
Iron	1	your Thiamine, etc.

The product ingredient list may list vitamins and minerals. Many cereals and breads are enriched. This means that the vitamins/minerals that were removed in the grain milling process are added back to the product. Look at the cereal ingredient list below for added nutrients.

Cereal Ingredient list	Comments
Wheat bran, milled yellow corn, sugar, malted cereal syrup, salt, coconut oil, sodium ascorbate (vitamin C), niacinamide, reduced iron, pyridoxine hydrochloride (vitamin B6), thiamine mononitrate (vitamin B1), BHA (a preservative), folic acid, and vitamin B12. BHT added to packaging material to help preserve freshness.	- all underlined are added vitamins or minerals - note third and fourth ingredients are sugar - note coconut oil as fat How healthy is this cereal? (There are many better choices!)

Check the label ingredient list for contents.

These words mean sugar: corn syrup, honey, sucrose, dextrose.

These words mean salt: sodium, MSG, baking soda.

These words mean fat: oil, unsaturates, saturates, cholesterol, lard, butter, margarine, cream, cocoa butter.

Look at the eye catching words. The words "NO CHOLESTEROL" on the peanut butter jar don't say that the peanut butter is still almost all fat.

The "all natural" granola cereal may be loaded with nuts, coconut oil, and honey increasing its calories fourfold.

BASIC FOUR FOOD GROUPS

The Basic Four Food Groups is an easy tool to evaluate your current diet and make changes. Use the following worksheet to identify and correct deficiencies.

MILK AND MILK PRODUCTS- 2 SERVINGS PER DAY (SERVING SIZE VARIES)

lower calorie sources- non fat milk (1 cup) plain yogurt (1 cup)
low fat milk (1 cup) low fat cottage cheese (2 cups)
buttermilk (1 cup) low fat yogurt (1 cup)

higher calorie sources- these contain more fat
fruited yogurt (1 cup) cheese (1 1/2 slices)
whole milk (1 cup) regular cottage cheese (2 cups)
ice cream (1 3/4 cups) pudding or custard (1 cup)

This group provides our main source of Calcium. One cup of milk or the equivalent amount of other foods on this list provides approximately 300 milligrams of calcium. The catch is that the equivalent amount of another food may be a low calorie food, but the serving size to equal the calcium in one cup of milk may be large. For example, it takes 2 cups of cottage cheese to equal the calcium in one cup of milk. One cup of skim milk has 80 calories. Two cups of low fat cottage cheese has 380 calories. One serving of milk is one cup. One serving of cottage cheese is 2 cups.

Women should try to have 3 servings if possible, pregnant women should have 4 per day.

MEAT AND MEAT ALTERNATE GROUP- 2 SERVINGS PER DAY (SERVING SIZE VARIES)

lower fat sources-
Cooked chicken (no skin), turkey (no skin), fish, shellfish
*(2 ounces) (will be high fat if prepared with fat/oil)
dried peas or beans (1 cup)

higher fat sources-
beef or pork (2 ounces) 2 eggs 2 slices cheese
peanut butter (4 tablespoons)
luncheon meats (2 slices)

*2 ounces of meat is the size of a child's hand

The meat group provides B Vitamins, Folacin, Magnesium, Zinc, and Iron. Women have a difficult time meeting the need for Iron. Choosing lower fat meats will allow for a slightly larger portion to increase Iron intake.

COUNT CHEESE AS ONE SERVING OF EITHER MILK OR MEAT, NOT BOTH

BASIC FOUR FOOD GROUPS, CONTINUED

BREADS AND CEREALS GROUP- 4 SERVINGS PER DAY

lower calorie sources-
whole grain and white bread (1 average slice)
cooked rice, pasta, grits, cooked cereal (1/2 cup)
corn tortilla (1 average)
roll (1 plain)
dry cereal (1/2 to 1 cup)
bagel (1/2)

higher calorie (due to hidden fat and/or sugar) sources-
pancakes and waffles (1 medium)
muffins, cornbread, and biscuits (1)
pre-sweetened cereals (1/2 to 1 cup)
flour tortilla (1)

Breads and cereals are good sources of B Vitamins, Iron, and Zinc. Many are enriched (have added vitamins and minerals).

The total calories of all foods will increase if added fat (butter, margarine) or sugar/honey is added.

FRUITS AND VEGETABLES GROUP- 4 SERVINGS PER DAY
portion size is commonly 1/2 cup cooked, 1 cup raw, or 1 medium whole piece

Good sources of Vitamin A are- carrots sweet potatoes greens

Good sources of Vitamin C are- oranges grapefruit papaya mango strawberries

Other foods in this group are- apricots broccoli green beans cabbage cantaloupe cauliflower peach corn squash green peas lettuce mushrooms tomatoes squash peach cucumber banana pear potato dried fruit(high sugar) grapes avocado(high in fat) pineapple brussel sprouts

Fruits packed in syrup contain sugar and more calories
Vegetables cooked in fat or fried will be higher calorie.

Date_____ Name_____

BASIC FOUR FOOD GROUP WORKSHEET

Place a check under each meal to correspond to what you normally eat on most days. For example, I drink milk at breakfast and lunch, so I mark "yes" under those two meals and "no" under dinner and snack. The word "equivalent" under calcium means I have to eat, for example 1 3/4 cups ice cream to get the same amount of calcium in 1 cup of milk or yogurt. If I don't eat 1 3/4 cups of ice cream for a serving, I mark a "no" for that meal. Knowing the equivalent amounts helps to make choices. 1 cup milk has far less fat, sugar, and calories than 1 3/4 cups of ice cream, so milk is a better choice. The same applies for meat.

Food Group	Breakfast		Lunch		Dinner		Snack	
	yes	no	yes	no	yes	no	yes	no
Dairy								
1 cup milk								
1 cup yogurt								
or calcium equivalent see below in ( )								
(1 cup pudding)								
(1 3/4 cups ice cream)								
(2 cups cottage cheese)								
(1 1/2 slices cheese)								
Meat								
1 med slice cooked meat								
or equivalent see below in ( )								
(2 eggs)								
(2 slices cheese)								
(1/2 cup cottage cheese)								
(1 cup dried beans)								
(4 tbsp. peanut butter)								
Fruit/Vegetable								
1/2 cup cooked or juice								
1 cup raw fruit or veg								
whole fruit								
Grain								
1 slice bread								
1 cup cereal								
1/2 cup cooked cereal								
1/2 cup pasta								
1/2 cup grits								
1/2 cup rice								

There are no categories for fat, sweets, and alcohol. These are considered extra foods, not recommended daily. Recommended daily allowances are 2 servings each from milk and meat groups and 4 servings each from fruit/vegetable and grain groups.

EXCHANGE LIST SYSTEM

Originally developed for people with diabetes, the exchange lists are excellent diet planning guides not only for weight reduction, but for a healthy lifestyle. The system utilizes six lists: milk products, vegetables, fruits, breads (starches), meats and fats. Each list contains portions of foods that are approximately equal in calories, carbohydrates, proteins and/or fats. A food on one list can be substituted for any other food in the same list. A diet pattern can be designed (according to calorie and nutrient needs) to indicate the foods and amounts to be eaten at each meal.

The foods on the exchange lists are plain foods that have not been prepared with added ingredients such as fat or sugar. When using these lists in a restaurant or other dining facility, it is important to remember the "extra" ingredients in the cooking procedure used that may have added calories to the item. The exchange lists do not contain processed or high sugar foods such as desserts or sweets. Individuals who are attempting to lose weight or make positive healthy food choices may benefit from concentrating on the foods contained in these exchange lists.

The next two pages offer sample patterns and a form to develop your own pattern. The 1500 calorie plan is representative of an average weight reduction diet for a male. The 1200 calorie plan is for a female. Use the exchange system food lists to help you. Remember, the critical factor is the portion size.

If you have a consult with a dietitian, he or she may work with you to set up a meal plan based on your individual calorie needs, exercise level, height, weight,and age, likes, dislikes, lifestyle, work schedule, etc. The samples provided are not meant to replace this individual consult, but rather to acquaint you with a typical well balanced calorie reduction diet. Some females may need 1000 calories to lose weight. Some males may still lose weight on 1800 to 2000 calories depending on body size, exercise, and activity on the job.

SAMPLE PATTERN USING THE EXCHANGE LIST

1500 calories

Breakfast (sample meal)
1 meat - 1 egg
2 bread - 2 toast
1 fat - 1 pat margarine
1 fruit - 1/2 c. orange juice
1 cup milk (skim)

Lunch
2 meat - hamburger
2 Bread - bun
1 veg - 1 c. raw veg
1 salad - free
2 fruit - 1 med fruit
1 fat - 1 tbsp dressing

Supper
3 meat - 1 piece chicken (no skin)
2 bread - 1 med pot
2 veg - 1 c. green beans
1 salad - free
1 fruit - 1 small fruit
1 fat - 2 tbsp sour cream
1 c skim milk

1200 calories

Breakfast (sample meal)
1 meat - 1 egg
1 bread - 1 toast
1 fat - 1 pat margarine
1 fruit - 1/2 c. orange juice
1 cup milk (skim)

Lunch
2 meat - 2 oz. hamburger
1 bread - 1/2 bun
1 veg - 1 c. raw veg
1 salad - free
1 fruit - 1 small fruit
1 fat - 1 tbsp dressing

Supper
2 meat - 1 piece chicken (no skin)
1 bread - 1 small potato
1 veg - 1/2 c. green beans
1 salad - free
1 fruit - 1 small fruit
1 fat - 2 tbsp. sour cream
1 c skim milk

Notes:
1. One way to increase the 1500 calorie pattern to 1800 calories might be to add another fruit, meat, bread, fat, and vegetable. Space these addition throughout all three meals, preferably breakfast and lunch.

2. Make sure to use the lists with the pattern. The portion size makes the difference.

3. Meats are considered in ounces. One meat is one ounce. 2 meats are two ounces. Three meats would be the typical size of a quarter pound hamburger (one ounce shrinks in cooking).

4. Foods above in 2 or 3 amounts may be considered in two ways. For example 2 breads may mean 2 servings of the same kind of food on the "bread list" (2 slices of bread, 1 whole cup of noodles) or 2 servings of 2 different foods on the "bread list" (1/2 cup beans and 1/2 cup rice). Both ways add up to two total servings.

5. Casseroles, soups, and other mixed dishes can be counted by looking at the ingredients. For example, a serving of spaghetti contains pasta (bread list), tomato sauce with meatballs (vegetable and meat lists), and oil in the sauce (fat list).

6. Use the exchange lists and samples to form your own pattern.

Name_____ Date_____

EXCHANGE LIST DAILY FOOD PATTERN

	NUMBER OF EXCHANGES	CALORIES PER EXCHANGE	TOTAL
BREAKFAST			
fruit	_____	_____	_____
bread	_____	_____	_____
meat	_____	_____	_____
fat	_____	_____	_____
milk	_____	_____	_____
LUNCH			
fruit	_____	_____	_____
bread	_____	_____	_____
meat	_____	_____	_____
veg	_____	_____	_____
fat	_____	_____	_____
milk	_____	_____	_____
optional	_____	_____	_____
SUPPER			
fruit	_____	_____	_____
bread	_____	_____	_____
meat	_____	_____	_____
veg	_____	_____	_____
fat	_____	_____	_____
milk	_____	_____	_____
		TOTAL CALORIES	_____

RECOMMENDED DAILY SERVINGS: milk - 2 cups; meat - 4 to 6 oz.; bread - 3 to 4 servings; fruit/veg - 4 servings; fat - add in after other foods are listed, but limit to 3 or as low as possible. Optional foods such as sweets and alcohol may be planned in the pattern but limited.

Directions (Use exchange lists and sample pattern on other page)

1. Fill in the "number of exchanges column" using the sample pattern. If you do not drink milk, a simple guideline is to substitute one bread and one low fat meat in your pattern for the milk. If you drink milk, but do not eat much meat, reverse the substitution. Remember that the nutrients are not all the same in these foods. Look at the four food groups guide to meet you need for all nutrients.

2. Add amounts of foods if needed to increase to 1800 or 2000 for males. Try not to add fat calories. Females can decrease fat to help lower calories if needed.

3. Write in the "calories per exchange column" Each food exchange list provides calories. Multiple by 2 or 3 if you have more than one serving and list it in the "total column".

HOW TO MAINTAIN YOUR WEIGHT LOSS

You've finally reached or are almost close to your goal. It may be the first time or the latest of many times in your adult life that you have lost weight. What can you do to make the difference last for a lifetime? It really depends on how you got to this point. If you were sporadic with exercise and calorie reduction to make up for some binges, keeping weight off will obviously be more difficult. You may need to concentrate on behavior change and accepting responsibility.

1. Do celebrate, but don't center it around food. The old "trigger" foods may still exist. There are plenty of other things you can do for yourself besides eating that "large banana split" you've been waiting for all these months.

2. First, continue with your exercise. Exercise will help to keep up your metabolism (how fast your body burns calories).

3. Add a snack during the earlier part of your day , only if you feel you will not "abuse" this choice. Everyone is different. Make a conscious effort to change what will succeed for you.

4. If you are following a food plan, add an extra 100 to 200 calories per day, preferably to breakfast or lunch. If you are not following a food plan, look at the basic four pattern for daily general guidance. Increase portion sizes of a few foods in your diet, preferably not all high fat or sugar foods. By adding a small daily increase and weighing at the week's end, you will be able to see at what level you will maintain, not continue to lose weight. For example, if you added 100 calories every day for a week and still lost a pound, you may increase an additional 100 calories for the next week.

5. Here are examples of small increases to promote maintenance.

Breakfast	Lunch	
extra glass of juice	bowl of soup	crackers
another slice of toast	extra fruit	extra vegetable
extra cereal	slice of bread	extra rice,potatoes

6. It is OK to add back occasional high fat/sugar foods. A small dessert (cookie or ice cream) with lunch or slice of bacon or ham at beakfast will not damage a healthy diet. The amount and regularity determines a "good" or "bad" diet. Dealing with these foods forces thought and making choices. You can't go through life saying "I never will eat ____ again".

7. The most important part of maintenance is not to let go of positive conscious thoughts, the self talk that goes on in your mind, to make good choices about when. what, how much, and most important <u>why</u> you eat. Maintaining weight is most of all hard mental work. Don't forget the behaviors you learned. They will help to "keep it off"!

Name_____ Date_____

FINAL PERSONAL INVENTORY

Use this questionnaire as a checkup on the lifestyle changes you have made throughout this program and compare with initial and midprogram inventories. Use it to help evaluate your future goals for future weight/body fat loss or maintenance.

EXERCISE HISTORY

1. My current job description is largely sedentary. yes___ no___
2. My supervisor provides time to exercise during the work day. yes___ no___
3. I exercise during my work day. yes___ no___
4. I exercise before or after my work day. yes___ no___

SMOKING AND ALCOHOL HISTORY

5. I currently smoke. yes___ no___
6. If I quit smoking since starting this program, how long did I smoke. ____years
7. If I quit, when did I quit? (Provide date) _____
8. I have gained weight after I quit. yes___ no___
9. How much alcohol I drink per week? ____cans beer___shots ____ glasses wine

FOOD PATTERN HISTORY

	yes	no	sometimes	Check the column that applies.
10.	__	__	_____	I pre-plan most meals.
11.	__	__	_____	I consciously choose all foods picking some foods I really like.
12.	__	__	_____	I do not limit myself to diet foods when on a diet.
13.	__	__	_____	I keep "fattening" or "bad" foods out of the house when dieting.
14.	__	__	_____	I have replaced some "bad" foods with healthier foods.
15.	__	__	_____	I budget my calories, saving some for special events or foods.
16.	__	__	_____	I eat until satisfied, not stuffed.
17.	__	__	_____	I try not to limit myself to 3 meals per day if that is not my preferred lifestyle.
18.	__	__	_____	I take smaller portions of foods.
19.	__	__	_____	I try to leave some food on my plate even if it's only a bite.

FINAL PROGRAM INVENTORY, CONTINUED

20.__ __ _____ I keep serving dishes out of sight while eating.
21.__ __ _____ I eat and taste while preparing meals.
22.__ __ _____ I eat while clearing away leftovers.
23.__ __ _____ I try not to skip meals, especially breakfast and lunch.
24.__ __ _____ I eat breakfast.
25.__ __ _____ I am a night snacker
26.__ __ _____ I eat between meals
27.__ __ _____ I currently count calories.

28. I eat more when I am: (check all that apply)
depressed ___ stressed___ angry___ alone___ happy___
with others___

29. I eat my meals at: (Check those that apply)

	Breakfast	Lunch	Dinner
fast food or restaurant	_____	_____	_____
ship/shore mess	_____	_____	_____
home	_____	_____	_____

FOOD HABITS

Check Your Diet For Starch and Fiber

How often do you eat:	seldom never	1 to 2 times per week	3 to 4 times per week	almost daily
1. Several servings of bread, cereal, pasta, rice	_____	_____	_____	_____
2. Starchy vegetables like potatoes, peas, corn, beans, dishes made with dry beans or peas.	_____	_____	_____	_____
3. Whole-grain breads/cereals	_____	_____	_____	_____
4. Several servings of vegetables	_____	_____	_____	_____
5. Whole fruit with skins and/or seeds (berries, apples, pears, etc.)	_____	_____	_____	_____

(from USDA/HNIS Home and Garden Bulletin 232-4, April 1986)

FINAL PROGRAM INVENTORY, CONTINUED

Rating Your Diet: How Sweet Is It?

How often do you:	Less than once per week	1 to 2 times per week	3 to 5 times per week	almost daily
1. Drink soft drinks, sweetened fruit drinks, punches or ades? (bug juice)	_____	_____	_____	_____
2. Choose sweet desserts and snacks? (cakes, pies, cookies, and, ice cream)	_____	_____	_____	_____
3. Use canned or frozen fruits packed in heavy syrup or add sugar to fresh fruit?	_____	_____	_____	_____
4. Eat candy?	_____	_____	_____	_____
5. Add sugar to coffee or tea?	_____	_____	_____	_____
6. Use jam, jelly, or honey on bread or rolls?	_____	_____	_____	_____

(from USDA/HNIS Home and Garden Bulletin 232-5, April 1986)

Rating Your Diet: How Much Protein Do You Eat?

How Often Do I Eat:	seldom to never	1 to 2 times per week	3 to 4 times per week	almost daily
1. eggs	_____	_____	_____	_____
2. cheese	_____	_____	_____	_____
3. beef, pork	_____	_____	_____	_____
4. chicken, turkey	_____	_____	_____	_____
5. fish, seafood	_____	_____	_____	_____
6. fried meats	_____	_____	_____	_____
7. baked,broiled meats	_____	_____	_____	_____

FINAL PROGRAM INVENTORY, CONTINUED

Rating your diet: How Do You Score On Fat?

How Often Do I eat:	seldom or never	1 to 2 times per week	3 to 4 times per week	almost daily
1. Fried, deep-fat fried, or breaded foods?	_____	_____	_____	_____
2. Fatty meats such as bacon, sausage, luncheon meats, and heavily marbled steaks and roasts?	_____	_____	_____	_____
3. Whole milk, high-fat cheeses, and ice cream?	_____	_____	_____	_____
4. High-fat desserts such as pies, pastries, and rich cakes?	_____	_____	_____	_____
5. Rich sauces and gravies?	_____	_____	_____	_____
6. Oily salad dressings and mayonnaise?	_____	_____	_____	_____
7. Whipped cream, table cream, sour cream, cream cheese?	_____	_____	_____	_____
8. Butter or margarine on vegetables, dinner rolls, toast?	_____	_____	_____	_____

(USDA/HNIS Home and Garden Bulletin 232-3, April 1986)

WEIGHT AND PERSONAL EVALUATION

1. Pounds lost since beginning this program. _____ lbs.
2. Percent body fat lost since beginning this program. _____ %
3. I am attending a support group. yes____ no____
4. Most significant lifestyle changes I have made are:

   1._____

   2._____

   3._____

   4._____

FINAL PROGRAM INVENTORY

5. Lifestyle changes I need to continue to focus on:

   1._____

   2._____

   3._____

   4._____

6. My long term goal for the next year is:

   _____

   _____

7. My short term goal for the next month is:

   _____

   _____

8. My current motivation for weight/fat loss or maintenance is:

   _____

   _____

9. General comments about my present status:

   weight/body fat_____

   exercise_____

   eating habits_____

   "frame of mind"_____

   support group_____

10. How I plan to continue my program:

    weight/body fat_____

    exercise_____

    eating habits_____

    "frame of mind"_____

    support group_____

SECTION THREE

FOOD LISTS

NAVFSSO CALORIE LIST

Navy Food Service Systems Office

August 1987

MENU ITEM	PORTION SIZE	APPROX CALORIES
Beverages		
Milk, Lowfat, (2%)	1 cup	113
Skim (1%)	1 cup	79
Whole	1 cup	138
Milk, Lowfat, choc (2%)	1 cup	163
Skim (1%)	1 cup	143
Whole	1 cup	188
Sodas		
Cola	12 oz	139
Gingerale	12 oz	116
Grape	12 oz	146
Lemon-lime	12 oz	136
Orange	12 oz	163
Pepper	12 oz	139
Root beer	12 oz	139
Sodas, lo cal		
Cola	12 oz	2
Gingerale	12 oz	2
Grape	12 oz	2
Lemon-lime	12 oz	2
Orange	12 oz	2
Pepper	12 oz	2
Root beer	12 oz	2
Bread and Rolls, Pastry (Commercial)		
Breads		
Pumpernickel	1 sl	76
Raisin	1 sl	66
Rye	1 sl	61
White	1 sl	67
Whole wheat	1 sl	56
Doughnuts		
Cake	1	156
Raised	1	174
Muffins		
Blueberry	1	185
Bran	1	140
English	1	167
Plain	1	126
Rolls		
Dinner	1	83
Sweet	1	219
Cereals, Ready To Eat		
Bran flakes	1 bx	92
Captain Crunch	1 bx	119
Corn flakes	1 bx	110
Frosted flakes	1 bx	108
Raisin bran	1 bx	88
Shredded wheat	1 bx	100
Cheerios	1 bx	111

MENU ITEM	PORTION SIZE	APPROX CALORIES
Condiments		
Catsup	1 tbsp	18
Mustard	1 tbsp	12
Pickles		
Dill	1	7
Sweet	1	50
Relish	1 tbsp	21
Tartar sauce	1 tbsp	76
Desserts (Commercial)		
Cakes		
Chocolate w/frosting	1 pc	239
Fruit	1 pc	249
Pound	1 pc	305
Yellow w/frosting	1 pc	232
Angel food	1 pc	135
Cookies		
Brownies	1	126
Chocolate	1	72
Chocolate chip	1	52
Oatmeal	1	57
Sandwich	1	40
Sugar	1	31
Ice Cream		
Chocolate	1 cup	310
Vanilla	1 cup	269
Novelties	1	167
Sherbet	1 cup	270
Ice Cream Toppings		
Butterscotch	2 tbsp	104
Chocolate	2 tbsp	124
Fudge	2 tbsp	129
Strawberry	2 tbsp	93
Pineapple	2 tbsp	97
Pies		
Apple	1 pc	389
Blueberry	1 pc	389
Chocolate cream	1 pc	272
Lemon meringue	1 pc	313
Peach	1 pc	365
Pecan	1 pc	510
Banana cream	1 pc	238
Salad Dressings (Commercial)		
Blue Cheese	1 tbsp	84
French	1 tbsp	96
Italian	1 tbsp	83
Thousand Island	1 tbsp	59
Salad (mayo-type)	1 tbsp	57
Low Calorie		
Blue Cheese	2 tbsp	27
French	2 tbsp	44

MENU ITEM	PORTION SIZE	APPROX CALORIES
Salad Dressings (Commercial), continue		
Italian	2 tbsp	40
Thousand Island	2 tbsp	49
Fruits, fresh		
Apple	1	81
Banana	1	109
Cherries, sweet	12	59
Cantaloupe	1/4 melon	47
Grapes	15	23
Grapefruit	1/2	38
Honey dew	1/4	56
Crange	1	62
Peach	1	54
Pear	1	97
Plum	2	35
Watermelon	Approx 1 lb	145
Spreads		
Butter	1 pat	34
Jam	1 tbsp	54
Jelly	1 tbsp	51
Marmalade	1 tbsp	51
Peanut butter	1 tbsp	95
Snacks		
Chips		
Corn	1 oz bag	156
Potato	1 oz bag	148
Torilla	1 oz bag	138
Crackers		
Graham	2	108
Soda	2	61
Nuts		
Mixed	10	93
Peanuts	1 tbsp	53
Pistachio	1 tbsp	46
Popcorn		
Buttered	3 cups	171
Plain	3 cups	69
Miscellaneous		
Creamer, dry	1 tbsp	32
Half & Half	1 tbsp	20
Raisins	3 tbsp	82
Sugar	1 tsp	16
Sour cream	1 tbsp	31
Table cream	1 tbsp	29
Miscellaneous, continue		
Yogurt		
Fruit	8 oz	225
Plain	8 oz	138
Low calorie	8 oz	179
Frozen	8 oz	295

MENU ITEM	PORTION SIZE	APPROX CALORIES
Appetizers		
Cranberry & Apple Jc Cocktail	1/2 cup	74
Cranberry & Orange Jc Cocktail	1/2 cup	73
Orange Fruit Shrub	1/2 cup	113
Pizza Treats	1 sl	160
Refried Bean Dip	1/4 cup	176
Shrimp Chocktail	4 shrimp	185
Tomato Jc Cocktail	5 oz	30
Vegetable Jc Cocktail	5 oz	33
Beverages		
Beverage base, powdered		
Cherry	8 oz	86
Fruit punch	8 oz	86
Grape	8 oz	86
Lemonade	8 oz	86
Lemon-lime	8 oz	86
Orange	8 oz	86
Strawberry	8 oz	86
Cocoa, hot	8 oz	98
Coffee, black	8 oz	0
Fruit punch	10 oz	121
Juices		
Apple	4 oz	53
Cranberry	4 oz	66
Grape	4 oz	64
Grapefruit	4 oz	58
Grapefruit & Orange	4 oz	53
Orange	4 oz	53
Pineapple	4 oz	64
Tomato	4 oz	21
Vegetable	4 oz	23
Lemonade	10 oz	136
Limeade	10 oz	136
Orange & Pine Jc Cocktail	10 oz	82
Orangeade	10 oz	93
Pineappleade	10 oz	128
Tea, hot (no sugar)	8 oz	0
Tea, iced (no sugar)	8 oz	0
Breads & Sweet Doughs		
Biscuits, Baking powder	2	316
Cheese	2	352
Breads		
Banana	1 sl	270
Corn	1 pc	219
Jalapeno	1 pc	233
French	2 sl	161
Irish soda	2 sl	325
Raisin	2 sl	186
Rye	2 sl	163

MENU ITEM	PORTION SIZE	APPROX CALORIES
Breads & Sweet Doughs, continue		
Sticks	3 sticks	80
Caraway	3 sticks	84
Garlic	3 sticks	81
Poppy seed	3 sticks	87
Sesame seed	3 sticks	94
Texas toast	1 sl	85
Toasted garlic	2 sl	277
Toasted Parmesan	2 sl	297
White	2 sl	160
Whole wheat	2 sl	144
Buns, hot cros	2	315
Cakes, coffee		
Apple	1 pc	203
Cherry	1 pc	270
Crumb	1 pc	320
French	1 pc	331
Orange coconut	1 pc	303
Croutons		
Garlic	8	24
Parmesan	8	57
Doughnuts		
Beignets	3	329
Cake	2	302
Chocolate	2	314
Cinnamon sugar	2	336
Crullers	2	302
Raised	2	295
Glazed	2	419
Coconut	2	465
Nut	2	419
Longjohns	2	295
Raised	2	295
Sugar coated	2	371
Dumplings	2	128
French toast	2	347
English muffin	2 halves	384
Puff	2	293
Fritters, apple	2	154
Griddle cakes,German potato	2	146
Hush puppies	3	234
Muffins		
Apple	2	438
Banana	2	436
Blueberry	2	421
Bran	2	250
Raisin	2	304
Shredded	2	291
Cinnamon Crumb	2	448
Corn	2	329
Cranberry	2	424
Date	2	448
English muffin	1	253

MENU ITEM	PORTION SIZE	APPROX CALORIES
Breads & Sweet Doughs, continue		
Filled	2	443
Nut	2	496
Raisin	2	451
Pancakes		
Apple	2	314
Blueberry	2	421
Plain	2	287
Rolls		
Brown & Serve	2	302
Hard	2	216
Hot	2	302
Onion	2	313
Sweet	2	287
Danish pastry	2	336
Kolaches	1	189
Whole wheat	2	168
Waffles	1	332
Cereals & Pasta		
Cereals, hot		
Farina	3/4 cup	51
Hominy grits	3/4 cup	70
Rolled oats	3/4 cup	70
Whole wheat meal	3/4 cup	78
Hominy		
Buttered	1/3 cup	52
Fried	1/3 cup	67
Hominy grits, buttered	2/3 cup	104
Pasta		
Boiled	1 cup	204
Buttered	1 cup	236
Noodles Jefferson	3/4 cup	254
Rice		
Filipino fried	3/4 cup	216
Fried	3/4 cup	266
Hopping John	2/3 cup	145
Lyonnaise	3/4 cup	170
Mexican	3/4 cup	207
Orange	3/4 cup	203
Pilaf	3/4 cup	185

MENU ITEM	PORTION SIZE	APPROX CALORIES
Cereals & Pasta, continue		
Pork fried	3/4 cup	307
Red beans w/rice	1/2 cup	244
Shrimp fried	3/4 cup	303
Spanish	3/4 cup	217
Steamed	3/4 cup	161
Tossed green	3/4 cup	191
w/ Parmesan cheese	3/4 cup	207
Yellow rice w/green red pepper & onions	3/4 cup	194
Cheese & Eggs		
Cheese		
Macaroni and Cheese	1 cup	405
Rarebit		
Tomato	1/2 cup	306
Welsh	1/2 cup	323
Scalloped macaroni w/cheese, tomatoes & bacon	1 cup	277
Scalloped noodles w/cheese, tomatoes & bacon	1 cup	283
Quiche, onion & mushroom	1 sq	204
Eggs		
Cooked	2	143
Deviled	2 halves	118
Foo Young	1 omelet	190
Fried	2	162
Omelet		
Bacon	1 omelet	218
Bauernfruestueck	1 omelet	304
Cheese	1 omelet	255
Green pepper	1 omelet	200
Ham	1 omelet	214
Ham and Cheese	1 omelet	271
Mushroom	1 omelet	196
Onion	1 omelet	189
Plain	1 omelet	182
Tomato	1 omelet	180
Western	1 omelet	219
Poached	2	135
Scrambled	2	201
and cheese	2	274
and ham	2	233
Cakes		
Angel food	1 pc	140
Applesauce cake w/banana butter cream frosting	1 pc	361
Banana cake w/butter cream frosting	1 pc	342
Carrot w/cream cheese frosting	1 pc	258

MENU ITEM	PORTION SIZE	APPROX CALORIES
Cakes		
Cheese	1 pc	367
w/blueberry topping	1 pc	416
w/cherry topping	1 pc	404
w/sour cream topping	1 pc	396
w/strawberry topping	1 pc	427
Chocolate		
w/chocolate frosting	1 pc	358
w/butter cream frosting	1 pc	342
Chocolate chip w/chocolate frosting	1 pc	350
Chocolate, easy w/ butter cream frosting	1 pc	350
Chocolate macaroon w/chocolate frosting	1 pc	520
Crumb cake	1 pc	302
Devils food		
w/chocolate frosting	1 pc	367
w/butter cream frosting	1 pc	351
Florida lemon	1 pc	373
German Chocolate w/coconut pecan frosting	1 pc	273
Gingerbread	1 pc	210
Jelly roll	1 pc	228
Orange w/orange butter cream frosting	1 pc	311
Nut w/butter cr frost	1 pc	348
Peanut butter w/peanut butter frosting	1 pc	348
Peanut butter crunch w/ peanut butter frosting	1 pc	385
Pound		
Almond	1 pc	194
Lemon	1 pc	270
Velvet	1 pc	257
Pumpkin w/butter cream frosting	1 pc	332
Raisin nut w/butter cream frosting	1 pc	457
Spice w/butter cream frosting	1 pc	349
Strawberry shortcake	1 pc	250
White		
Lemon-filled w/ butter cream frosting	1 pc	368
Yellow		
Banana-filled	1 pc	366
Boston cream pie w/ chocolate glaze	1 pc	302
Coconut	1 pc	304

MENU ITEM	PORTION SIZE	APPROX CALORIES
Cakes, continue		
Cottage pudding w/lemon sauce	1 pc	263
Dutch apple	1 pc	264
Filled (Wash. Pie)	1 pc	309
Fruit cocktail	1 pc	256
Marble w/chocolate fr	1 pc	334
Pineapple upside down	1 pc	285
w/chocolate frosting	1 pc	353
Cookies		
Almond	2	296
Apple cake brownies	2	236
Banana drop	2	203
Brown sugar	2	256
Brownies		
Butterscotch	1	300
Chocolate	1	361
Cake	1	361
Chewy nut bars	2	238
Chocolate chip cookies	2	253
Chocolate chip nut cookies	2	298
Chocolate drop	2	252
Coconut cereal	2	229
Coconut drop	2	254
Coconut raisin	2	146
Congo bars	2	257
Crisp chocolate	2	335
Crisp drop	2	230
Crisp toffee bars	2	246
Fruit bars	2	225
Fruit nut bars	2	276
Gingerfruit bars	2	179
Ginger molasses	2	219
Hermits	2	220
Lemon drop	2	231
Lemon	2	298
Oatmeal chocolate chip	2	277
Oatmeal	2	252
Oatmeal nut	2	254
Oatmeal raisin	2	256
Orange	2	297
Peanut butter bars	2	117
Peanut butter brownies	1	370
Peanut butter	2	258
Raisin	2	257
Shortbread	2	260
Sugar	2	235
Vanilla	2	296
Pies and Pastry		
Cobblers		
Apple	1 pc	211

MENU ITEM	PORTION SIZE	APPROX CALORIES
Pies and Pastry, continue		
Streusel, apple	1 pc	428
Blueberry	1 pc	320
Cherry	1 pc	282
Peach	1 pc	268
Pies		
Chiffon		
Lemon	1 pc	188
Pineapple	1 pc	186
Strawberry	1 pc	189
Cream		
Banana	1 pc	290
Butterscotch	1 pc	275
Chocolate	1 pc	276
Vanilla	1 pc	227
Coconut	1 pc	254
Nut	1 pc	264
Coconut	1 pc	264
Pineapple cream	1 pc	278
Strawberry glazed	1 pc	326
Vanilla	1 pc	266
Fried Pies		
Apple	1 pc	210
Blueberry	1 pc	259
Cherry	1 pc	240
Lemon	1 pc	256
Peach	1 pc	251
Fruit		
Apple	1 pc	359
Dutch	1 pc	236
French	1 pc	249
Blackberry	1 pc	381
Blueberry	1 pc	380
Cherry	1 pc	365
Crumble	1 pc	340
Peach	1 pc	385
Pineapple	1 pc	345
Strawberry	1 pc	400
Other		
Chocolate mousse	1 pc	216
Lemon meringue	1 pc	334
Mincemeat	1 pc	376
Pecan	1 pc	416
Pumpkin	1 pc	243
Sweet Potato	1 pc	228
Walnut	1 pc	412
Fruit Desserts		
Ambrosia	1/2 cup	123
Baked apples	1	243
Raisin nut filling	1	300

MENU ITEM	PORTION SIZE	APPROX CALORIES
Pies & Pastry, continue		
Fruit Desserts, continue		
Crisp		
Apple	1 sq	252
Cheese	1 sq	271
Crunchy	1 sq	242
Blueberry	1 sq	292
Cherry	1 sq	202
Peach	1 sq	221
Crunch		
Apple	1 pc	159
Blueberry	1 pc	213
Cherry	1 pc	259
Peach	1 pc	205
Pineapple	1 pc	231
Fruit cup	1/2 cup	101
Banana	1/2 cup	97
Fluffy	1/2 cup	101
Melon	1/2 cup	84
Spiced	1/2 cup	119
Strawberry	1/2 cup	120
Fruit Flavored Gelatin	1/2 cup	83
Fruit Gelatin	1/2 cup	128
Banana	1/2 cup	145
Strawberry	1/2 cup	150
Prunes, stewed	1/2 cup	105
Ice Cream Desserts		
Banana split	1	362
Milkshake		
Chocolate	3/4 cup	211
Vanilla	3/4 cup	199
Soft serve		
Vanilla	3/4 cup	246
Pudding Desserts		
Baked custard	1/2 cup	122
Bread pudding	1/2 cup	227
Chocolate chip	1/2 cup	238
Coconut	1/2 cup	220
Cherry cake	1/2 cup	231
Chocolate cake	1/2 cup	291
Cream pudding		
Banana	1/2 cup	159
Butterscotch	1/2 cup	230
Chocolate	1/2 cup	195
Coconut	1/2 cup	182
Pineapple	1/2 cup	185
Vanilla	1/2 cup	137
Fruit cocktail cake	1/2 cup	256
Rice		
Baked	1/2 cup	282
Coconut	1/2 cup	283

MENU ITEM	PORTION SIZE	APPROX CALORIES
Pies and Pastry, continue		
Pudding Desserts, continue		
Creamy	1/2 cup	361
Tapioca	1/2 cup	180
Other Desserts		
Cream puffs	1	222
Eclairs	1	247
Yogurt, soft serve		
Fruit flavored	3/4 cup	221
Vanilla	3/4 cup	221
Meat, Fish & Poultry		
Meat		
Bacon	2 sl	88
Canadian	2 sl	89
Beef, braising steak		
Chicken fried	1 steak	463
Pepper	1 steak	307
Oriental	1 steak	303
Smothered w/onions	1 steak	384
Steak strips	3/4 cup	326
Spanish	1 steak	348
Steak strips	3/4 cup	330
Steak ranchero	1 steak	426
Stroganoff	3/4 cup	385
Swiss steak w/br gravy	1 steak	383
w/mushroom gravy	1 steak	413
w/tomato sauce	1 steak	434
Beef, corned		
Hash	2/3 cup	209
New England boiled	3 sl	553
Simmered	4 oz	314
w/apple glaze	4 oz	376
Beef, diced (for stewing)		
BBQ beef cubes	3/4 cup	367
Beef pot pie	1 cup	511
Beef stew	1 1/4 cups	460
Braised & noodles	1 1/4 cups	386
Braised cubes	3/4 cup	379
El Rancho stew	1 cup	389
Hungarian goulash	3/4 cup	514
Syrian beef stew	1 1/4 cups	466
Beef, dried		
Creamed chipped	3/4 cup	245
Beef liver		
Braised w/onions	1 sl	251
Breaded	1 sl	334
w/mushroom gravy	1 sl	454
Grilled	1 sl	258
Liver fiesta	1 sl	277

MENU ITEM	PORTION SIZE	APPROX CALORIES
Meat, Fish and Poultry, continue		
Meats, continue		
Beef, oven roast		
Brogul	1 roll	542
Cordon bleu	1 cordon bleu	587
Roast	2 sl	475
Stuffed rolls	1 roll	509
Sukiyaki	1 cup	249
Yakisoba	1 1/4 cups	476
Beef pattie mix/patties w/soy		
Beef balls stroganoff	3 meatballs	496
Beef & corn pie	1 1/2 cups	442
Beef porcupines	2 porcupines	389
Chili con carne	1 cup	377
Chili conquistador	1 sq	327
Chili macaroni	1 1/4 cups	582
Chuck wagon stew	1 1/4 cups	419
Creamed ground	2/3 cup	263
Creole macaroni	1 cup	301
Enchiladas	2	440
Grilled hamburger steak	1 steak	387
Ground beef cordon bleu	1	603
Hamburger Parmesan	1	298
Hamburger stroganoff	3/4 cup	407
Hamburger yakisoba	1 1/4 cups	423
Lasagna	1 sq	427
Meat loaf	1 sl	409
Minced beef	1 cup	370
Mock fillet steak	1 steak	431
Salisbury steak	1 steak	329
Spaghetti sauce	1 cup	265
Spaghetti w/meatballs	3 meatballs	666
Stuffed cabbage rolls	2 rolls	438
Stuffed green peppers	1/2 pepper	270
Swedish meatballs	3	473
Tamale pie	1 sq	350
Tamale pizza	1 wedge	288
Texas hash	1 cup	350
Beef, pot roast	2 sl	338
Ginger	2 sl	526
Yankee	2 sl	535
Roast beef hash	1 1/4 cups	543
Breakfast portion	1/2 cup	226
Sauerbraten	3-4 sl	597
Simmered	1-2 sl	487
Beef, rib, bone-in	6 oz	570
Beef, round	6 oz	570
Beef, steak	1 steak	472
Teriyaki	1 steak	588
Tenderloin	1 steak	472

MENU ITEM	PORTION SIZE	APPROX CALORIES
Meat, Fish and Poultry, continue		
Meats, continue		
Bockwurst, simmered	2	492
Bologna, grilled	2	384
Bratwurst, simmered	2	512
Chili con carne, w/ beans, canned	1 cup	322
Frankfurters		
Bake w/sauerkraut	2	296
Cheese & bacon	2	385
w/ BBQ sauce	2	393
Grilled	2	290
Simmered	2	279
Ham		
Baked	2 sl	255
Steak	1	255
Baked ham, macaroni & tom	1 cup	246
BBQ ham steak	1 steak	261
Ham slice, grilled	1 sl	161
Steak	1 steak	202
Ham loaf, glazed	1 sl	255
Scalloped w/potatoes	1 cup	258
Scalloped and macaroni	1 cup	231
Italian sausage, baked	2	234
Knockwurst, simmered	2	335
Baked w/sauerkraut	2	353
Lamb, savory roast	2 sl	297
Luncheon meat, grilled	2 sl	337
Baked macaroni & tom	1 cup	246
Manicotti, cheese	2 manicotti	597
Polish sausage, grilled	6 oz	305
Pork & beef sausage	2	176
Pork loaf	1 sl	435
Pork chops		
Baked	1	461
Stuffed	1	442
w/apple rings	1	446
Braised	1	362
Breaded	1	478
Creole	1	427
Grilled	1	382
Mexicana	1	410
Sweet & sour	1	504
w/mushroom gravy	1	419
Pork, diced		
Adobo	2/3 cup	332
Chalupa	1 cup	394
Chop suey	1 1/4 cup	384
Sweet & sour port	1 cup	391
Pork ham, fresh, roast	2 sl	449

MENU ITEM	PORTION SIZE	APPROX CALORIES
Meat, Fish and Poultry, continue		
Meats, continue		
Pork loin		
BBQ	2 sl	467
Roast	2 sl	413
Pork sausage, grilled	2	222
Pork spareribs		
BBQ	8 oz	552
Braised	8 oz	540
and sauerkraut	8 oz	531
Cantonese	8 oz	586
Sweet & sour	8 oz	601
Pork steaks, breaded	1 chop	315
Creole	1 chop	394
Schnitzel	1 chop	388
Rabbit, fried	2 pc	408
Marinated	2 pc	428
Ravioli, beef	4 ravioli	341
Cheese	4 ravioli	341
Scrapple, fried	2 sl	293
Tamales, beef	6 oz	238
Veal		
Loaf	1 sl	350
Roast	2 sl	282
w/herbs	2 sl	282
Veal cubes Parmesan	2/3 cup	272
Veal steaks, breaded	1 steak	398
Italian	1 steak	404
Jaegerschnitzel	1 steak	456
Paprika	1 steak	559
Parmesan	1 steak	464
Other		
Pizza		
Cheese	1 pc	181
French bread	1 pc	306
Green pepper	1 pc	185
Hamburger	1 pc	265
Mushroom	1 pc	182
Pepperoni	1 pc	209
Pork sausage	1 pc	207
Fish		
Crabmeat		
Crab cakes	2	475
Deviled	7 oz	324
Crawfish, boiled	8 oz	206
Fish fillets or steaks		
Baked	4 1/2 oz	144
Herb	4 1/2 oz	144
Lemon	4 1/2 oz	147
Onion-lemon	4 1/2 oz	147

MENU ITEM	PORTION SIZE	APPROX CALORIES
Meat, Fish and Poultry, continue		
Fish, continue		
Seasoned	4 1/2 oz	172
Spicy	4 1/2 oz	168
Trout	4 1/2 oz	232
w/garlic butter	4 1/2 oz	172
Baked stuffed	4 1/2 oz	172
Chipper perch	5 1/2 oz	347
Creole	4 1/2 oz	107
Deep fat fried	4 1/2 oz	249
Fried	4 1/2 oz	245
Oven fried	4 1/2 oz	249
Seafood newburg	2/3 cup	227
Southern fried catfish	4 oz	208
Stuffed flounder creole	4 1/2 oz	250
Tempura fried	4 1/2 oz	167
Fish portions, batter dipped		
Baked	6 oz	386
Creole	6 oz	380
Fish & chips	6 oz	894
French fried	6 oz	359
Fish portions/sticks, breaded		
Baked portions	4 oz	172
Sticks	4 oz	182
Creole	4 oz	140
French fried portions	4 oz	180
Sticks	4 oz	190
King crab legs, boiled	5 oz	211
Lobster, whole, boiled	1 cup	138
Oysters, fried	6 oysters	247
Salmon, canned		
Cakes	2	189
Loaf	1 sl	241
Salad	3/4 cup	293
Scalloped and peas	3/4 cup	301
Scallops		
Baked	6 scallops	192
Creole	1 cup	128
Fried	7-9	267
Breaded	7-9	247
Shrimp		
Chop suey	1 1/4 cups	314
Creole	1 cup	237
Curry	3/4 cup	234
French fried	4-8	257
Jambalaya	1 1/2 cups	368
Salad	1/2 cup	175
Scampi	2/3 cup	294
Tempura fried	4-8	184
Tuna, canned	1 1/2 cups	397

MENU ITEM	PORTION SIZE	APPROX CALORIES
Meat, Fish and Poultry, continue		
Fish, continue		
Baked & noodles	1 cup	373
Chopstick	3/4 cup	385
Salad	3/4 cup	261
Macaroni	3/4 cup	280
Scalloped & peas	3/4 cup	259
Poultry		
Chicken		
Ala king	1 cup	341
Adobo	2 pc	325
Baked	2 pc	280
and gravy	2 pc	361
and noodles	1 cup	373
and rice	1 cup	440
Barbecue	2 pc	356
Cacciatore	2 pc	415
Chinese five spice	2 pc	299
Chow mein	1 cup	268
Country style	2 pc	448
Creole	2 pc	339
Fried	2 pc	333
Newport	2 pc	700
Oven	2 pc	519
w/cornflake crumbs	2 pc	587
Pineapple	2 pc	383
Pot pie	1 cup	379
Salad	1 cup	375
Savory	2 pc	473
Sesame	2 pc	542
Southern fried	2 pc	446
Sweet & sour	2 pc	400
Szechwan	2 pc	373
Teriyaki	2 pc	273
Vega	2 pc	560
Duck		
Hawaiian baked	1/4 duck	565
Honey glazed	1/4 duck	593
Roast	1/4 duck	550
w/apple jelly glaze	1/4 duck	584
Rock cornish hen		
Honey glazed	1/2 hen	399
Syrup glazed	1/2 hen	363
Turkey		
Ala king	1 cup	315
Chow mein	1 cup	336
Curry	3/4 cup	186
Cutlet	1	366
Nuggets	8-10	310

MENU ITEM	PORTION SIZE	APPROX CALORIES
Meat, Fish and Poultry, continue		
Poultry, continue		
Pot pie	1 cup	387
Roast	2 sl	202
Salad	1 cup	246
Salads, Salad Dressings and Relishes		
Salads		
Apple		
Celery & pineapple	1/2 cup	85
Celery & raisin	1/2 cup	114
Fruit medley	1/2 cup	112
Waldorf	1/2 cup	122
Avocado, green	1/2 cup	116
Guacamole	2 tbsp	67
Beans, green Pickled	1/2 cup	118
Beans, kidney	1/2 cup	153
Frijole	3/4 cup	157
Three bean	1/3 cup	119
Beet, pickled & onion	1/2 cup	93
Cabbage		
Apple & celery	1/2 cup	76
Apple & raisin	1/2 cup	108
Coleslaw	1/2 cup	118
Cabbage & carrot	1/2 cup	82
German	1/2 cup	83
Mexican	1/2 cup	118
Pineapple	1/2 cup	93
w/marshmallow	1/2 cup	112
Vegetable slaw	1/2 cup	83
w/creamy dressisng	1/2 cup	78
w/vinegar dressing	1/2 cup	49
Carrot	1/2 cup	89
and pineapple	1/2 cup	91
and raisin	1/2 cup	121
Celery & apple	1/2 cup	96
Raisin & celery	1/2 cup	114
Chicken	1 cup	289
Cucumber		
and onion	1/2 cup	35
and sour cream	1/2 cup	78
Onion and tomato	1/2 cup	79
Cottage cheese	1/4 cup	59
and peach	1/4 cup	105
and pear	1/4 cup	105
and pineapple	1/4 cup	85
and tomato	1/4 cup	72
Carden	1/2 cup	64
Fruit	1/2 cup	106
Medley	1/2 cup	112
Mixed	1/2 cup	102

MENU ITEM	PORTION SIZE	APPROX CALORIES
Salads, Salads Dressings and Relishes, continue		
Salads, continue		
Jellied, banana	1/2 cup	102
Cranberry & orange	1 sq	110
and pineapple	1 sq	140
Fruit	1 sq	113
Fruit cocktail	1 sq	109
Golden glow	1 sq	72
Orange	1 sq	108
Pear	1 sq	99
Perfection	1 sq	61
Pineapple, Pear & Ban	1 sq	122
Shimmery fruit & veg	1 sq	101
Spring	1 sq	59
Strawberry	1 sq	102
Lettuce		
and tomato	4 sl	22
and cucumber	1 cup	11
Chef's	1 cup	99
Italian style	1 cup	76
with croutons	1 cup	99
Cobb	1 cup	235
Garden vegetable	3/4 cup	15
Spring	3/4 cup	15
Taco	1 1/2 cup	417
Tossed green	1 cup	8
Vegetable	1 cup	19
Wedge	1	9
Macaroni	2/3 cup	184
Pasta	1 cup	321
Potato	2/3 cup	180
Deviled	2/3 cup	226
Hot	2/3 cup	160
w/vinegar dressing	2/3 cup	117
Spinach	1 cup	37
Tomato		
German style	1/3 cup	66
Country	1/3 cup	50
Salad Bar Items		
Alfalfa sprouts	2 tbsp	1
Apple rings, spiced	1 ring	33
Bacon bits	1 tbsp	37
Beans, kidney	1 tbsp	13
Bean sprouts	2 tbsp	4
Beets, sliced	4 sl	9
Broccoli, fresh	2-3 stalks	8
Carrots, fresh	6 strips	12
Cauliflower, fresh	2 flowerets	10
Celery, fresh, sticks	4 strips	4

MENU ITEM	PORTION SIZE	APPROX CALORIES
Salads, Salad Dressings, and Relishes		
Salad Bar Items, continue		
Cheese, shredded	2 tbsp	57
Chow mein noodles	1/2 cup	73
Cottage cheese	1/4 cup	54
Crabapples	1	46
Croutons	8	24
Cucumbers	4 sl	3
Eggs, hard cooked	1	79
Endived or escarole	1 cup	8
Ham, chopped	1/4 cup	136
Lettuce	1 cup	7
Mushrooms	2 tbsp	2
Olives, green	3	21
Ripe	3	22
Onions, dry, chopped	2 tbsp	7
Onions, dry, sliced	3-4	14
Onions, green, whole	1	3
Peas, chick (garbanzo beans)	2 tbsp	17
Peppers, pickled, cherry, whole	1 pepper	4
Peppers, pickled, jalapeno	1 pepper	4
Peppers, sweet, fresh	2 strips	6
Pickles, dill, sticks	4 sticks	1
Pickles, sweet	1	20
Pickles, mixed sweet	1	9
Radishes	3	2
Romaine	1 cup	9
Rutabagas, strips	3	7
Spinach	1 cup	12
Tomatoes, fresh, cherry	2	8
Tomatoes, fresh, wedges	2	9
Tomatoes, fresh, slices	2	5
Tuna	1/4 cup	72
Turnips, fresh, strips	3	4
Salad Dressings		
Bacon sour cream	1 tbsp	44
Blue cheese	1 tbsp	79
Celery seed	1 tbsp	81
Chiffonade	1 tbsp	58
Creamy fruit	1 tbsp	26
Quick	1 tbsp	55
French	1 tbsp	74
Tomato	1 tbsp	52
Horseradish, creamy	1 tbsp	65
Italian, creamy	1 tbsp	66
Mayonnaise	1 tbsp	77
Sour cream	1 tbsp	40
Russian	1 tbsp	56

MENU ITEM	PORTION SIZE	APPROX CALORIES
Salads, Salad Dressings, and Relishes, continue		
Salad Dressings, continue		
Tangy	1 tbsp	65
Thousand Island	1 tbsp	49
Vinaigrette	1 tbsp	79
Low Calorie		
Thousand Island	2	31
Tomato	2	21
Zero	2	8
Relishes		
Celery, stuffed	2 pc	34
Blue cheese	2 pc	18
Cottage cheese	2 pc	16
Peanut butter	2 pc	48
Corn	2 tbsp	46
Cranberry & orange	1/4 cup	218
Sandwiches		
Bacon, letuce & tomato	1	279
and cheese	1	393
English muffin w/egg/cheese	1	405
w/ham & cheese	1	406
English muffin w/Canadian bacon, egg & cheese	1	405
Beef w/BBQ sauce	1	259
Beef, corned		
Hot	1	335
Reuben, grilled	1	556
Sliced	1	317
and cheese	1	431
Beef pattie mix		
Beef & bean tostadoes	2	919
BBQ beef (sloppy joe)	1	520
Cannonball	1	799
Cheesy	1	597
Cheeseburger	1	417
Cheesy baconburger	1	461
Chiliburger	1	384
Chili size	1	557
Double decker cheeseburger	1	912
Grilled hamburger	1	329
Hamburger hero	1	614
Jalapeno chiliburger	1	384
Pizzaburger	1	434
Superburger	1	500
Tacoburger	1	338
Tacos	2	511
Beef steak, sandwich		
Pepper	1	858

MENU ITEM	PORTION SIZE	APPROX CALORIES
Sandwiches, continue		
Steak & cheese sub	1	759
and onion sub	1	794
Steak & onion sub	1	687
Beef roast	1	366
Beef & onion	1	781
Gyros	1	585
Hot roast beef	1	459
Italian beef pepper	1	829
Bockwurst, grilled	1	397
Bratwurst, grilled	1	397
Burritos	2	492
Cheese		
Cream cheese bagel	1	260
and olive	1	261
and tomato	1	269
Grilled	1	376
and bacon	1	394
and ham	1	356
German style	1	512
Chicken fillet, deep fried	1	354
Oven fried	1	324
and cheese	1	382
Chicken, RTC		
Salad	1	352
Sub	1	395
Egg salad	1	403
and ham salad	1	451
New York	1	412
Egg, western	1	263
Fish portion, batter dip	1	580
Cheese	1	701
Fish portions, breaded		
Fishwich	1	401
Cheese	1	507
Frankfurters		
Chili dog	1	386
w/cheese & onions	1	414
Corn dog	1	271
Grilled	1	306
w/fried peppers & onions	1	311
Quarter pound	1	684
Reuben frankfurter	1	519
Simmered	1	306
Ham	1	286
and cheese	1	324
Deviled	1	292
and tomato	1	286
Hoagie	1	491
English muffin w/egg & cheese	1	411

MENU ITEM	PORTION SIZE	APPROX CALORIES
Sandwiches, continue		
German style	1	410
Grilled ham, egg	1	223
and cheese	1	329
Salad	1	515
Sub	1	545
Knockwurst, simmered	1	398
Pastrami, hot	1	406
Grilled reuben	1	627
Peanut butter		
and jam	1	383
and jelly	1	379
English muffin w/honey	1	352
English muffin w/jam	1	338
Polish sausage		
Grilled	1	440
w/sauerkraut, onions & mustard	1	449
w/sauerkraut & Swiss ch	1	470
Pork		
Barbecued	1	403
Hot roast pork	1	394
Hot roast port, fresh	1	333
Roast	1	417
Salmon salad	1	425
Sausage		
English muffin w/egg and cheese	1	521
Grilled w/egg & cheese	1	433
Italian style	1	607
Submarine	1	578
Italian style	1	638
Tuna		
Salad	1	447
and tomato	1	455
Sub	1	476
Turkey		
Hot roast turkey	1	280
Roast	1	315
Salad	1	416
Veal, roast	1	344
Veal steak, breaded		
Sub	1	596
w/pizza sauce	1	614
Other		
Cold cut	1	364
Jimbo	1	369
Monte carlo	1	519
Monte cristo	1	462

MENU ITEM	PORTION SIZE	APPROX CALORIES
Sauces		
BBQ	1/4 cup	44
Cherry	2 1/2 tbsp	33
Chinese mustard	1 tsp	13
Horseradish	1 tbsp	43
Pineapple	3 2/3 tbsp	98
Raisin	3 tbsp	59
Seafood cocktail	2 tbsp	44
Sweet & sour	2 tbsp	99
Szechwan	1/3 cup	131
Taco	2 tbsp	28
Tartar	2 tbsp	115
Teriyaki	1/4 cup	98
Tomato	1/4 cup	48
Gravies		
Brown	1/4 cup	72
Chicken	1/4 cup	43
Chili	1/4 cup	52
Cream	1/4 cup	65
Onion	1/4 cup	70
Giblet	1/4 cup	88
Mushroom	1/4 cup	86
Natural pan	1/4 cup	14
Onion	1/4 cup	92
and mushroom	1/4 cup	89
Tomato	1/4 cup	49
Turkey	1/4 cup	72
Dressings, bread		
Apple	1/2 cup	210
Corn	1/2 cup	230
Giblet	1/2 cup	214
Oyster	1/2 cup	205
Raisin	1/2 cup	223
Sausage	1/2 cup	298
Savory	1/2 cup	203
Soups		
Bean soup, navy	1 cup	116
Knickerbocker	1 cup	122
Old fashioned	1 cup	122
w/ham hocks	1 cup	106
Beef barley	1 cup	97
Beef noodle	1 cup	57
Beef rice	1 cup	70
Chicken gumbo	1 cup	113
Chicken noodle	1 cup	57
w/vegetables	1 cup	99
Chicken rice	1 cup	70
Chicken-mushroom	1 cup	167
Clam chowder, manhattan	1 cup	75
New England	1 cup	218
Clam gumbo	1 cup	63

MENU ITEM	PORTION SIZE	APPROX CALORIES
Soups, continue		
Corn chowder	1 cup	168
chicken	1 cup	164
Creole	1 cup	99
Doubly good	1 cup	94
Egg drop	1 cup	22
Fish chowder, manhattan	1 cup	89
New England	1 cup	75
Logging	1 cup	151
Minestrone	1 cup	140
Mushroom	1 cup	155
Onion	1 cup	92
French	1 cup	95
Mexican corn	1 cup	70
Oyster stew	1 cup	183
Pepper pot	1 cup	88
Potato	1 cup	168
Puree Mongole	1 cup	96
Scallop stew supreme	1 cup	202
Shrimp gumbo	1 cup	125
Split pea	1 cup	192
w/ham hocks	1 cup	194
Spanish	1 cup	75
Tomato	1 cup	80
Barley	1 cup	97
Rice	1 cup	107
Tomato bouillon	1 cup	28
Tomato-noodle	1 cup	97
Tomato-vegetable	1 cup	56
Vegetable	1 cup	48
Supreme	1 cup	100
Canned soups		
Beef w/vegetables	1 cup	91
Bean w/bacon	1 cup	167
Beef noodle	1 cup	97
Chicken noodle	1 cup	86
Chicken rice	1 cup	69
Cream of chicken	1 cup	165
Cream of mushroom	1 cup	180
Manhattan clam	1 cup	88
Minestrone	1 cup	96
Split pea	1 cup	190
Tomato	1 cup	98
Vegetable	1 cup	73
Vegetable w/beef	1 cup	78
Vegetables		
Asparagus		
Au gratin	1/2 cup	99
Creamed	1/2 cup	72
Simmered	1/2 cup	16
Beans, dry		

MENU ITEM	PORTION SIZE	APPROX CALORIES
Vegetables, continue		
Boston baked	1/2 cup	140
Italian-style	1/2 cup	209
Savory	1/2 cup	102
Refried w/cheese	1/2 cup	167
Refried	1/2 cup	129
Simmered	1/2 cup	114
w/o bacon	1/2 cup	99
Spanish style lima beans	1/2 cup	175
Beans, green		
Creole	1/2 cup	50
Herbed	1/2 cup	35
Lyonnaise	1/2 cup	53
Nicoise	1/2 cup	58
Parisienne	1/2 cup	66
Simmered	1/2 cup	25
Southern style	1/2 cup	39
w/corn	1/2 cup	61
w/mushrooms	1/2 cup	50
Beans, lima	1/2 cup	89
Beans, white w/pork	1/2 cup	120
Beets		
Harvard	1/2 cup	57
Hot spiced	1/2 cup	90
In orange-spiced sauce	1/2 cup	59
Simmered	1/2 cup	34
Broccoli		
Herbed	1/2 cup	26
Parmesan	1/2 cup	116
Polonaise	1/2 cup	78
Simmered	1/2 cup	25
Tempura fried	1/2 cup	126
Brussels sprouts		
Parmesan	1/2 cup	123
Polonaise	1/2 cup	83
Simmered	1/2 cup	34
Sprouts superba	1/2 cup	107
Cabbage		
Calico	1/2 cup	60
Chinese	1/2 cup	49
Fried	1/2 cup	52
Simmered	1/2 cup	18
Sweet & sour sauce	1/2 cup	86
w/bacon	1/2 cup	33
Carrots		
Amandine	1/2 cup	94
and celery amandine	1/2 cup	91
Ginger glazed	1/2 cup	121
Glazed	1/2 cup	120
Lyonnaise	1/2 cup	76
Normandie	1/2 cup	88

MENU ITEM	PORTION SIZE	APPROX CALORIES
Vegetable, continue		
Simmered	1/2 cup	27
Tempura fried	1/2 cup	119
Cauliflower		
Au gratin	1/2 cup	158
French fried	1/2 cup	98
Parmesan	1/2 cup	112
Polonaise	1/2 cup	73
Simmered	1/2 cup	25
Tempura fried	1/2 cup	114
Corn, cream style		
Fritters	2	182
Scalloped	1/2 cup	147
Simmered	1/2 cup	85
Corn on cob, simmered	1	97
Corn, whole		
Calico	1/2 cup	74
Mexican	1/2 cup	77
O'Brien	1/2 cup	104
Simmered	1/2 cup	85
Eggplant		
French fried	1/2 cup	107
Parmesan	1/2 cup	101
Tempura fried	1/2 cup	106
Greens, collard, kale, turnip, mustard		
Simmered	1/2 cup	25
Southern style	1/2 cup	28
Sweet & sour	1/2 cup	44
Mushrooms		
Sauteed	1/2 cup	22
and onions	1/2 cup	67
Okra, simmered	1/2 cup	20
and tomato gumbo	1/2 cup	41
French fried	1/2 cup	98
Southern fried	1/2 cup	90
Onions		
Baked with tomatoes	1/2 cup	89
French fried rings	1/2 cup	210
Tempura fried	1/2 cup	82
Fried	1/4 cup	57
Smothered	1/2 cup	151
Spanish	1/2 cup	89
Parsnips, simmered	1/2 cup	73
Peas		
Creamed	1/2 cup	109
Simmered	1/2 cup	51
with carrots	1/2 cup	86
with celery	1/2 cup	73
with mushrooms	1/2 cup	81
with onions	1/2 cup	73
Peas, blackeye	1/2 cup	94

MENU ITEM	PORTION SIZE	APPROX CALORIES
Vegetables, continue		
Potatoes, sweet	2-3 pc	137
Baked	1	146
Candied	1/2 cup	196
Glazed	1/2 cup	184
w/blended syrup	1/2 cup	113
Marshmallow	1/2 cup	124
Mashed	1/2 cup	109
Scalloped & apples	1/2 cup	192
Southern style	1/2 cup	101
Potatoes, white		
Au gratin	1/2 cup	238
Baked	1	185
Quick baked halves	2 halves	166
Cottage fried	1/2 cup	142
Franconia	1/2 cup	211
French baked	1/2 cup	263
French fried	1 cup	390
Oven method	1 cup	236
Shoestring	1 cup	300
German griddle cakes	2	145
Golden potato balls	3	66
Grilled patties	1	105
Hashed brown	1/2 cup	108
Home fried	3/4 cup	198
Lyonnaise	2/3 cup	129
Mashed	2/3 cup	171
Waldorf	2/3 cup	120
O'Brien	2/3 cup	178
Oven browned	1 cup	211
Oven-glo	1 cup	213
Paprika	3 pc	168
Parsley	3 pc	156
Rissole	1 cup	146
Scalloped	2/3 cup	122
and onions	2/3 cup	126
Simmered	1/2 cup	117
w/chili	1	565
w/cheese sauce	1	356
Broccoli	1	331
w/hamburger stroganoff	1	384
Rutabagas and bacon	1/2 cup	38
Sauerkraut		
German	1/2 cup	39
Simmered	1/2 cup	22
Spinach		
Club	1/2 cup	159
Simmered	1/2 cup	21
Tangy	1/2 cup	32
Squash		
Baked acorn	1 pc	122

MENU ITEM	PORTION SIZE	APPROX CALORIES
Vegetables, continue		
Baked hubbard	1 pc	92
Creole summer	2/3 cup	34
Louisiana style	1/2 cup	67
Simmered	1/2 cup	43
Succotash		
Seasoned	1/2 cup	85
Simmered	1/2 cup	76
Sweet peppers, tempura fried	1/2 cup	108
Tomatoes		
Simmered	1/2 cup	23
Stewed	1/2 cup	24
w/croutons	1/2 cup	59
Turnips		
and bacon	1/2 cup	25
Simmered	1/2 cup	16
Vegetables, mixed, simmered	1/2 cup	47
Vegetable Combos		
Broccoli	1/2 cup	88
Bean	1/2 cup	89
Brussels sprouts	1/2 cup	93
Cauliflower	1/2 cup	69
Corn	1/2 cup	91
Green bean	1/2 cup	63
Vegetable stir fry	1/2 cup	56
Zucchini		
Simmered	1/2 cup	13
Tempura fried	1/2 cup	103

DEPARTMENT OF THE NAVY
NAVAL SUPPLY SYSTEMS COMMAND
WASHINGTON, D.C. 20376-5000

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30 DEC 1988

NAVSUP INSTRUCTION 4061.11F CHANGE TRANSMITTAL 1

Subj: STANDARDS OF FOOD SERVICE

Encl: (1) Revised Section I. A. - Menu Planning

1. Purpose. To revise and update standards of food service pertaining to Section I. A. - Menu Planning.

2. Discussion. The revised menu planning section contained in enclosure (1) is provided as a guide to food service personnel in planning and self evaluation of general mess menus that will promote "healthy" food choices and support "health-enhancing" decisions in the food service environment.

3. Action. Addressees will use enclosure (1) as a guide and checkoff list for implementation of Standards of Food Service relating to menu planning. Insert enclosure (1) into the basic instruction. Renumber remaining pages in consecutive order.

R. M. MOORE
Vice Commander
Acting

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MINIMUM STANDARDS OF FOOD SERVICE (LESS SANITATION)

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Enclosure (1)

SECTION I - MENU PLANNING (R

MENU STANDARDS AND CHECKOFF LIST

A. INTRODUCTION

The Menu Standards and Checkoff List can be used as a guide for the planning and self evaluation of General Mess menus that will promote "healthy" food choices and support "health-enhancing" decisions in the food service environment. The Menu Standards are based on good nutrition principles--variety, moderation and balance--as well as the concept that menus which meet current Navy Nutritional Standards and encourage the Dietary Guidelines for Americans can and should also be acceptable, appealing and enjoyable.

B. THE DIETARY GUIDELINES FOR AMERICANS

The Dietary Guidelines for Americans listed below can serve as the overall framework for nutritious menu planning. These Guidelines, developed for healthy Americans by the U.S. Department of Agriculture and U.S. Department of Health and Human Services, are based on what we know today about the relationship of diet to good health.

- Eat a Variety of Foods. One way to assure variety is to select foods for the menu from each of the major food groups: fruits and vegetables; breads and cereals; milk and dairy products such as cheese; and meats, fish, poultry, eggs, and dry beans and peas. Serve different foods from within these groups, and take advantage of the wide variety of Armed Forces Recipe Service (AFRS) recipes and foods, especially the seafood, poultry, fruits and vegetables, available within the Navy supply system.

- Maintain Desirable Weight.

- Avoid Too Much Fat, Saturated Fat, and Cholesterol.

- Eat Foods with Adequate Starch and Fiber. Emphasis should be placed on fiber-rich foods such as whole grain products, vegetables, and mature legumes.

- Avoid Too Much Sugar. The major health hazard from eating too much sugar is dental cavities.

. Avoid Too Much Salt.

C. MEETING NUTRITIONAL STANDARDS AND CNO GOALS

1. A good source of vitamin C--such as citrus fruit and/or juice--should be served each breakfast. Some good sources of vitamin C include orange juice; oranges; grapefruit; grapefruit juice; tangerines; cantaloupe, cranberry juice cocktail; strawberries; tomato juice.

2. The following menu planning guidance should be consulted in order to assure nutritional adequacy:

   a. Food Service Operations. NAVSUP P-421.
   b. Navy Food Service, NAVSUP P-476.
   c. Armed Forces Recipe Service, NAVSUP P-7 and Index.

3. In order to provide variety and reduce saturated fat, fish and poultry should be integrated throughout the menu cycle.

4. Menus should be evaluated for too many:

   a. deep fat fried items
   b. sauteed/fried items
   c. sauced and/or gravy items

5. A non-fried entree will be offered as an alternate choice when a fried entree is featured.

6. In order to provide a lower calorie/lower fat choice, menus should be planned (whenever feasible) to include an entree without gravy when the entree incorporates a gravy.

7. Menus should offer a hot low calorie vegetable prepared without added butter or fat for patrons who do not desire a fried or buttered vegetable.

8. Avoid having more than one deep fat fried entree daily. (Exceptions are menus that offer multiple entrees).

9. When serving a meat that is high in fat such as sausage, spareribs, corned beef, pastrami or knockwurst, serve a lower fat entree for the other meal such as roast meat, fish or poultry.

10. Select entrees that can be baked or roasted to the maximum extent possible. Note: many "extended" entrees that include combinations with starches and/or vegetables such as chicken and rice, sukiyaki, spaghetti, tacos are good choices also.

11. Each of the four basic food groups in the recommended quantities should be represented in each day's menu. Low calorie menus should also include foods from each of the four groups of the Daily Food Guide (see NAVSUP P-421, chapter 10).

12. Low calorie meals should include all the basic menu components without the high calorie extras. (Refer to Guideline Card A26, "Guidelines for Calories," Change 2, AFRS, NAVSUP P-7).

13. If weight control information is included with your menu, it should be accurate and up-to-date.

14. The menu should be evaluated for reduced calorie choices:

    a. One low calorie salad dressing;

    b. Low fat and/or skim milk (Refer to "Use of Low Fat Milk in Navy General Messes," NAVSUPINST 4061.13, 2 Jan 86);

    c. An entree that isn't fried;

    d. An entree without a gravy;

    e. A low calorie, acceptable vegetable choice (look at preparation method);

    f. A lower calorie dessert choice (lower calorie dessert choices include fruit, low fat yogurt, sherbet, smaller portions, gelatin; fruit and yogurt are the most nutrient dense, i.e., nutrients in proportion to calories);

    g. An egg entree at breakfast prepared without added fat, i.e., hard cooked, soft cooked;

    h. Salad bar menus should include a tossed green salad whenever possible;

    i. Smaller portions should be available. Consult "Nutrition Education Lesson Plans," Food

Service Operations, NAVSUP P-421, Chapter 10, and "Guidelines for Calories", AFRS, Guideline Card A26, NAVSUP P-7.

15. A good source of vitamin A should be scheduled at least every other day. Some examples include dark green and deep yellow fruits and vegetables such as broccoli, sweet potatoes, green peppers and cantaloupe.

16. Fresh and/or canned fruits should be served to the maximum extent possible in order to provide nutrient dense, lower calorie choices. Ideally, fruit should be offered at each meal.

17. Seasonal fruits and vegetables should be incorporated into the menu as much as possible.

18. Ideally, two hot vegetables should be served in addition to the potato or potato substitute. Exceptions are lunch and dinner meals with entrees containing vegetables. Some examples include: spaghetti with tomato sauce, stews, pot pies, tacos. One vegetable can be served with these meals. Note: items such as corn and legumes are "starchy" vegetables and are considered potato substitutes.

19. Salad bar selections should complement the other components of the meal.

20. Alternate meat and vegetable items should be provided when rabbit, liver, Brussels sprouts, rutabagas, lamb or other traditionally less popular items are served.

21. Meals featuring cold cut meats, such as bologna, should also include cold sliced roast meats and cheese.

22. Avoid serving meals with too many high sodium foods, i.e., knockwurst and sauerkraut with a vegetable prepared with bacon. Space high sodium foods carefully throughout the menu cycle. When serving a high sodium food such as ham, corned beef or other cured meats serve a lower sodium food such as fresh meat/fish/poultry at the next meal. Balance high sodium main dishes, such as an entree prepared with soy sauce, with lower sodium side dishes.

23. Avoid reliance on snack foods such as potato chips as the speedline starch choice/sandwich accompaniment.

24. Include a variety of fresh vegetables on relish trays to the maximum extent possible.

25. Ideally, a choice of two different types of entrees should be offered to every patron when possible.

26. A whole grain bread selection will be served at each meal when feasible.

27. At least one whole grain breakfast cereal will be offered whenever possible.

D. FOOD COMBINATIONS/SCHEDULING/VARIETY/INNOVATION

1. Check the menu to see if the combinations served are acceptable to most people. Do the vegetables and starch complement both entrees? For example, sweet potatoes go nicely with baked ham but do not really complement liver fiesta.

2. Evaluate the menu to see if the preparation methods are varied in the same meal, same day, and throughout the menu cycle. Example, are the potatoes always mashed?

3. Evaluate the menu for variety from week to week as well as within each week and from meal to meal.

4. Check the speedline/fast food line for variety. Consult the N Section (sandwiches) of the Armed Forces Recipe Service and ideas in Navy Food Service, NAVSUP P-476.

5. Evaluate the menu for overscheduling. Although popular, beef entrees, corn, fried potatoes might lose popularity if served daily. Two or three meals per week is a recommended frequency for popular vegetables.

6. Check meal sequence. Avoid serving the same meal on the same day of the week.

7. Make effective use of the Armed Forces Recipe Service.

8. Grilled eggs to order and assorted omelets should be offered daily for breakfast.

9. Hot biscuits or rolls should be offered with each meal. Cornbread, muffins, garlic bread and similar items should be offered as applicable.

10. A variety of sliced breads should be offered at all meals.

11. A choice of two or more spreads for bread will be offered at each meal, i.e., butter, jam, jelly, marmalade, honey. Peanut butter will be offered at each meal.

12. A different type of soup will be served for the second meal when two soups are offered on the day's menu. Soup ingredients should differ from other menu selections of the meal. Example: tomato sauce-tomato soup; chicken-chicken soup; baked beans-knickerbocker soup.

13. The type of soup must be specified on the menu. Terms such as "soup of the day" will not be used.

14. In most cases, sandwiches should be served as the alternate entree. The concern here is about menus that rely almost solely on less complete sandwich lunch meals which are very labor intensive to prepare.

15. Theme meals/special meals/"monotony breakers" should be included in the cycle menu. Theme or ethnic meals should be indicated on the menu with special titles such as "Mexican Fiesta" or "Hawaiian Luau". Other theme meal ideas may be based on famous places, people and events. Three theme meals for each 35-42 day cycle menu are adequate.

16. Special meals include holiday meals, cook-outs, brunches and birthday meals. Each activity should feature one special meal for every 35-42 day cycle menu. Special meals are important as morale boosters and they also help Mess Management Specialists to use their individual talents.

17. A meat frequency chart should be developed and used as the basis for planning each cycle menu. Frequency charts for major menu items (entrees, potatoes, potato substitutes, vegetables) should also be developed and used when planning cycle menus.

18. Variety of the following characteristics is desirable:

a. Color - Check for overuse of yellow, orange-red, and white items; the best way is to try to picture the meal items on a plate. It is very helpful to look at the meal on the steamtable from the customer's side of the serving line.

b. Shape - The combination of hamburgers, potato patties, and beets would be an example of poor shape variety.

c. Texture - Avoid a meal containing all fried items or all mushy items. Also, with heavy meals, light appetizers are recommended and vice versa. Light desserts should be offered daily.

d. Flavor - Avoid too many similar flavors in a meal. For example, corn should not be scheduled with a meal containing cornbread or cornbread dressing; or sweet potatoes with pumpkin or sweet potato pie.

E. MENU TERMS AND PUNCTUATION

1. Menu terms should be understandable to customers.

2. Brand names should not be used on the menu, because the specific brand cannot be continuously procured with a competitive bid system. For example, "Jello" is a brand name. Fruit flavored gelatin is a substitute title.

3. Avoid using regional terms that imply that a food was procured from a particular region. Common errors include Irish, Idaho, and Maine potatoes; Maryland crab; and Iowa corn. However, regional terms used to designate a style of preparation are acceptable. Examples include Irish Stew, Texas Barbecue, and New England Clam Chowder.

4. Correct punctuation and spelling make a menu more professional. Refer to a dictionary or the Armed Forces Recipe Service when in doubt.

5. Menu items should be listed in the following order.

a. Appetizer/Soup
b. Entrees - Gravy, sauce (If required)

c. Starches
d. Cooked vegetables
e. Salads
f. Breads/butter
g. Desserts
h. Beverages

F. FOOD PREPARATION

1. A weekly cookery critique attended by all senior mess management specialists (MS) of both watch sections will be conducted using the previous work sheets for reference, discuss specific food preparation improvements needed, based upon recent experience with the coming week's menu.

2. The Armed Forces Recipe Service (AFRS) or locally approved and recorded recipes will be used for all food preparation. The number of portions will be computed at least one day in advance.

3. Supervisors will sample each item during preparation to ensure quality.

1986-1988 NUTRITION/MERCHANDIZING ARTICLES IN NAVY FOOD SERVICE, NAVSUP PUB 476

Article	Issue
Food Service Initiatives--An Overview	Oct-Dec 1986
Vegetables - Color Them Attractive	Oct-Dec 1986
Lightening Up Traditional Desserts	Oct-Dec 1986
Dessert Bars - The Lighter Way	Jul-Sep 1986
What's New in Change 2 to AFRS	Jul-Sep 1986
Dietary Guidelines For Americans	Apr-Jun 1986
Meeting Nutritional Standards - Part 2	Apr-Jun 1986
Salt/Fat Reductions in Change 1	Jan-Mar 1986
Gourmet Salad Bar Selections	Jan-Mar 1986
Nutrition IQ Test	Oct-Dec 1987
Salad Bar Calories	Oct-Dec 1987
New "Healthy" Choices Reduced Calorie Menu Plan	Jul-Sep 1987
Salad Bars	Jul-Sep 1987
Progressive (Batch) Cooking Tips	Jul-Sep 1987
Ideas for Healthy Choices-Healthy Menus	Apr-Jun 1987
NAVFSSO Menu Standards Check-Off List	Apr-Jun 1987
Salt/Fat Reductions in CH-2 to AFRS	Jan-Mar 1987
Guidelines for Fruit Bars	Jan-Mar 1987
The Other Leafy Salad Greens	Jan-Mar 1987
Food Flash On Fat and Cholesterol	Jan 1988
Place a Net on Seafood Facts	Jan-Feb-Mar 1988
1986-1987 Nutrition/Merchandising Articles	Jan-Feb-Mar 1988
How Fat Calories are Calculated	Jan-Feb-Mar 1988
March is Navy Nutrition Month	Jan-Feb-Mar 1988
Answers to Fat and Cholesterol Quiz on Cover	Jan-Feb-Mar 1988
Salt/Fat Reductions in CH-3 to the AFRS	Jan-Feb-Mar 1988
Snack Calories - A Muncher's Manual	Jan-Feb-Mar 1988
Eating in the General Mess	Apr-May-Jun 1988
Sugar Substitute	Apr-May-Jun 1988
Spare the Frostings	Apr-May-Jun 1988
The Registered Dietitian, (R.D.)	Apr-May-Jun 1988
What's Wrong With This Meal	Apr-May-Jun 1988
Menu Planning Update	Jul-Aug-Sep 1988
Fish - for Convenience and Fitness	Oct-Nov-Dec 1988

CALORIES IN FAST FOODS

McDonald's

Breakfast

Egg McMuffin	340
English Muffin/butter	190
Hash Browns	145
Hot cakes/butter & syrup	422
Sausage	210
Scrambled Eggs	180
Biscuit (plain)	257
Biscuit/sausage	470
Biscuit/sausage/egg	590
Sausage McMuffin	430
Sausage McMuffin/egg	520
Breakfast Danish (average amount)	400
Juice (6 oz. orange or grapefruit	80
Milk (8 oz., low fat)	120

Others

Big Mac	570
Cheeseburger	320
Chicken McNuggets(6)	320
Chicken McNugget Sauce	
barbecue	60
honey	50
hot mustard	63
sweet/sour	64
Cookies, chocolate chip	340
Cookies, McDonaldland	310
Ice cream in sugarcone	190
Pie, apple	250
Pie, cherry	260
Shake, chocolate	380
Shake, strawberry	360
Shake, vanilla	350
Sundae, caramel	318
Sundae, hot fudge	314
Sundae, strawberry	277
Fish sandwich	430
Fries, regular	220
Hamburger	260
Quarterpounder	430
Quarterpounder/cheese	530

McDonald's (cont.)

Soft Drinks

12 oz. small cola	144
16 oz. small cola	190
22 oz. small cola	264

Salads

Chef Salad	226
Shrimp Salad	99
Garden Salad	91
Chicken Salad Oriental	146
Side Salad	48

Salad Dressings (2 servings per package; calories per package)

Bleu Cheese	342
French	228
House	326
1000 Island	396
Lite Vinaigrette	50
Oriental	102

CALORIES IN FAST FOODS

Arby's

Club Sandwich	560
Ham/Cheese sandwich	380
Junior roast beef sandwich	220
Roast beef/cheese sandwich	450
Super roast beef sandwich	620
Turkey sandwich	510

Arthur Treacher's

Chicken, fried	369
Chicken sandwich	413
Chips	275
Coleslaw	118
Fish, fried	354
Fish sandwich	440
Krunchpup (hotdog)	204
Shrimp, fried	381

Burger King

Whopper Junior	370
Whopper junior/cheese	420
Onion rings, regular	270
Pie, apple	240
Shake, chocolate	340
Shake, vanilla	340

Church's Fried Chicken

Chicken, dark meat fried	305
Chicken, white meat fried	327

Dairy Queen

Cheesedog	330
Cheesedog, super	593
Hamburger	260
Hamburger, big	457
Hamburger, big deluxe	470
Hamburger, super	783
Cheeseburger	318
Cheeseburger, big	553
Hotdog	273
Hotdog, super	518
Onion rings	300
Chilidog	330
Chilidog, super	555

Dairy Queen (cont.)

Desserts

Banana split	540
Buster bar	390
Hot fudge brownie delight	570

Ice Cream Cones

small	110
medium	230
large	340

Shakes

small	340
medium	600
large	840

Sundaes (chocolate)

small	170
medium	290
large	400

Fish sandwich	400
Fish sandwich/cheese	440
Fries, regular	200

Kentucky Fried Chicken

Chicken sandwich	436
Chicken, fried	
1 drumstick, crispy	155
1 drumstick, original	117
1 keel, crispy	297
1 keel, original	236
1 side breast, crispy	286
1 side breast, original	199
1 thigh, crispy	343
1 thigh, original	257
1 wing, crispy	201
1 wing, original	136

CALORIES IN FAST FOODS

Kentucky Fried Chicken (cont.)

Other

Coleslaw	121
Corn on the cob	169
Fries	184
Gravy	23
Potatoes, mashed	64

Long John Silver

Chicken planks (4)	457
Chowder	107
Clams, breaded	617
Coleslaw	138
Corn on the cob	176
Fish sandwich	560
Fish/batter (2 pieces)	366
Fries	288
Hush puppies (3)	153
Scallops (6)	283
Oysters (6)	441
Peg Legs (5)	440
Shrimp	268
Treasure Chest	540

Pizza

Cheese, regular crust 1/2 of 12"	653
Cheese, thin crust 1/2 of 10"	359
Cheese, thick crust 1/2 of 10"	460

Taco Bell

Burrito, bean	350
Burrito, beef	466
Burrito, combination	404
Burrito, supreme	457
Cheeseburger	278
Enchirito	373
Frijoles/cheese	232
Hamburger	221
Taco	162
Tostado	179
Tostado/beef	291

Wendy's

Cheeseburger, single	580
Cheeseburger, double	800
Cheeseburger, triple	1040
Chili	230
Fries	330
Hamburger, single	470
Hamburger, double	670
Hamburger, triple	850
Frosty, small	400
Baked potato (plain)	250
Baked potato (sour cream)	460

Submarine sandwiches

6" ham, salami, and cheese, no mayo)	449
8" ham, salami, and cheese, no mayo)	639

Sources:

Pennington and Church
Food Values of Portions Commonly Used
14th ed., Harper and Row Publishers, 1985

Barbara Kraus
Calories and Carbohydrates
Signet Books, 1987

McDonald's Nutrition Information Pamphlets
McD-15149-Revised 9/87
McD-15459B-Revised 5/87
McD15067 1988

EXCHANGE LISTS

Fruits and Juices

(Unsweetened or in its own juice)
Each serving provides 60 calories, 15 grams carbohydrate

Apple - 1 small
Apple juice - 1/2 cup
Applesauce - 1/2 cup
Apricots, raw - 4
Apricots, canned - 1/2 cup
Banana - 1/2 medium
Berries, raw - 1 cup
Cherries - 12 large
Cranberry juice - 1/3 cup
Fruit Cocktail - 1/2 cup
Grapefruit - 1/2 cup
Grapes - 15 small
Grape juice - 1/3 cup
Melon, raw - 1/4 medium
Orange juice - 1/2 cup
Peach - 1 medium or
1/2 cup canned
Pear - 1 small or
1/2 cup canned
Pineapple, raw - 3/4 cup
Pineapple, canned - 1/3 cup
Pineapple juice - 1/2 cup
Plum - 2 medium
Prunes - 2 medium
Prune juice - 1/2 cup
Raisins - 2 tbsp.
Tangerine - 2 small

Vegetables

Serving size - 1/2 cup cooked plain or 1 cup raw. Each serving provides 25 calories, 5 grams carbohydrate, 2 grams protein:

Asparagus
Beans (green wax)
Bean sprouts
Beets
Broccoli
Brussel sprouts
Cabbage, cooked
Carrots
Cauliflower
Eggplant
Greens
Mushrooms, cooked
Onions
Peppers, green
Sauerkraut
Spinach, cooked
Summer squash
Tomato (1 large)
Tomato/vegetable juice
Zucchini, cooked

Free vegetables - raw 1 cup serving

Cabbage
Celery
Cucumber
Green onion
Hot peppers
Mushrooms
Radishes
Zucchini
Lettuce
Spinach

EXCHANGE LISTS, CONTINUED

Milk and Milk Products

Each serving provides 12 grams Carbohydrate, 8 grams Protein

Fat varies with each product:

Skim/very low fat milk	Trace of Fat	90 Calories
Skim milk	1 cup	
Lowfat buttermilk	1 cup	
Dry nonfat milk	1/3 cup	
Lowfat/2% milk	**5 grams Fat**	**120 Calories**
Plain lowfat yogurt	1 cup	
Lowfat/2% milk	1 cup	
Whole milk	**8 grams Fat**	**150 Calories**
Whole milk	1 cup	
Evaporated Whole milk	1/2 cup	
Whole plain yogurt	1 cup	

Free Foods

The following foods contain less than 20 calories per serving and may be eaten as desired. Foods with specific serving sizes should be limited to 2 to 3 per day.

Drinks:

Bouillon fat free
Sugar free drinks
Club soda
Cocoa powder 1 tbsp
Coffee/Tea

Condiments:

Catsup 1 tbsp
Horseradish
Mustard
Pickles, dill
Low calorie
  Salad Dressing 2 tbsp
  Taco sauce 1 tbsp
  Vinegar

Fruit:

Cranberries (unsweetened) 1/2 cup
Rhubarb (unsweetened) 1/2 cup

Sweet Substitutes:

Sugar free hard candy
Sugar free gelatin
Sugar free gum
Sugar free jam/jelly 2 tsp
Sugar free pancake syrup
Sugar substitutes
Whipped topping 2 tbsp

Meats

Each 1 oz. serving provides 7 grams calories for 1 oz (fat varies with each product)

Lean meat	3 grams Fat	55 calories for 1 oz.

95% fat free lunch meat, very lean beef, pork, veal, chicken, turkey, cornish hen (all with no skin), fish, fresh and frozen, tuna (1/4 c. in water) uncreamed herring, smoked sardines, (canned 2 medium)

Cheese:
- Cottage 1/4 cup
- Grated parmesan 2 tbsp.
- Diet cheeses (55-80 calories) 1 oz.

Meats

Each 1 oz. serving provides 7 grams protein:

Medium fat meat	5 grams Fat	75 calories per oz.

Most beef, pork, lamb products, chicken with skin, goose, ground turkey

Fish:
- Tuna canned in oil 1/4 cup
- Salmon canned 1/4 cup

Cheese:
- Skim or part-skim milk cheese
- Mozzarella 1 oz.
- Diet cheese 1 oz.

Other:
- Eggs 1
- Egg substitutes 1/4 cup
- Tofu 4 oz.
- Organ meats 1 oz.

EXCHANGE LISTS, CONTINUED

Meats

Each 1 oz. serving provides 7 grams protein

High fat meat	8 grams Fat	100 calories per oz.

Prime cuts of beef, corned beef, pork ribs, sausage, ground pork, lamb patties, fried fish
Cheese:
  All regular
  American, Blue, Cheddar, Monterey, Swiss
Other:
  Lunch meats
  Sausage
  Hotdogs, turkey or chicken 1
  Peanut butter 1 tbsp
  Hotdogs, beef, pork 1
  (add 1 more fat)

Fats

Each serving provides 45 calories, 5 grams fat:

Unsaturated fats	Saturated fats
Avocado 1/8 medium	Butter 1 tsp (1 pat)
Margarine 1 tsp	Bacon 1 slice
Margarine, diet 1 tbsp	Coffee creamer, powder 4 tsp
Mayonnaise 1 tsp	Cream, sour 2 tbsp
Mayonnaise, imitation 1 tsp	Cream cheese 1 tbsp
Nuts and seeds:	
Almonds, dry roasted 6 whole	
Cashews, dry roasted 1 tbsp	
Peanuts 20 small	
Sunflower (no shells) 1 tbsp	
Pumpkin 2 tsp	
Oil (corn, cottonseed 1 tsp	
safflower, soybean,	
sunflower, olive, peanut)	
Olives 10 small	
Salad dressing, mayo type 1 tsp	
Salad dressing, mayo type, reduced calorie 1 tbsp	
Salad dressing (other varieties) 1 tbsp	

Breads/Cereals/Starches

Each serving provides 80 calories, 15 grams carbohydrate, 3 grams protein:

Cereal/Grain/Pasta

Bran Cereal 1/3 cup
Cooked Cereal 1/2 cup
Unsweetened cereals 3/4 cup
Pasta, cooked 1/2 cup
Rice, cooked 1/2 cup
Wheat Germ 3 tbsp

Bread

Bagel 1/2
English Muffin 1/2
Hotdog, Hamburger bun 1/2
Pita, 6" 1/2
Plain roll 1
White, whole wheat 1 sl
Tortilla, 6" 1

Starchy Vegetables

Corn 1/2 cup
Corn on the cob 6" 1 ear
Lima Beans, peas 1/2 cup
Potatoes, 1 small baked
or Mashed 1/2 cup
Yam, Sweet Potatoes 1/2 cup

Crackers/Snacks

Graham Squares 3
Popcorn 3 cups
Pretzels 3/4 cup
Saltines/squares 6
Whole wheat, no fat 2-4

Starch Foods with Added Fat

Each counts as 1 starch serving and 1 fat or 125 calories

Biscuit 1
Chow mein noodles 1/2 cup
Cornbread, 2 inch
French Fries 10
Muffin, plain 1
Pancake, small 2
Stuffing, bread 1/4 cup
Taco shell, 6" 2
Waffle, small 1

SECTION FOUR

REFERENCES

PERCENT BODY FAT STANDARDS

In June of 1981, the Department of Defense (DOD) issued a new directive updating DOD policy governing physical fitness and weight control for the services. One of the changes in this directive was a change from height/weight to body weight contributed by fat (so called "percent body fat") as the basis for implementing weight control policy.

All Navy members are required to meet percent body fat standards as a condition of military service. Consideration on evaluations is given to physical fitness, military bearing, and performance. An overfat or obese service member presents not only a health risk, but does not model desirable appearance for those in leadership roles.

There are several reasons for measuring percent body fat rather than using height/weight tables. The body is composed of fat and lean (muscle) tissue. Percent body fat is expressed as a percentage of the total body weight. Obesity is an excess of body fat frequently resulting in a significant impairment of health. Obesity (excess body fat) is clearly associated with high blood pressure, diabetes, and heart disease as described by the National Institutes of Health Conference on Obesity. Fat is clearly the culprit, not total body weight. Overweight is the condition in which a member's weight exceeds the average weight-for-height table based on insurance industry standards. Although height/weight tables are still used to assess the extent of "overweightness" based on age and body size, these tables often do not provide accurate information on the amount of fat on the body. It is possible to be overweight and not be overfat, ie. wrestlers and bodybuilders. The Navy's scientifically based circumference (tape measure) method accurately measures the percent of fat on an individual.

The Naval Health Research Center, San Diego, has conducted research using actual Navy service members to define the existing circumference equations. The tables were incorporated into the current OPNAVINST 6110.1C of August 1986. The circumference method (tape measure) uses the neck, abdomen, and height measurements to determine percent body fat for males. The Navy's tape measure method has a .90 correlation with underwater weighing, which is more accurate than the DOD requirement of .85 correlation. This method of determining body fat is considered to be one of the most reliable techniques if done correctly.

The circumferential measurement (tape measure) method is currently used by the Navy because it was found to more accurately predict the percent body fat of Navy men and women than either the skinfold caliper or bioelectrical impedance technique. Unlike the hydrostatic (underwater) weighing technique which requires expensive equipment, highly trained technicians and is time consuming, taking body circumferences require only a tape measure, basic training, and a short amount

of time. These advantages make the tape measure method more feasible for mass testing and thus practical for Navy-wide use.

The key to the tape measure method is to study the pictures in OPNAVINST 6110.1C and practice. If you are a Command Fitness Coordinator (CFC), make sure the member is relaxed and standing in the correct position. You are not doing anyone a favor by pulling the tape very tight or by holding it loosely to alter measurements. If you are the member being measured, watch your CFC closely for accuracy. It is your measurement and your career. Above all, be honest with yourself. Most of us don't need a tape measure to realize the extra fat. If you are measured overfat (over 22% for males and 30% for females), you must be enrolled in the Level I program and start making some changes to reduce your body fat.

If you are referred to the medical department for diagnosis of obesity (over 26% for males and 36% for females), the medical officer may remeasure you, use calipers or suggest that you to be underwater weighed to confirm the diagnosis of obesity. However, the official measurement taken by your Command Fitness Coordinator is the only one used for administrative purposes. The official measurement just determines the amount of fat, not the cause of the obesity. Remember, for over 99 percent of our population obesity is the result of overeating and lack of exercise, not thyroid problems or medications.

National Heart, Lung, and Blood Institute

FACTS ABOUT...

Blood Cholesterol

What is "blood cholesterol?" For that matter, what is cholesterol?
Pure cholesterol is an odorless, white, waxy, powdery substance. You cannot taste it or see it in the foods you eat.

Cholesterol is found in all foods of animal origin and is part of every animal cell. Your body uses cholesterol to make essential body substances such as cell walls and hormones, as well as for various other functions. Even if you didn't eat any cholesterol, your liver would manufacture enough for your body's needs.

Cholesterol is like other fat-like substances in that it will not mix with water. Therefore, to carry cholesterol and fat ("lipid") in the blood, the body wraps them in protein packages. This combination is called a "lipoprotein." Blood cholesterol is found in all the major lipoproteins, including the low density lipoproteins (LDLs) and the high density lipoproteins (HDLs).

How is blood cholesterol measured and how are the results expressed?
To measure your blood cholesterol level, a small blood sample is taken and the amount of cholesterol is determined in a laboratory. The cholesterol level is expressed as milligrams per deciliter or "mg/dl." The average blood cholesterol level for middle-aged men and women in the U.S. is about 215 mg/dl. This means that the cholesterol found in a deciliter of liquid (which is one-tenth of a liter or approximately one-tenth of a quart) weighs 215 milligrams. For comparison, 28,350 milligrams equals 1 ounce.

Why should I care about cholesterol?
High blood cholesterol is one of three main controllable *risk factors* for coronary heart disease. A risk factor is a habit, trait, or condition in a person that is associated with an increased chance (or risk) of developing a disease. The other two main controllable risk factors for coronary heart disease are high blood pressure and cigarette smoking. Any one of these risk factors increases an individual's chance of developing heart disease, and all three together may greatly increase heart disease risk, perhaps by ten times or more. Obesity and diabetes are other risk factors. Being a male or having a family history of premature heart disease will also add to an individual's risk of heart disease.

Table 1. Classification of Total Blood Cholesterol Levels

Less than 200 mg/dl	Desirable
200 to 239 mg/dl	Borderline-high
240 mg/dl and higher	High

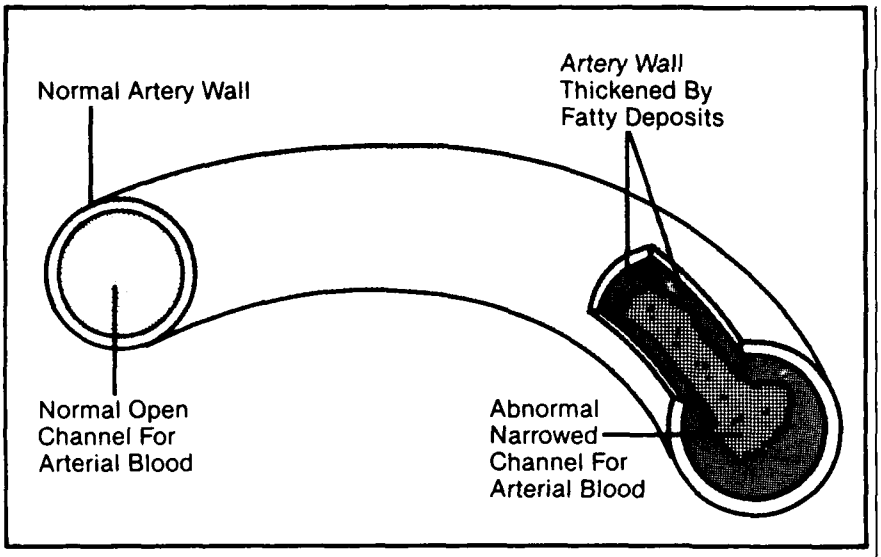
Genetic and animal studies have shown that elevated levels of blood cholesterol, whether caused by genetic defects or dietary excesses, lead to early development of hardening of the arteries and coronary heart disease. Scientific studies of large population groups (epidemiologic studies) have shown that people with high blood cholesterol have more chance of developing coronary heart disease than do people with lower levels of cholesterol, and that the chances of developing coronary heart disease increase in proportion to the amount the cholesterol is elevated, especially for values over 200 mg/dl. In the United States, people with a blood cholesterol of 240 mg/dl or higher have more than two times the risk of developing heart disease as do those with a level of under 200 mg/dl. About 25 percent of adults in the United States have blood cholesterol levels over 240 mg/dl and more than half of U.S. adults have levels over 200 mg/dl. Recently, blood cholesterol levels for adults have been classified as (1) desirable (less than 200 mg/dl), (2) borderline-high (200 to 239 mg/dl), and (3) high (240 mg/dl and above). These categories apply to all adults over age 20, regardless of age or sex, and are part of medical guidelines defined by the Adult Treatment Panel of the National Cholesterol Education Program in October 1987.

In adults, a total blood cholesterol level above 240 mg/dl warrants medical attention to help bring it down. However, levels above 200 mg/dl also increase the risk of heart disease and may require further evaluation, depending on whether other heart disease risk factors are present. When persons are evaluated for borderline-high blood cholesterol levels, other factors that increase their risk status for coronary heart disease are low HDL-cholesterol levels (below 35 mg/dl); advanced hardening of the arteries in the head, legs, feet, hands, or arms; angina or other evidence of blockages in the arteries serving the heart; or a previous heart attack. These factors are considered in addition to the main heart disease risk factors mentioned earlier.

A physician can assess a person's risk for heart disease, offer advice on how to make dietary changes which are generally sufficient to lower blood cholesterol to an acceptable level, and monitor progress toward cholesterol reduction. Persons with very high blood cholesterol levels might also be prescribed a cholesterol-lowering drug.

What is coronary heart disease and how important is it to the average American?
Almost 30 percent of the nearly 2 million deaths in this country each year are the result of coronary heart disease. Most coronary heart disease is due to blockages in the arteries that supply blood to the heart muscle. Fat and cholesterol, circulating in the blood, are deposited in the inner walls of the arteries. Over the years, scar tissue and other deposits build up as more fat and cholesterol are deposited. The arteries become narrower and narrower, much as old water pipes build up scaly mineral deposits. This process is known as atherosclerosis. When one or more of the arteries is seriously narrowed, and generally when an obstructing blood clot forms at a site of narrowing, the result is a heart attack.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Public Health Service National Institutes of Health



What factors influence my blood cholesterol level?
Diets high in saturated fat and cholesterol play a major role in the high levels of blood cholesterol found in millions of Americans. Saturated fat is the key dietary factor raising blood cholesterol levels. In contrast, dietary cholesterol has a smaller effect on blood cholesterol levels. Obesity, primarily due to an intake of calories that exceeds the needs of the body, can also lead to high cholesterol values.

In some persons, inherited tendencies affect blood cholesterol levels. When adults try to lower their blood cholesterol by dietary changes, the size of the reduction will be influenced, in some people, by whether or not they are high or low responders, that is whether their body tends to make big or small changes in blood cholesterol levels in response to dietary changes. This response rate is somewhat genetically determined. Only about 1 in every 500 adults has an inherited tendency to have very high blood cholesterol levels. However, even among these persons, dietary changes can do much to bring the high levels down. Most people can lower their blood cholesterol levels by following a diet that is lower in saturated fat and cholesterol.

Age and sex also influence blood cholesterol levels. In the United States, blood cholesterol levels in men and women start to rise at about age 20. The average blood cholesterol levels in women prior to menopause (45-60 years) are lower than those of men of the same age. After menopause, however, the average cholesterol level of women usually increases to a level higher than that of men. In men, blood cholesterol levels off around age 50 and the average blood cholesterol level declines slightly after age 50. Use of oral contraceptives can increase blood cholesterol levels in some women, as can pregnancy. However, blood cholesterol should return to normal 20 weeks after childbirth.

What are LDL and HDL?
LDL and HDL refer to two types of lipoproteins, packages of fat, cholesterol, and protein that are made by the body to transport fat and cholesterol through the blood.

LDLs are the low density lipoproteins that contain the greatest amounts of cholesterol and may be responsible for depositing cholesterol in the artery walls. For that reason they are sometimes known as "bad" cholesterol.

HDLs are the high density lipoproteins. HDLs contain the greatest amounts of protein and small amounts of cholesterol. They are believed to take cholesterol away from cells in the artery wall and transport it back to the liver for reprocessing or removal from the body. Researchers have noted that persons with higher levels of HDL have less heart disease. Thus HDLs have become known as the "good" cholesterol. Women generally have higher levels of HDL, and this may explain in part why they have fewer heart attacks than do men. In some cases, but certainly not in all cases, some women may even have a high total cholesterol due to a high HDL level.

What can I do to raise my level of HDLs?
Higher levels of HDL usually are found in people who exercise regularly, don't smoke, and stay at desirable weight. Therefore, quitting smoking, exercising regularly, and losing weight (if overweight) are ways to raise HDL levels. Adopting these practices is also good for general health.

Should I have my blood cholesterol checked?
Yes, blood cholesterol should be checked periodically as part of a physical examination. It is recommended that all adults age 20 and over have their blood cholesterol measured at least once every 5 years. Cholesterol measurement usually requires that a blood specimen be obtained by drawing blood from the arm. The sample is then sent to the laboratory for analysis. Sometimes, to get a complete picture of the cholesterol fractions in the blood, the doctor will ask that the report be made in terms of the amount of cholesterol carried on the low density lipoproteins (LDL-cholesterol) and on the high density lipoproteins (HDL-cholesterol).

In screening programs, blood cholesterol may often be measured using a drop of blood obtained by pricking a finger, an almost painless procedure. The tiny "fingerstick" blood sample is then analyzed by a portable machine that gives a cholesterol value within minutes. Such methods provide approximate values for blood cholesterol levels. However, because of variations due to differences in sample handling techniques, types of machines used, and training of volunteer personnel, high or borderline-high values should be rechecked by a second sample taken by a physician.

Are there benefits from reducing blood cholesterol?
The benefits of lowering blood cholesterol are real. It will slow the fatty buildup in the arteries and in some cases even reverse the process. Lowering blood cholesterol also definitely reduces risk of a heart attack and of death caused by a heart attack.

In a study of coronary bypass patients, reported in 1987, substantial reduction of blood cholesterol led to slowing of the atherosclerotic process and, in some cases, to its partial reversal. In the beginning of the study, all the men had fatty blockages in key arteries serving the heart that were severe enough to require a bypass operation. Among persons who lowered their blood cholesterol markedly, there were fewer new fatty deposits and fewer increases in size of

existing deposits than in the group who did not lower their blood cholesterol as much. In addition, there was some shrinkage of fatty deposits associated with marked lowering of blood cholesterol levels during the 2 years of the study.

Another major research study proved that people who have high blood cholesterol and who reduce it also reduce their risk of heart attack. At the beginning of this study, all persons had blood cholesterol levels in the "high" category but did not have any heart disease. After 6 years, among persons who lowered their high blood cholesterol substantially, there were fewer heart attacks or deaths from heart attacks than in the group who did not lower their levels as much. In fact, among the adults in this study, for each 1 percent reduction in total blood cholesterol, there was roughly a 2 percent reduction in the number of heart attacks. This means that, if blood cholesterol levels are reduced by 10-15 percent, the risk of heart attack drops by 20-30 percent.

The results of these two major studies and the overwhelming body of scientific evidence support the concept that high blood cholesterol increases risk of coronary heart disease and that lowering of high blood cholesterol levels, especially LDL-cholesterol, decreases the risk of coronary heart disease. This same evidence led the National Heart, Lung, and Blood Institute to launch the National Cholesterol Education Program (NCEP) to help educate people about reducing high blood cholesterol.

What are saturated fat and unsaturated fat and where are they found in foods?

The fat we eat contains fatty acids that are saturated or unsaturated, terms that refer to the chemical structure of the fatty acids in the fat molecules. Unsaturated fatty acids are further divided into two kinds—monounsaturated fatty acids and polyunsaturated fatty acids. Food fats contain a mixture of the three kinds of fatty acids. When a fat contains a large proportion of saturated fatty acids, it is said to be "a saturated fat." Alternatively, the same fat can be called "highly saturated" or "high in saturates." When a fat contains a large proportion of polyunsaturated fatty acids, it is often called "a polyunsaturated fat," but it can also be said to be "high in polyunsaturates" or "highly polyunsaturated." Similarly, when a fat or oil contains a large proportion of monounsaturated fatty acids, it is often called a "monounsaturated fat." However, it is also said to be "highly monounsaturated" or "high in monounsaturated fatty acids."

The major sources of saturated fatty acids in the diet are the fats in meats and dairy products. Beef fat and butter fat are rich in saturated fatty acids, as can be seen in Table 2. Butter fat is the fat found in milk, cheeses, cream, ice cream, and other products made from milk or cream. However, dairy products that are low in fat are also lower in saturated fat. In contrast, the fat from poultry or fish is, in general, more unsaturated than beef fat or butterfat. A few vegetable fats are quite high in saturated fatty acids. These are coconut oil, palm kernel oil, palm oil, and the cocoa fat found in chocolate. These four are not available for consumers to purchase but are often used in commercial baked goods and other processed foods.

Other vegetable oils, while composed of all three types of fatty acids, are rich in polyunsaturated or monounsaturated fatty acids. Vegetable oils with the highest amounts of polyunsaturates are safflower oil, sunflower oil, corn oil, soybean oil, and cottonseed oil. Monounsaturated fatty acids are found in large amounts in olive oil, canola oil, and peanut oil. A few foods from plants (nuts or avocado, for example) do contain substantial total fat, although their fat is largely in an unsaturated form. Hydrogenated

Table 2: Fats and Oils: Differences in Fatty Acids Are Important

Vegetable Oils and Shortening	Polyunsaturated Fatty Acids*	Monounsaturated Fatty Acids*	Total Unsaturated Fatty Acids**	Saturated Fatty Acids*
Safflower oil	75%	12%	86%	9%
Sunflower oil	66%	20%	86%	10%
Corn oil	59%	24%	83%	13%
Soybean oil	58%	23%	81%	14%
Cottonseed oil	52%	18%	70%	26%
Canola oil	33%	55%	88%	7%
Olive oil	8%	74%	82%	13%
Peanut oil	32%	46%	78%	17%
Soft tub margarine***	31%	47%	78%	18%
Stick margarine***	18%	59%	77%	19%
Household vegetable shortening***	14%	51%	65%	31%
Palm oil	9%	37%	46%	49%
Coconut oil	2%	6%	8%	86%
Palm kernel oil	2%	11%	13%	81%
Animal Fats				
Tuna fat****	37%	26%	63%	27%
Chicken fat	21%	45%	66%	30%
Lard	11%	45%	56%	40%
Mutton fat	8%	41%	49%	47%
Beef fat	4%	42%	46%	50%
Butter fat	4%	29%	33%	62%

*Values are given as percent of total fat.

**Total unsaturated fatty acids = polyunsaturated fatty acids + monounsaturated fatty acids. The sum of total unsaturated fatty acids + saturated fatty acids will not add to 100 percent because each item has a small amount of other fatty substances that are neither saturated nor unsaturated. The size of the "other" category will vary.

***Made with hydrogenated soybean oil + hydrogenated cottonseed oil.

****Fat from white tuna, canned in water, drained solids.

vegetable oils and solid vegetable shortenings are lower in polyunsaturated fatty acids and higher in both saturated and monounsaturated fatty acids than the unhydrogenated versions of the same oils.

What is dietary cholesterol and where is it found in foods?
Dietary cholesterol is the cholesterol found in the foods we eat. Although it is not visible to the eye, it is found in all foods of animal origin, including meat, fish, poultry, and dairy products. Since cholesterol is not the same as fat, a food may contain substantial cholesterol but only a moderate amount of saturated fat (for example, an egg yolk). Foods of plant origin have no cholesterol. These include vegetables, fruits, grains (which are made into cereals and flours), nuts and seeds, and vegetable oils.

How do dietary fats and cholesterol influence blood cholesterol levels?
In the typical American diet, the saturated fat content is the strongest contributor to raising blood cholesterol. The cholesterol in foods also contributes, but to a much lesser extent than saturated fat. Polyunsaturated fats will lower blood cholesterol, but only about half as much as saturated fats will raise it. In other words, if eating a given amount of saturated fat will raise your blood cholesterol by 10 percent, the same amount of polyunsaturated fat will lower blood cholesterol, but only by about 5 percent. Unsaturated fats in general (including both monounsaturates and polyunsaturates), when substituted for saturated fat, will lower blood cholesterol levels.

Does the average American eat too much fat and cholesterol?
Fat is a major source of calories in the American diet, contributing about 35-40 percent of the total caloric intake. For comparison, in Japan where heart disease is uncommon, the typical diet contains only about 25 percent fat. The average American eats some 350 to 450 mg of cholesterol each day.

For adults with high blood cholesterol levels, the National Cholesterol Education Program's Adult Treatment Report recommends a reduction in daily fat intake to less than 30 percent of calories (with less than 10 percent of calories from saturated fat, no more than 10 percent from polyunsaturated fat, and 10 to 15 percent from monounsaturated fat) and a reduction in dietary cholesterol to less than 300 mg per day. Such dietary changes will help lower blood cholesterol and reduce the overall risk of heart disease.

Can I lower my blood cholesterol level?
Many studies have shown that blood cholesterol can be lowered by dietary changes, and, on the average, a 10 to 15 percent reduction in blood cholesterol can be achieved. Some people will do even better. Depending on the initial level, on how much eating habits are changed, and on the body's response, this can translate, over several months, into a blood cholesterol reduction of 30 to 55 mg/dl. The higher the initial blood cholesterol level, the greater the overall reduction that can be expected. Also, people whose diets are high in saturated fat will probably see larger reductions than persons whose diets are low in saturated fat. *Since saturated fat raises blood cholesterol more than anything else in the diet, the most effective way to lower blood cholesterol is to eat less saturated fat.*

How much blood cholesterol is lowered depends on how much saturated fat and cholesterol are eliminated from the diet and on how consistently a low-saturated fat, low-cholesterol eating style can be maintained. The size of blood cholesterol reduction also depends, in some persons, on whether they are high or low responders, that is, whether their body tends to respond to dietary changes with big or small changes in blood cholesterol.

For anyone who is overweight, reduction of weight will often lower blood cholesterol, especially the LDL-cholesterol. Reducing dietary fats, the most concentrated source of calories, is essential in weight reduction. All fats, whether they are saturated or unsaturated, are a rich source of calories. One gram of fat provides about 9 calories, compared to about 4 calories for a gram of protein or carbohydrate. For persons who are of desirable weight, blood cholesterol can be lowered by cutting down on saturated fat and cholesterol; by replacing saturated fatty acids with polyunsaturated fatty acids, monounsaturated fatty acids, and complex carbohydrates; and by monitoring the daily intake of calories so that weight remains constant.

How do I lower my blood cholesterol?
Dietary changes that work together to reduce total fat, especially saturated fat, and cholesterol will work to lower blood cholesterol levels in most people. A number of approaches have been proven to help. For persons whose blood cholesterol is too high, the following dietary changes are recommended:

1. Eat less total fat
—by eating less fat and oil
—by eating fewer high fat foods. High fat foods often contain large amounts of saturated fat.

2. Eat less saturated fat
—by eating fewer foods high in saturated fat
—by replacing saturated fat with unsaturated fat when possible.

3. Eat less cholesterol
—by choosing fewer or eating smaller amounts of high cholesterol foods.

4. Eat more complex carbohydrates (starch and fiber). Foods high in complex carbohydrates are usually low in fat and contain no cholesterol.

5. Lose weight, if overweight
—by decreasing the number of calories taken in and increasing the number of calories used (exercise).

These steps are consistent with the *Dietary Guidelines for Americans* which have been developed by the U.S. Department of Agriculture and the U.S. Department of Health and Human Services. Four of the seven dietary guidelines include advice to eat a variety of foods, to maintain desirable weight, to eat foods with adequate starch and fiber, and to avoid too much fat, saturated fat, and cholesterol. Eating a variety of foods will help supply essential nutrients in the diet. The other three dietary guidelines advise avoiding too much sugar, avoiding too much sodium, and moderation in drinking alcoholic beverages.

For persons with high blood cholesterol, some key points to remember and some practical steps for following the five dietary changes that help to lower blood cholesterol levels:

To eat less total fat:
Key points to remember
- Within any food category, there are high fat and low fat items. Examples are given in Table 3.
- Sausage and most processed luncheon meats are high in fat and saturated fat.
- Cream, sour cream, ice cream, butter, and many cheeses are high in fat and saturated fat.

Practical ideas
- Choose low fat items when selecting foods.
- Choose fish, poultry, lean cuts of meat, and eat moderate portions.

- Trim fat from meat and remove skin from poultry before cooking and eating.
- Choose low fat dairy products, such as skim or low fat milk, low fat yogurt, low fat cheeses, sherbet, or ice milk, instead of high fat dairy products.
- Bake, roast, or broil foods, instead of frying.
- Add less fat and shortening to foods when cooking.

To eat less saturated fat:
Key points to remember
- Steps that reduce total fat can also work to reduce saturated fat as well.
- Most animal fats generally contain high proportions of saturated fat (as shown in Table 2) while the fat in chicken and fish contain higher proportions of polyunsaturated fatty acids.
- The vegetable oils from palm kernel, coconut, and palm, as well as cocoa fat, contain large proportions of saturated fat.
- Vegetable oils with the highest proportions of polyunsaturated fat are safflower, sunflower, corn, soybean, and cottonseed oils.
- Many margarines are lower in saturated fat and higher in unsaturated fats than butter.

Practical ideas
- Choose low fat dairy products, lean cuts of meat, chicken, and fish.
- Choose low fat baked goods made with oils high in unsaturated fat and low in saturated fat.
- When using fats and oils, use only small amounts and replace those high in saturated fat with items high in polyunsaturates or high in total unsaturates.
- Read the nutrient section of food labels to choose items that are low in saturated fatty acids.

To eat less cholesterol:
Key points to remember
- Cholesterol is found in high amounts in organ meats (liver, kidney, sweetbread, brain) and egg yolks.

Practical idea
- Eat only moderate portions of high cholesterol foods, or choose them less often.

To eat more complex carbohydrates:
Key point to remember
- Vegetables, fruits, cereal grains, dried peas and beans, rice, and pasta contain complex carbohydrates, little or no saturated fat, and no cholesterol.

Practical idea
- Choose foods high in complex carbohydrates more often and use them in place of high fat foods.

To help lose weight, if overweight:
Key point to remember
- Fats are high in calories. Fat and oils supply 9 calories per gram as compared to protein and carbohydrates which supply only 4 calories per gram.

Practical idea
- Reduce the total amount of fat eaten each day, to help reduce caloric intake.
- Increase daily physical activity.

How much fat and cholesterol are contained in basic foods and where can I find more information about this?
Foods differ in the amount of saturated fat and cholesterol they contain. Table 3, the Fat and Cholesterol Comparison Chart, gives values for a few basic foods that are grouped into categories. Within each category, there are higher and lower fat items. The examples are meant to illustrate these differences and not to endorse or slight any one food.

The chart shows the fat and cholesterol in a specified amount of food. Values for dairy products and oils and fats are all given for a one cup volume. Values for meats, poultry, seafood, nuts, fruits and vegetables are given for 100 grams, which are equal to 3½ ounces. However, grams of fat actually eaten will depend on the portion size used for a meal as well as the type of ingredients selected.

It is important to remember that prepared dishes, which are made from a combination of basic foods, will contain amounts of fat related to the fat-containing ingredients, especially the high fat ones. Addition of fat during frying or basting will also add to the fat content of the final meal. Prepared foods include recipes made at home, takeout or fast food, restaurant food, and manufactured, prepackaged items.

Fat and cholesterol values for only a few items are listed in Table 3. To see how other foods rank in cholesterol and saturated fat, more extensive lists should be consulted. Commercially prepared foods may have values available from the manufacturers or listed on the labels.

To find more information on the fat and cholesterol content of common foods and on cooking and eating tips for lowering high blood cholesterol, consult the *Community Guide to Cholesterol Resources*, a resource list produced by the National Cholesterol Education Program; National Heart, Lung, and Blood Institute; C-200; Bethesda, Maryland 20892. This list explains how to obtain many useful publications, including *U.S.D.A. Handbook 72* that gives nutrient values for many different foods, and *Food Composition for Convenience Foods*, a list of values for many fast foods and manufactured foods as compiled from manufacturers' data by the Central Indiana Dietetic Association.

If your doctor has diagnosed you as having a high blood cholesterol, ask for two other pamphlets: *Eating to Lower Your High Blood Cholesterol* and *So You Have High Blood Cholesterol* that are also available from the National Cholesterol Education Program.

Table 3: Fat and Cholesterol Comparison Chart

Example of	Item	Saturated Fatty Acids (grams)	Total Fat (grams)	Cholesterol (milligrams)
Beef	Top round, lean only, broiled	2.2	6.2	84
100 grams	Ground lean, broiled medium	7.3	18.5	87
(3½ ounces)	Beef prime rib, meat, lean and fat, broiled	14.9	35.2	86
Processed Meats	Dutch loaf, pork and beef	6.4	17.8	47
100 grams	Sausage smoked, link, beef and pork	10.6	30.3	71
(3½ ounces)	Bologna, beef	11.7	28.4	56
	Frankfurter, beef	12.0	29.4	48
	Salami, dry or hard, pork, beef	12.2	34.4	79
Pork	Ham steak, extra lean	1.4	4.2	45
100 grams	Pork, center loin, lean only, braised	4.7	13.7	111
(3½ ounces)	Pork, spareribs, lean and fat, braised	11.8	30.3	121
Poultry	Chicken broilers or fryers, roasted:			
100 grams	• Light meat without skin	1.3	4.5	85
(3½ ounces)	• Light meat with skin	3.1	10.9	84
	• Dark meat without skin	2.7	9.7	93
	• Dark meat with skin	4.4	15.8	91
	• Chicken skin	11.4	40.7	83
Fin Fish	Cod, Atlantic, dry heat cooked	0.1	0.7	58
100 grams	Perch, mixed species, dry heat cooked	0.2	1.2	115
(3½ ounces)	Snapper, mixed species, dry heat cooked	0.4	1.7	47
	Rockfish, Pacific, mixed species, dry heat cooked	0.5	2.0	44
	Tuna, bluefin, dry heat cooked	1.6	6.3	49
	Mackerel, Atlantic, dry heat cooked	4.2	17.8	75
Mollusks	Clam, mixed species, moist heat cooked	0.2	2.0	67
100 grams	Mussel, blue, moist heat cooked	0.9	4.5	56
(3½ ounces)	Oyster, eastern, moist heat cooked	1.3	5.0	109
Crustaceans	Crab, blue, moist heat cooked	0.2	1.8	100
100 grams	Lobster, northern, moist heat cooked	0.1	0.6	72
(3½ ounces)	Shrimp, mixed species, moist heat cooked	0.3	1.1	195
Liver and Organ Meats	Chicken liver, cooked, simmered	1.8	5.5	631
	Beef liver, braised	1.9	4.9	389
100 grams	Pork brains, cooked	2.2	9.5	2,552
(3½ ounces)				
Eggs				
(1 yolk = 17 grams)	Egg yolk, chicken, raw	1.7	5.6	272
(1 white = 33 grams)	Egg white, chicken, raw	0	trace	0
(1 whole = 50 grams)	Egg, whole, chicken, raw	1.7	5.6	272
Nuts and Seeds	Chestnuts, European, roasted	0.4	2.2	0
100 grams	Almonds, dry roasted	4.9	51.6	0
(3½ ounces)	Sunflower seed kernels, dry roasted	5.2	49.8	0
	Pecans, dry roasted	5.2	64.6	0
	Walnuts, English, dried	5.6	61.9	0
	Pistachio nuts, dried	6.1	48.4	0
	Peanut kernels, dried	6.8	49.2	0
	Cashew nuts, dry roasted	9.2	46.4	0
	Brazil nuts, dried	16.2	66.2	0
Fruits	Peaches, raw	0.010	0.09	0
100 grams	Oranges, raw	0.015	0.12	0
(3½ ounces)	Strawberries, raw	0.020	0.37	0
	Apples, with skin, raw	0.058	0.36	0

Example of	Item	Saturated Fatty Acids (grams)	Total Fat (grams)	Cholesterol (milligrams)
Vegetables	Cooked, boiled, drained:			
100 grams	• Potato, without skin	0.026	0.10	0
(3½ ounces)	• Carrots	0.034	0.18	0
	• Spinach	0.042	0.26	0
	• Broccoli	0.043	0.28	0
	• Beans, green and yellow	0.064	0.28	0
	• Squash, yellow, crookneck	0.064	0.31	0
	• Corn	0.197	1.28	0
	Avocado, raw, without skin or seed:			
	• Florida origin	1.74	8.86	0
	• California origin	2.60	17.34	0
Grains and Legumes	Split peas, cooked, boiled	0.054	0.39	0
	Red kidney beans, cooked, boiled	0.07	0.5	0
100 grams	Oatmeal, cooked	0.19	1.0	0
(3½ ounces)				
Milk and Cream	Skim milk	0.3	0.4	4
1 cup	Buttermilk (0.9% fat)	1.3	2.2	9
(8 fluid ounces)	Low fat milk (1% fat)	1.6	2.6	10
	Whole milk (3.7% fat)	5.6	8.9	35
	Light cream	28.8	46.3	159
	Heavy whipping cream	54.8	88.1	326
Yogurt and Sour Cream	Plain yogurt, skim milk	0.3	0.4	4
	Plain yogurt, low fat (1.6%)	2.3	3.5	14
1 cup	Plain yogurt, whole milk	4.8	7.4	29
(8 fluid ounces)	Sour cream	30.0	48.2	102
Soft Cheeses	Cottage cheese, low fat (1% fat)	1.5	2.3	10
1 cup	Cottage cheese, creamed	6.0	9.5	31
(8 fluid ounces)	Ricotta, part skim	12.1	19.5	76
	Ricotta, whole milk	18.8	29.5	116
	American processed spread	30.2	48.1	125
	Cream cheese	49.9	79.2	250
Hard cheeses	Mozzarella, part skim	22.9	36.1	132
(8 ounces)	Mozzarella, whole milk	29.7	49.0	177
	Provolone	38.8	60.4	157
	Swiss	40.4	62.4	209
	Blue	42.4	65.1	170
	Brick	42.7	67.4	213
	Muenster	43.4	68.1	218
	American processed	44.7	71.1	213
	Cheddar	47.9	75.1	238
Vegetable Oils and Shortening	Canola oil	14.8	218.0	0
	Safflower oil	19.8	218.0	0
1 cup	Sunflower oil	22.5	218.0	0
(8 fluid ounces)	Corn oil	27.7	218.0	0
	Olive oil	29.2	216.0	0
	Soybean oil	31.4	218.0	0
	Margarine, regular soft tub*	32.2	182.6	0
	Margarine, stick or brick*	34.2	182.6	0
	Peanut oil	36.4	216.0	0
	Household vegetable shortening*	51.2	205.0	0
	Cottonseed oil	56.4	218.0	0
	Palm oil	107.4	218.0	0
	Coconut oil	188.5	218.0	0
	Palm kernel oil	177.4	218.0	0
Animal Fats	Chicken fat	61.2	205.0	174
1 cup	Lard	80.4	205.0	195
(8 fluid ounces)	Mutton fat	96.9	205.0	209
	Beef fat	102.1	205.0	223
	Butter	114.4	183.9	496

*Made with hydrogenated soybean oil + hydrogenated cottonseed oil.

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Revised November 1987

DRUGS AND WEIGHT CONTROL

The use of drugs for weight reduction became popular in the 1930's with the introduction of amphetamines (speed). Over the counter drugs have replaced amphetamines. Although certain drugs may decrease appetite, effects are temporary and do not promote eating behavior change, the cornerstone of permanent weight reduction.

Appetite control is a complex and poorly understood process. Drugs apparently interfere with the signals carried to and from the hunger and satiety centers. However, many overweight people do not eat because they are hungry. Others take multiple doses of drugs hoping to dull their appetites for a longer time. In both cases, drugs do not attack the cause.

Navy doctors do not prescribe drugs for weight control, but it is important to recognize the wide assortment of drugs on the market, the sales pitch, and drawbacks.

Amphetamines
- Side effects include increasing blood pressure and heart beat, and behavior change
- These drugs are controlled substances, cause dependence and potential for abuse
- Tolerance can build up quickly causing the person to increase dosage

Thyroid Products
- Only for the patient with documented hypothyroidism
- Increases metabolism, may stress heart and kidneys
- Effects are lost when drug is discontinued

Human Chorionic Gonadotropin (HCG)
- Also called "pregnant women's urine" drug
- Theory is that this drug changes abnormal fat tissue into normal fat, which is then dissolved (not been proven)
- Drug given with very low calorie diet (many at 500 calories)
- "Diet Doctors" charge up to $100.00 per shot
- Any diet this low in calories (a good weight reduction diet should not be less than 1500) will work regardless of shots
- Effectiveness not proven

Phenylpropanolamine containing drugs
- Most common ingredient in over the counter drugs
- Controversy over effectiveness and side effects
- Reduced calorie diet plan is part of the program package
- Reported effects of the drug are temporary; tolerance builds
- Caffeine or cellulose (bulk producing agent) in some products

Conclusion

Diet drugs are probably just another crutch. Most drugs include diet plans. What is responsible for any success? Probably the diet, but only for as long one follows it.

SODIUM INFORMATION AND TABLES

Sodium is a mineral that occurs naturally in many foods. It combines with chloride to form table salt, which is added to foods for flavor or as a preservative. We often interchange the words sodium and salt. Everyone needs some sodium, but we can get adequate daily amounts from the sodium found in food in its natural state. Extra sodium is not a problem if your kidneys can handle and get rid of it. When your body holds extra sodium, you may retain water. This extra water will put more pressure on your blood vessels causing high blood pressure and increasing the workload on your heart. High blood pressure is not something you can feel. A blood pressure check is part of your routine dental exam. You will be referred to the medical department if needed for further evaluation.

The following ingredients in foods contain sodium: sodium citrate (in juices), sodium nitrite (in cured meats), baking soda and powder (in baked goods) and monosodium glutamate (MSG- flavor enhancer). Seasonings such as soy sauce, steak sauce, barbecue sauce, salad dressings, and all seasoning salts contain large amounts of sodium. The amount and frequency of use is as important as the food preparation method. For example, sprinkling soy sauce over a serving of steamed rice may increase the sodium from 0 to 1000 milligrams (mg.). When shopping, check the label for the words "sodium" or "salt".

Convenience foods often contain large amounts of sodium. Many reduced calorie dinners contain up to 1000 mg. of sodium. Suggested total daily intake of sodium is 3000 mg. Does this mean you should give up some of your favorite foods? No, but just be aware of your total intake for the day. If you eat one of those low calorie high salt packaged meals for dinner, you may not want to eat salty foods for breakfast and lunch.

Taste is sometimes a good indicator of the salt content in food. Processed meats (ham, bacon, lunch meat) are higher than plain meats. Canned soups, vegetables, meats, and entrees are also high as are snack foods (chips, crackers, pretzels). Some cereals and baked products contain large amounts that may not be detected by taste.

You can control your salt intake no matter where you eat by choosing foods wisely and limiting use of the salt shaker. You do not need to use salt substitute or eat low sodium foods. Those are for people who need to follow a salt restricted diet for medical reasons. Because most Americans eat much more sodium than they need, healthy people can reduce their intake by making simple dietary changes. The following table shows foods high and low in sodium. Remember, your daily goal is 3000 mg. of sodium.

SODIUM TABLES, CONTINUED

Food	Milligrams of Sodium
Fruits	less than 10 per 1/2 cup
Vegetables (fresh/frozen)	less than 70 per 1/2 cup
Milk, yogurt	120 - 160 per cup
Natural cheese	110 - 450 per 1 1/2 ounce
Cottage cheese	450 per 1/2 cup
Processed cheese and spreads	700 - 900 per 2 ounces
Fresh meat	less than 90 per 3 ounces
Cured meat (ham, bacon, luncheon)	750 - 1,350 per 3 ounces
Ready-to-eat cereal	100 - 360 per ounce (small bowl)
Bread	100 - 175 per slice
Canned soup	630 - 1000 per cup (small bowl)
Canned, frozen entrees	800 - 1400 per 8 ounces
Salted nuts, chips	150 - 300 per small bag
Unsalted nuts, unsalted popcorn	less than 5 per ounce
Catsup, mustard, steak and chili sauce	125 - 275 per tablespoon
Soy sauce	1000 per tablespoon (tbsp)
Table salt	2000 per teaspoon (6000 per tbsp)

Quick Guidelines

1. A reduced sodium food is not necessarily low in fat or sugar.

2. Plain fruits, vegetables, and meats are low in sodium, but the preparation method may have hidden sodium.

3. Most "convenience" foods have added sodium.

4. Most condiments are high in sodium except powders (garlic, onion, herb powders). Check the labels.

Labels

Below is an example of a label from a reduced calorie Mexican dinner. The underlined items contain salt. Total sodium content is 990 mg. Even though this dinner is low in calories, it is high in sodium, and half the calories come from fat.

"Tomatoes, cheese, water, green chilies, corn flour, green chili puree, black olives, dehydrated pasteurized processed cheddar cheese, granulated onion, salt, modified food starch, spices, corn oil, monosodium glutamate, dehydrated jack cheese, xanthin gum, garlic powder, jalapeno peppers, cellulose gum, mono- and diglycerides, oleoresin paprika, disodium phosphate, and trace of lime."

A final word: You were not born with a taste for salt. It was learned from foods you ate as a child and now as an adult.

FAT, SATURATED FAT, AND CHOLESTEROL TABLES

The following tables provide total fat, saturated fat, and cholesterol values. Remember that a food with little or no cholesterol may still contain fat. For example, 1 small bag of potato chips has no cholesterol, but it does have 7 grams of fat which contribute to almost 50% of the total calories (150).

If you are reducing fat from your diet, reduce total fat, not just cholesterol. All fats contain 9 calories per gram. You can cut your total daily caloric intake in half by eating fewer or smaller portions of high fat foods.

Vegetables and Fruits
- -Most are very low in fat; none contain cholesterol
- -Added ingredients (sauces, stir-fry, dressings) increase fat content
- -Examples are listed below

Fruit/Vegetable	Total Fat(g)	Saturated Fatty Acids(g)	Cholesterol(mg)
potato (baked)	trace (tr)	(tr)	0
french fries (10)	8	3	0
potato chips (10)	7	2	0
veg (stir-fry 1/2c.)	3	(tr)	0
apple	(tr)	(tr)	0
peach	(tr)	(tr)	0
avocado	15	2	0
banana	1	(tr)	0
olive, green (5)	3	(tr)	0
olive, black (5)	5	1	0

Breads/ Cereals/ Grains
- -Grains are low in fat and cholesterol
- -Added ingredients increase fat content
- -Examples are listed below

Bread/Cereal/Grain	Total Fat(g)	Saturated Fatty Acids(g)	Cholesterol(mg)
bread (white,wheat)	1	(tr)	0
bagel (1)	2	(tr)	0
biscuit	5	1	(tr)
muffin	5	2	19
waffle	8	3	59
pastry	12	4	49
rice (1/2c.)	(tr)	(tr)	0
rice (fried 1/2c.)	6	1	51
doughnut, plain	13	5	21

FAT, SATURATED FAT, AND CHOLESTEROL TABLES, CONTINUED

Fat (Oils, Hard Fats, Creams, Dressings)
-Fat differs in type not calories

Fat	Total Fat(g)	Saturated Fatty Acids(g)	Cholesterol(mg)
butter, 1 tbsp.	11	7	31
margarine, 1 tbsp.	11	2	0
corn oil, 1 tbsp.	14	2	0
mayo dressing, 1 tbsp.	1	2	8
Ital.local, 1 tbsp.	(tr)	(tr)	0
It. dressing, 1 tbsp.	1	0	0
sour cream, 1 tbsp.	3	2	5
cream cheese, 1 tbsp.	5	3	15

Dairy Products
-Wide range of fat levels dependent on your choice
-All contain cholesterol
-Examples are listed below

Milk/Cheese/Yogurt	Total Fat(g)	Saturated Fatty Acids(g)	Cholesterol
whole milk, 1 cup	8	5	33
2% milk, 1 c.	5	3	18
skim milk, 1 c.	1	tr	5
buttermilk, 1 c.	2	1	9
yogurt, plain, 1 c.	4	2	14
yogurt, fruit, 1 c.	2	2	10
cottage cheese, reg,1c.	9	6	31
cottage cheese, 1fat,1c.	4	3	19
cheese, cheddar, 1 oz.	9	6	30
cheese, mozzarella,1 oz.	5	3	15
cheese, American, 1 oz.	9	6	27
ice cream, vanilla,1/2c.	7	4	30
ice milk, vanilla, 1/2c.	3	2	9

FAT, SATURATED FAT, AND CHOLESTEROL TABLES, CONTINUED

Meat/Poultry/Fish

- -All "meats" contain cholesterol in amounts varying on type of cut and species of animal
- -Cooking method and trimming fat can reduce fat content
- -Examples are listed below

Meat/Poultry/Fish	Total Fat(g)	Saturated Fatty Acids(g)	Cholesterol(g)
beef roast,lean/fat, 4oz.	45	22	108
beef, ground, 1/4 lb.	23	11	106
beef, ground lean, 1/4 lb.	13	6	106
liver, beef, 4 oz.	12	3	496
pork, lean/fat, 4 oz.	32	12	100
chicken, white,skin, 4oz	12	3	96
chicken, white,skinless,4oz.	5	1	96
chicken, dark,skin,4oz.	18	5	104
chicken, dark,skinless,4oz.	11	3	106
halibut, broiled, 4 oz.	2	.2	70
tuna in oil, 1/2 can	9	2	74
crab, 4 oz.	2	.2	114
egg, whole, 1	6	2	274
egg, white, 1	tr	0	0

Values from Food Three
The American Dietetic Association

NAVAL HOSPITAL DIETITIANS

COMMAND	PHONE NUMBER
National Naval Medical Center Bethesda, MD 20814-5011	(202) 295-5360 AV: 295-5360
Naval Hospital San Diego San Diego, CA 92134-5000	(619) 532-8520 AV: 522-8520
Naval Hospital Oakland Oakland, CA 94627-5000	(415) 633-5822 AV: 828-5822
Naval Hospital Great Lakes Great Lakes, IL 60088-5000	(312) 688-4723 AV: 792-4724
Naval Hospital Camp Lejeune Camp Lejeune, NC 28542-5008	(919) 451-4050 AV: 365-1244
Naval Hospital Camp Pendleton Camp Pendleton, CA 92055-5008	(619) 725-1244 AV: 365-1244
Naval Hospital Portsmouth Portsmouth, VA 23708-5000	(804) 398-5567 AV: 564-5568
Naval Medical Clinic 6500 Hampton Blvd. Norfolk, VA 23508	(804) 455-2984 AV: 565-2984 564-5005 Pager: 0520
Naval Hospital Jacksonville Jacksonville, FL 32214-5000	AV: 942-7328/29
Naval Hospital Charleston Charleston, SC 29408-6900	(803) 743-4270 AV: 563-6951
Naval Hospital Orlando Orlando, FL 32813-5200	(305) 646-4963 AV: 791-4963
Naval Hospital Pensacola Pensacola, FL 32512-5000	(904) 452-6610 AV: 922-6610
Naval Hospital Long Beach Long Beach CA 90822-5199	(213) 420-9260 AV: 873-9260
Naval Hospital Millington Millington, TN 38054-5201	(901) 872-5820 AV: 966-5820
Naval Hospital Okinawa FPO Seattle 98778-1610	AV: 631-7772
Naval Hospital Subic Bay FPO San Francisco 96652-1600	AV: 885-3131

NAVAL HOSPITAL DIETITIANS, CONTINUED

Naval Hospital Naples FPO New York 09521-0700	(081) 724-3758 AV: 625-3758
Naval Hospital Yokosuka FPO Seattle 98765-1615	(046) 826-1911 x7128 AV: 234-7100
Naval Hospital Guam FPO San Francisco 96630-1600	(671) 344-9238 AV: 344-7100
Naval Hospital Roosevelt Roads FPO Miami 34051-8100	(809) 865-4133 x234 AV: 831-4133 x234
Naval Hospital Guantanamo Bay FPO New York 09593-0136	AV: 564-4063 GITMO x7234
Health and Physical Readiness Program Code NMPC-68 Washington, DC 20370-5605	(202) 694-5742 AV: 224-5742
Naval Hospital Beaufort Beaufort, SC 29902-6148	(803) 524-2551 x415
Naval Hospital Newport Newport, RI 02841-5003	(401) 841-4835 AV: 948-4835
Naval Hospital Groton Groton, CT 06349-5600	(203) 241-3104 AV: 948-4835
Naval Hospital Bremerton Bremerton, WA 98312-1898	(206) 478-9308 AV: 439-9308
Naval Hospital Philadelphia 17th Street and Pattison Ave. Philadelphia, PA 19145-5199	(215) 897-8070 AV: 443-8070

TRADE ORGANIZATION AND FOOD COMPANY RESOURCE LIST

You may write to these organizations to obtain pamphlets and other educational materials. Many materials are available free or at very low cost.

Best Foods
Consumer Svc. Dept.
International Plaza
Englewood Cliffs, NJ 07623

Borden Farm Products Division
Borden Co.
277 Park Ave.
New York, NY 10010

Kellogg Co.
P.O. Box 5329
Kalamazoo, MI 49003-9990

General Foods Consumer Ctr.
250 North St.
White Plains, NY 10625

Mead Johnson Nutritionals
2404 Pennsylvania Ave.
Evansville, IN 47712

National Dairy Council
111 North Canal St.
Chicago, IL 60618

Ross Laboratories
Director of Prof. Svc.
Columbus, OH 43216

United Fresh Fruit & Veg. Association
777 1st Street, NW
Washington, DC 20005

Safeway's Nutri. Awareness Prog.
ATTN: Corporate Nutritionist
Safeway Stores, Inc.
Oakland, CA 94660

Consumer Affairs Center
The Quaker Oats Co.
Chicago, IL 60654

General Mills
Nutrition Dept.
Dept. 45, Box 1112
Minneapolis, MN 55440

Giant Food, Inc.
Consumer Affairs Dept.
Box 1804
Washington, DC 20013

American Institute of Baking
1213 Bakers Way
Manhattan, KS 66502

National Livestock and Meat Board
444 N. Michigan Ave.
Chicago, Il. 60611

Wheat Flour Institute
600 Maryland Ave., SW
Suite 305W
Washington, DC 20024

OTHER RESOURCES

Good Sources of Accurate Nutrition Information:

The Food and Drug Administration
5600 Fisher's Lane
Rockville, MD 20857
(303) 443-3170

The USDA Extension Service
at any land-grant university
(see your local telephone
directory)

The Dept. of Health and Human
Services
Health Services Admin. of the
U.S. Public Health Service
Washington, DC 20852

U.S. Government Printing Office
Pueblo, CO 81009
(1-800-368-5779)

The American Medical Assoc.
Dept. of Foods and Nutrition
535 N. Dearborn St.
Chicago, IL 60610

The Nutrition Foundation
888 17th St., NW
Washington, DC 20006

Society for Nutrition
Education
1700 Broadway
Suite 300
Oakland, CA 94612
(415) 444-7133

Food and Nutrition Info.
Center
National Agricultural Library
Building
Room 304
Route 1
Beltsville, MD 20705
(301) 344-3719

Center For Science in
the Public Interest
1501 16 th St. NW
Washington, DC 20036-1499

The U.S. Dept. of Agriculture
Food and Nutrition
Information Center
USDA National Agriculture
Library
Room 304, 10301 Balt. Blvd.
Beltsville, MD 20705
(303) 344-3719

The American Heart Association
7320 Greenville Ave.
Dallas, TX 75231

The American Society for
Clinical Nutrition
9650 Rockville Pike
Bethesda, MD 20014

The American Dietetic Assoc.
430 N. Michigan Ave.
Chicago, IL 60611

National Health Information
Clearinghouse
DPHP/NHIC
P.O. Box 1133
Washington, DC 20013-1133
(1-800-336-4797)

Human Nutrition Info. Service
Room 360
Federal Building
6505 Belcrest Rd.
Hyattsville, MD 20782

National Cancer Institute
Bldg 31, Room 10A18
NIH
Bethesda, MD 20205

REFERENCES

There are countless books on weight control, exercise, and lifestyle changes. These are a few recommended books. You can use the previously listed diet criteria to evaluate diets in selecting some books. Remember, there are many books in print that are not backed by professionals. It is difficult for the non-expert to sift through all this information. Be careful! If it sounds like a gimmick or quick answer, don't fall for it!

Bailey, C., The Fit or Fat Target Diet, Houghton Mifflin, Boston, 1984.

Bennett, W. and Gerrin, J., The Dieter's Dilemma, Basic Books Inc., N.Y., 1982.

Berland, T., Consumer Guide - Rating the Diets, Consumer Guide, 3323 W. Main St., Skokie, IL 60076.

Brody, J. Jane Brody's Good Food Book, W.W. Norton & Co., N.Y., 1985.

Brody, J. Jane Brody's Nutrition Book, W.W. Norton & Co., N.Y., 1981.

Brownell, K., The Learn Program for Weight Control, Brownell, Philadelphia, 1988.

Clark, N., The Athlete's Kitchen: A Nutrition Guide and Cookbook, Bantam Books, 1983.

Cooper, K., The Aerobics Program for Total Well-Being, Bantam, N.Y., 1982.

Ferguson, J., Habits, Not Diets, Bull Publishing Co., Palo Alto 1988.

Gussow, J. D. and Thomas, P. R. The Nutrition Debate: Sorting Out Some Answers, Bull Publishing Co., Palo Alto, Ca., 1986.

Katch, F.I. and McArdle, W.D. Nutrition, Weight Control Exercise, Lea and Febiger, Philadelphia, 1983.

Kraus, B., Calories and Carbohydrates, Signet, 1983.

Krepton, D. and Chu, D., Everybody's Aerobic Book, Star Rover House, Oakland, CA, 1984.

Nash, J., Maximize Your Body Potential, Bull Publishing Co., Palo Alto, 1986.

Pennington, J. and Church, H., Food Values of Portions Commonly Used, Harper & Roca, N.Y., 1986.

Stunkard, A. J. (Ed.) Obesity, W. B. Saunders Company, Philadelphia, Pa., 1980.

Stewart, R. and Davis, B., Slim Chance in a Fat World: Behavioral Control of Obesity. Research Press Co., Champaign, IL, 1972.

SECTION FIVE

MEDIA INFORMATION ARTICLES

MEDIA RELEASES

The following articles will assist you in providing nutrition education to your command. March is recognized as Navy Nutrition Month to parallel national awareness efforts. September and January are also good months to provide articles on weight control for those who desire nutrition information after summer vacations and the holiday season. Some of the handouts in Section Two may be appropriate for media release. The Plan of the Day Notes can be used separately or combined to produce one article on a particular topic. Be sure to call the Public Affairs Office at least one to two months ahead to allow lead time.

For further assistance contact the dietitian/Food Service Officer at your closest Naval Hospital. Your medical clinic, commissary, general mess, and club may have points of contact to obtain nutrition information. Check your Health Fair Guide and use the lists in Section Four to order information.

NAVY NUTRITION MONTH

March is designated as Navy Nutrition Month to parallel national awareness efforts. In support of our Health and Physical Readiness Program, all members need to be aware of the importance of nutrition and its relationship to good health. It is important to eat a variety of foods, especially those high in fiber, and maintain desirable weight. You should avoid too much total fat, not just saturated fat and cholesterol, sugar and salt. If you do drink alcohol, do so in moderation. These simple guidelines will help to keep your body healthy.

National interest in high cholesterol levels has been created by the Surgeon General's Report on Nutrition and Health and the National Cholesterol Education Program. Lifestyle changes which include a healthy diet may reduce the incidence of chronic diseases such as obesity, heart disease, diabetes, and cancer.

Commands are encouraged to provide articles with special emphasis on the importance of nutrition for the plan of the week, base papers, cafeterias, general mess, and bulletin boards. All command fitness coordinators can check their 1988 Health Fair Guides (Stock Number 0500-LP-001-08301) to order current information from agencies such as the Department of Health and Human Services, National Institutes of Health, National Heart Lung and Blood Institute, American Heart Association, American Cancer Society, and the National Cancer Institute. Check your phone directory for the local affiliate organization. Commands should coordinate their efforts with Navy clubs, commissaries, general messes, medical departments, recreation and family service centers.

LT D. E. Weber
Registered Dietitian
Nutrition Programs Officer NMPC-681B

LOW FAT LABELING

Pending cholesterol labeling regulations will provide consumers with yet more nutrition packaging information to decipher. The new law would require packages of products making cholesterol claims to supply complete fat and cholesterol labeling information. Products such as peanut butter, margarine, and some salad dressings, which contain no cholesterol but are all high in fat, would list the amount of saturated and unsaturated fats. A food labeled "cholesterol free" food would have less than 2 milligrams per serving, and a "low cholesterol" food would have less than 20 milligrams per serving. But remember, cholesterol free does not automatically mean fat free.

Before we look at specific labels, let's define saturated fat, unsaturated fat, and cholesterol. Saturated fat comes from animals and a few plants (i.e., coconut, palm, and cottonseed oils, cocoa butter). These fats include all meats, eggs, and dairy products. Red meat (beef, pork) has more fat than chicken (no skin) and fish. Of course, fat content can be increased by the cooking method. Cholesterol is found in animal foods. The most concentrated sources of cholesterol are egg yolks, organ meats, shellfish, and butter. Unsaturated fats are found in vegetable oils such as safflower, sunflower, peanut, and olive oils. These fats are more desirable but should still be used in small amounts since all fats contain equal calories. Fat is still fat, no matter what kind!

Now let's look at some specific labels. Most peanut butters contain peanuts, sugar, oil, and salt and are often labeled "no cholesterol". However, the fat content is up to 80 percent of the total calories. New labeling would allow the words "cholesterol free" to remain but also require the actual fat to be listed. Low calorie salad dressings usually contain water, vinegar, oil, sugar, and spices. At 10 to 20 calories per tablespoon, up to 90 percent of total calories is from fat. Under this new system, the salad dressing could be labeled "cholesterol free", but the fat would be listed. Does this mean that both peanut butter and low calorie salad dressings are "bad foods" since they contain excessive fat? Obviously one tablespoon of peanut butter at 100 calories and one tablespoon of diet salad dressing at 15 calories are not the same, but both may fit into a low fat diet.

The bottom line on label reading is don't be fooled by the print splashed across the front of the package. Look on the back at the ingredients, which are required to be listed with the largest amount first. Look at the food as part of your total day's intake. A high fat or high cholesterol food may still fit in if the rest of your food choices are lower in fat.

LT D. E. Weber
Registered Dietitian
Nutrition Programs Officer NMPC-681B

FAST CHOLESTEROL LOWERING CURES?

Most people take the easy way out when given a choice. Maybe that's why there are so many gimmicks out there now that cholesterol is the latest nutrition buzz word. It's so much easier to eat whatever we want and take a pill, eat oat bran, or exercise and hope that the high cholesterol problem will just go away. Unfortunately the gimmicks don't work and may cause serious problems. Let's take a look at a few of these "fast cures".

One popular theory suggests that we can lower cholesterol in eight weeks by following a diet and taking niacin. This niacin dosage may be up to a thousand times the daily requirement and may cause serious side effects. Vitamins in large doses should be considered a drug and not self-administered. Should the average adult with high cholesterol take drugs to reduce cholesterol? No, not unless diet, exercise, and weight loss have failed. Then a physician should prescribe the appropriate cholesterol lowering drug.

Cereal companies are doing a booming business thanks to fiber and especially oat bran. Bran has been around for a long time, but it has not been used widely except among the elderly and health food enthusiasts. Now that research has shown that fiber <u>may</u> help prevent colon cancer and help lower serum cholesterol, bran (especially oatbran) is the latest "hot" food item. Bran muffins, granola, and oat cereals may contain fiber, but many of these products are also high in fat, mainly coconut oil (saturated fat), and sugar. Check the labels carefully. Sprinkling bran on food does not cancel out eating a high fat diet. Other foods are also high in fiber and will increase your daily fiber intake.

Let's look at the fiber content of some foods and compare them with bran. Baked beans has 11 grams of fiber per half cup, spinach has 6 grams per half cup cooked, prunes have 8 grams per half cup, one third cup of plain bran cereal has 11 grams, 1 small ear corn on the cob has 6 grams. However meat, dairy, and fat have no fiber. The average American intake is 10 to 15 grams of fiber per day. Recommended daily fiber intake is 20 to 30 grams per day from a variety of sources. Look at <u>all</u> the food you eat in one day. Is there something magic about oatbran? No, it is a soluble fiber just as the fiber found in fruits, vegetables, and beans, and grains.

Don't be fooled by the easy way out; there is no short cut to lifestyle, food habit, and exercise changes. Product advertisers and authors try hard to give you a quick fix to get your money. Be alert for the one food or drug that will "cure" your high cholesterol problem.

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Nutrition Programs Officer NMPC-681B

CHOLESTEROL AND KIDS

Should children be placed on low cholesterol or low fat diets? Although children begin to accumulate plaque in arteries at about age two, it is unwise to place them on fat restricted diets before this age and very carefully while still in a growth stage. If disease symptoms are present, then action should be taken to monitor cholesterol. Older children with family histories of early heart disease or high cholesterol should be monitored and treated if needed.

Growth should always be the major concern for children. This does not mean that fried foods, high fat meats, and sweets should be the mainstay of a child's diet. However, small children with small appetites rely on fat as part of their calories. Look at the kind of fat (unsaturated vs. saturated and cholesterol) more than the amount. Saturated fat comes from animals and a few plants (i.e., coconut, palm, and cottonseed oils, cocoa butter). These fats include all meats, eggs, and dairy products. Red meat (beef, pork) has more fat than chicken (no skin) and fish. Of course, fat content can be increased by the cooking method. Cholesterol is found in animal foods. The most concentrated sources of cholesterol are egg yolks, organ meats, shellfish, and butter. Unsaturated fats are found in vegetable oils such as safflower, sunflower, peanut, and olive oils. These fats are more desirable but should still be used in small amounts since all fats contain equal calories. Fat is still fat, no matter what kind!

Children need nutrients such as calcium and iron that come from dairy and meat products. Introduce your children to all types of foods. Whole milk may be exchanged in later years for low fat. Fish and chicken can be offered in addition to the ever popular hamburger. Don't give up the first time if your child refuses a particular food. Childrens' appetites and food preferences change daily (even hourly)! You can purchase a variety of foods, both "forbidden" and heart-healthy to provide and teach choice. You can use cooking techniques that will not increase saturated fat intake. And, last but hardest, you can put aside some of your own bad food habits to set a good example. Remember, children learn what they see. If you are obese and have bad eating habits, do you want your children to follow in your steps?

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Nutrition Programs Officer NMPC-681B

FISHY NEWS ABOUT FAT

Eskimos eat a very high fat diet, yet they have a low incidence of heart disease due in part to the unsaturated omega-3 oil found in the fish they eat. All this has caused some Americans, especially those who are not fisheaters, to rush out and buy fish oil pills. So, what is omega-3? Why does it seem to protect against heart disease, and should we eat more fish or buy pills?

Omega-3 is a highly unsaturated oil found in fish and shellfish that live on fish and green plant material. The omega-3 comes from what the fish eat, so farm fed catfish will have little or none, but mackerel, trout, tuna, herring, salmon, and sardines would have a lot. Omega-3 is reported to make blood platelets less sticky causing less blockage in the coronary blood vessels. Omega-3 may also aid in lowering triglyceride levels.

The American Heart Association has recommended eating more fish as part of a program to lower the total saturated fat in our diets. Even as little as one or two fish dishes per week may provide benefits of the omega-3. Although fish oil pills have been used in studies, there have been toxic side effects reported. Fish oil pills may contain impurities and not much omega-3. Taking cod liver oil is not recommended due to the possible toxic effect of the high levels of vitamins A and D in this oil.

In selecting fish, the higher the fat content of the meat of the fish, the more omega-3. Don't let the word "fat" scare you. Fish is lower in total fat than pork, beef, and poultry. The cooking technique, of course, can easily alter that! Shellfish have in the past been forbidden for those on low cholesterol diets. But the level is equivalent to that in lean beef and poultry. Fish is widely available and does not have to be costly. If purchasing whole fresh fish, look for fish with a bright eye. Fresh fish should never smell fishy. Keep it cold until preparing. Bake covered to keep it moist, and don't overcook. If your only "fish experience" has been Mc Fish style or fish and chips, you are missing out. Fish have different textures and tastes and come whole or in fillets, if you don't like to pick bones. Canned fish make good lunches. Rinse off the brine and/or oil to lower the salt and fat content. Considering the variety of fish and shellfish from which to choose, don't waste your omega-3s on pills. Learn to eat new foods and help lower your risk for heart disease.

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DO YOU KNOW YOUR NUMBER

Cholesterol seems to be this year's nutrition buzzword. Everyone has a theory or product to lower cholesterol. However, there are still many of us who have never had a cholesterol screen, which is a simple blood test. So what do all the numbers mean, and what can you expect when you go to your medical department?

You will probably begin with a total cholesterol. You may not need to fast (eat nothing from midnight to the morning of your test) for this test as it is a screening tool to determine the need for further tests. Look carefully at this number. Less than 200 is desirable for adults, 200-239 is borderline high, and 240 and over is high. If your number is over 200, you should be retested. Lab results may be inacurate up to ten percent. If the number is still over 200, you may then need to have a total lipid profile. For this test you should not consume alcohol or caffeine (cola, coffee, tea) for 72 hours before the test, and fast the night before the test. This test will give you five numbers: total cholesterol, ratio, low density lipoprotein (LDL), high density lipoprotein (HDL), and very low density lipoprotein (VLDL). Here's a quick explanation of each of these numbers.

A lipoprotein is a protein that carries lipid (fat) in the blood. The HDL cholesterol is known as the "good cholesterol" because it helps remove cholesterol from the blood. It carries cholesterol back to the liver for use or removal from the body. An HDL of 35 or greater is acceptable. The lower the HDL, the more you are at risk for heart disease. Regular aerobic exercise can help to increase your HDL.

The LDL is known as the "bad cholesterol". The LDL cholesterol carries most of the cholesterol in the blood from the liver to all parts of the body. If it is not removed, it will build up in the arteries and form plaque on the artery walls leading to clots. An LDL less than 130 is desirable, 130-159 is borderline high, and over 160 is high. A low fat (both saturated and total) diet can help to reduce your LDL. VLDL cholesterol becomes LDL after delivering triglycerides (fat) to the body fat storage areas (primarily arms and legs for women and around the middle for men). All excess calories regardless of type of food you eat are converted into fat and stored as triglycerides.

The ratio is simply your total cholesterol divided by your HDL. For example, a total cholesterol of 200 divided by an HDL of 40 equals a ratio of 5. Men should aim for a ratio of 5 or less; women 4 or less. Don't just look at the ratio. Consider each of the values separately. A ratio could mask one of the values.

If your doctor tells you that any of your numbers are in a risk category, don't expect overnight changes. The degree of change will reflect your past dietary and exercise habits and the response of your body to new lifestyle changes. A low fat diet may begin to reduce cholesterol in as little as two to three weeks. Generally you should not be retested for three months. Try very hard to stick to your diet and exercise pattern to allow your retest to accurately reflect the changes. If you have been

following your diet and exercise plan and still not changed your numbers at three months, you may be a candidate for drug therapy. Drug therapy is a last resort and must be taken constantly, so that's why you must give diet and exercise your best shot. Drugs may have side effects. Very few people want to be dependent on drugs if it's unnecessary.

A cholesterol test is part of the periodic physical examination for all members starting at age 25. Ask the doctor about your results. If your numbers are abnormal, you may be required to consult with a dietitian. Remember, you are your best advocate. You don't need to turn into a "cholesterol hypochondriac", the fanatic who nevers eats anything with fat or exercises for hours. You just need to become aware and make appropriate changes. Who knows, you may even live longer and avoid being one of the million who die each year from heart disease.

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EATING IN THE GENERAL MESS

You can maintain healthy eating habits in the general mess by making careful selections and watching portion sizes. Food service personnel do not control what you select and how much you eat. Although the food preparation may not be the same as home or the choices as varied if you're out at sea for a long time, there are still choices. Lower calorie options are available, and portion control can allow you to eat some of your favorite high calorie foods.

National interest, better screening, and a more aware public has sparked the ongoing need to provide low fat, low cholesterol alternatives. Nevertheless, a recent food consumption study which listed hamburger, milk, and cheese as Americans' top three favorite foods indicates that we are still choosing high fat foods. These three foods are not necessarily bad choices, but the frequency and portion sizes of these foods can make the difference in a high or low fat diet.

Many of us are quick to blame our weight or cholesterol problem "on the general mess". Each general mess varies according to crew size and operational requirements. For example, one third of a submarine crew is awake at all times, and a carrier serves meals almost around the clock. General messes need to provide a variety of choices to suit all tastes at any time of day. One person's suppertime may be another's breakfast! Increased use of lowfat milk, salad bars, and fish and chicken entrees are only a few of the initiatives the general messes have undertaken to help us reduce our total fat. It is our responsibility to choose wisely so that we can still occasionally eat our favorite omelet or those great homemade desserts from the Navy's bakeshops.

Before looking at alternative choices, let's define fat (unsaturated, saturated, and cholesterol). Saturated fat comes from animals and a few plants (i.e., coconut, palm, cottonseed oils, cocoa butter). These fats would include all meats, eggs, cheese, butter, lard, ice cream, and milk. Cholesterol is found in animal foods. The most concentrated sources of cholesterol are egg yolks, organ meats, shellfish, and butter. Red meat (beef, pork, sausage, bacon, lunch meats) are higher in fat than chicken (no skin) and fish. Food preparation method can increase fat and calories. One cup of whole milk has 2 teaspoons of fat, low fat milk has one teaspoon, skim milk has none. One teaspoon of fat looks like one pat of butter, so imagine your glass of whole milk with two pats of butter. American cheese, cheese spreads, and other soft cheeses are hard cheese with more fat added to soften the cheese. Mozzarella cheese may be low fat if it is made from skim milk. Ice cream has more fat than ice milk. Butter is equal to margarine in calories and total fat. Changing from butter to margarine does not lessen the amount of fat. It is still not healthy to put excess margarine on vegetables and breads. We increase our total cholesterol intake mainly from the type and portion size of meat and gravy, milk, baked goods, and the extra goodies and dressing at the salad bar. Let's look at meals starting with breakfast, typically the Navy's favorite

meal. Eggs, hash browns, bacon, toast, coffee, and maybe a sweet roll come to mind as the traditional breakfast. Do not choose these foods on a daily basis. Alternate egg days and creamed chipped beef with cereal days. Eat only one egg and one slice of bacon with more toast (easy on the butter and jelly) to provide the extra calories if needed. Drink low fat (2 percent) milk and only one glass per meal. Choose fresh or canned fruit instead of pastries. Do you drink black coffee or coffee flavored cream and sugar?

If you have eaten eggs for breakfast, you might want to choose lower cholesterol entrees (chicken and fish) at lunch and supper. Pick baked or fried and remove the skin and breading. Limit your portion of a casserole. If only fries or potatoes in sauce are served, choose bread for your starch. Choose a serving of vegetables. Pick fresh or canned vegetables at the salad bar and leave off the gelatin and mayonnaise type salads, seeds, nuts, cheese, and bacon bits. Use diet dressing or small amount of French or Italian. Alternate desserts with fruit, canned or fresh. Limit milk or bug juice to one glass. Choose broth soups (chicken noodle) or a smaller portion of creamy soup and bread, not large buns, for sandwiches limiting the meat, cheese, and dressings. If sandwiches are already prepared, either reassemble c · don't eat the whole sandwich. Planning and portion control can change what may seem to be an impossible situation.
The popular notion of adding oatbran to your diet will not by itself reduce cholesterol. Lowering your total fat and cholesterol intake will do this. There is nothing magical about oatbran. It is a soluble fiber just like the fiber in fruits, vegetables, lentils, beans, and grains you eat th· ughout the day. Don't be fooled by the easy way out; there is no shortcut to lifestyle food habit changes. The only answer is choice and portion control.

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COMMON QUESTIONS ON FAT

Our bodies actually need fat to survive. Surprised? Fat is needed by our body daily to carry certain vitamins (A, D, E, and K), help make hormones, and regulate body functions. The catch is that we need only one to two teaspoons per day. Unfortunately, the average American eats much more. Our diet is typically 40 to 45 percent fat. The remaining 60 to 65 percent comes from carbohydrate, protein, and alcohol. Let's say we eat 2500 calories in one day. That means 1000 to 1125 of those calories are from fat. The recommended amount is 30 percent or 750 calories. We can reduce both the total amount of fat and the kind of fat to reach our goal of 30 percent. So let's see how to accomplish our goals.

Let's look first at the kind of fat. Saturated fat comes from animals and a few plants (i.e., coconut, palm, and cottonseed oils, cocoa butter). These fats would include all meats, eggs, cheese, butter, lard, ice cream, and milk. Cholesterol is found in animal foods. The most concentrated sources of cholesterol are egg yolks, organ meats, shellfish, and butter. Red meat (beef, pork, sausage, bacon, lunch meats) are higher in fat than chicken (no skin) and fish. One cup of whole milk has 2 teaspoons of fat, lowfat has one, skim has none. American cheese has more fat than skim milk mozzarella. Ice cream has more fat than ice milk. A recent food consumption study listed Americans' top three favorite foods: hamburger, milk, and cheese. Is there any wonder why we have a high incidence of heart disease. Unsaturated fats are found in vegetable oils such as safflower, sunflower, peanut, and olive oils. These fats are desirable but should still be used in small amounts. For example, a low calorie stir fried vegetable dish can be very high in fat calories if excessive oil is added to the pan. Use a little water to steam or just a teaspoon of oil for the flavor. Liquid or soft tub margarine is more unsaturated than butter, but fat is fat- no calorie difference. The goal is not to substitute margarine for butter, but to use less of any kind of fat.

Saturated fats are harder at room temperature. Some unsaturated fats may be made more saturated by a process called hydrogenation. Liquid margarine has hydrogen blown into it to make stick margarine. Liquid oils may have hydrogen blown through and be turned into the white fat in a can that is often used for pie crusts and biscuits. The oil is more unsaturated (liquid at room temperature) than the canned fat (solid at room temperature). The exceptions to this rule are the highly saturated liquid coconut and palm oils, which are often used in convenience packaged foods and fast foods because these oils are cheaper. Check labels for the kind of fat in products.

To reduce your total fat, try eating more chicken and fish (baked or pull off the breading), low fat milk (2 cups per day), fresh or canned fruit for dessert. Use little or no gravy, sauces, and salad dressings. Reduce amount of butter/margarine added at the table on vegetables and breads. Keep high fat snacks to a minimum. Alternate eggs with cereal for breakfast.

Eat smaller portions of high fat foods, or don't eat them as often. You do have more control than you think, even if you eat out.

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NUTRITION AND FITNESS

Are you part of the growing fitness boom? Sedentary jobs, excessive calorie intakes due to increased restaurant eating, convenience foods, making poor food choices, and lack of exercise have contributed to excess weight and health related problems. Maintaining ideal weight is not enough. There are those members who exercise regularly, remain thin, and are still surprised at discovering they have high cholesterol or blood pressure. Many people lose weight only to see the scales climb after a few weeks off their "program". Not acquiring new life-long eating habits, crash dieting, or not sustaining an exercise program often are leading causes of backsliding. For those who have made lifestyle dietary changes, exercise is a key factor in maintaining weight and even allows one to eat a few extra calories.

Exercise itself does not burn many calories, but it does help to increase the body's metabolic rate (how fast it burns calories) while in the exercise state and for a few hours afterward. Someone who requires 2000 calories per day to maintain that weight may be able to eat 2500 calories with regular exercise. Exercise also contributes to increasing muscle mass and decreasing body fat. Since muscle cells weigh more than fat cells, the body weight may actually increase when calories are maintained through exercise while producing a slimmer body. All the positive effects unfortunately reverse themselves when regular exercise is discontinued.

Nutritional needs do not change greatly with the introduction of exercise, but many people feel the need to take vitamin supplements, increase protein, and drink special sports drinks to enhance performance. Although claims have been made for every supplement and athletic diet ever promoted, there is little evidence other than psychological that many of these provide any benefits. A total calorie increase from all the food groups, especially complex carbohydrates (fruits, vegetables, breads, cereals, starches) is needed for a vigorous exercise program to maintain weight and provide any additional nutrients. It is a fallacy that protein builds muscle. High protein diets may place undue stress on the kidneys to rid the body of the byproducts of protein metabolism. It is always important to drink plenty of fluids before, during, and after exercising to prevent dehydration. Water or diluted unsweetened fruit juice is recommended. Salt tablets are dangerous and can upset the body's electrolyte (sodium, potassium) balance. Sports drinks with added electrolytes are unnecessary. They can actually be harmful because their high sugar content can slow stomach emptying. Cool water or juice will empty from the stomach faster and cool the body.

So what is the bottom line on nutrition and exercise? A balanced diet with adequate fluid intake will help with any new exercise program. Serious athletic competitors who may need specialized diets for their sports should seek nutritional advise from a dietitian or qualified nutritionist. And remember that stress reduction, smoking, and other health related lifestyle habits need to be considered to be healthy. Just looking good is

not enough!

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FEEDING YOUR CHILDREN

Does your child hide his peas under his plate or feed them to the dog under the table? Does he like broccoli one day and hate it the next? Does she seem to chew all her food but never swallow it? These and many other behaviors are annoying to parents but perfectly normal to most children. For many children it's part of growing up, and we all passed through this stage. Most important is the example you set for your child. This may mean eating those brussel sprouts you're not wild about and not drinking sodas at mealtimes, but the sacrifice is worth it! Here are some tips to help your children develop healthy eating habits. You may benefit, too!

1. Because a child is growing from birth through adolescence, he/she needs more calories and nutrients. Children can not afford "empty nutrient foods" during this growth stage.

2. Children begin to accumulate fatty plaque in arteries at age two. Be aware of this, but insure adequate calories from all food groups. Introduce healthy low fat foods.

3. Studies show that children who eat breakfast are more attentive at school and less susceptible to illness. Be creative: you don't have to serve typical breakfast foods. Stay away from sugar coated cereals and sweets.

4. Does your child hate milk? Try yogurt with fruit, cheese, and add powdered milk to foods you prepare. Substitute milk for soda or "fruit drinks" high in sugar.

5. Many kids hate vegetables. Try raw foods cut in bite size pieces. Ask the older child to help prepare them. Try the milder smelling vegetables first, just a taste. Never force the child. This week's hated food may be next week's favorite. Make sure your vegetables are not overcooked and look good. Think back to your own experiences and try to improve upon them for your child.

6. What you put in your child's lunch may not be what he/she actually eats. Remember the daily trading frenzies to "get something good"? School lunches may be healthy depending on what your child chooses. It's up to you to instill the basics.

7. Children need snacks. It's hard to consume all the needed calories in just three meals. Good choices are fruit, cheese and crackers, yogurt, raw vegetables, popcorn, sandwiches, and baked goods with low sugar and fat content. If you don't want your child to eat candy

and cookies, then don't keep those foods in your house. However, an occasional sweet treat is okay. Continued restriction of forbidden foods may lead to food problems later in life.

8. Be aware of the TV and supermarket enticements. Make a game out of finding the gimmick in the advertisement. Know your limits and stick to them when shopping.

9. If your child is overweight, limit intake of sweets and fatty foods, but don't put him/her on a diet unless medically indicated. Increase activity, and allow height to catch up with weight. Don't expect your child to "grow out of it" on his own. It is not true that fat kids are healthy kids.

Remember that you are responsible for teaching your children lifetime habits. The recruit at boot camp who chooses sugar coated cereal or hamburgers and fries on a daily basis may very well have grown up with these foods. Habits are hard to break. Learn to eat healthy with your kids. All of you will benefit!

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CUTTING DOWN ON SODIUM

Some sodium is needed by your body daily, and it occurs naturally in most foods. What we add to food either in preparation or from the shaker is called salt, which is sodium and chloride. We often use the words "salt" and "sodium" interchangeably. Years of salting food often before tasting has given us a "salty tooth" much like a "sweet tooth". It is often harder to give up the salt shaker than sugar. Salt substitutes are really indicated only for some one who medically needs a low sodium diet. These substitutes replace the sodium with potassium which has a bitter taste. But there are tastier ways to decrease your salt intake. Notice that many salty foods are also high in fat. You will make two good lifestyle changes at once!

Table salt is just one way to salt food. Look at the ingredients in soy sauce, ketchup, mustard, and steak sauce, to name a few. Any label listing the word salt, soda, or sodium as an ingredient contains salt. Salt is used as a preservative in smoked, cured, and brine foods such as ham, lunch meats, fish, sauerkraut, and pickles. Look in your local grocery store for reduced sodium meats, crackers, and seasonings. Many will be located along side of regular foods, not in the diet section.

Other salty foods include "snack foods", such as potato chips, pretzels, and cheese puffs. Canned meats (tuna, chicken), soups, all cheeses, peanut butter, and vegetables also contain salt as well as convenience mixes (noodles, hamburger helper, spaghetti). Foods low in salt are fruits and vegetables, noodles, rice, plain hot cereals, fresh (not cured) meats, and spices and herbs with no added salt.

What is considered to be too much sodium? Suggested daily level is up to 3000 milligrams (mg). One serving of ham has 1000 mg. One tablespoon of soy sauce has 1029 mg. One teaspoon of salt has 2300 mg. See how easy it is to reach your quota? But one serving of chicken has only 75 mg. Plain rice with herbs has 0 mg. Plain popcorn has only a trace. You can control your sodium intake by choosing foods wisely and not using too much salt or salty seasonings at the table. It's the total that counts. If you choose a ham sandwich and soup at lunch, pick foods lower in sodium at supper.

Making responsible choices is important. Too much <u>and</u> too little sodium is not healthy. Sodium helps to maintain proper water balance in the body, and our bodies are continually trying to maintain that balance. But unfortunately most of us never have to worry about too little sodium. Too much sodium can contribute to high blood pressure. Taste your food before you pick up that salt shaker. You may be surprised at the good taste and real flavor of the natural food!

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CUTTING DOWN ON FAT AND CHOLESTEROL

Do you know your cholesterol level? Cholesterol has suddenly become the latest nutrition buzz word. The long awaited summary report of the National Cholesterol Education Program Coordinating Committee stressed the need for all Americans to know their cholesterol numbers and make necessary dietary changes. Heart disease is our number one killer. The young and old can benefit from a diet lower in fat to decrease risks and severity of other diseases such as obesity, diabetes, and high blood pressure. But first, what is cholesterol, where does it come from, and how can it be controlled?

Cholesterol is made by the body and found in animal foods. It is moved in the blood by a protein that carries fat called a lipoprotein (lipo means fat). Low-density lipoproteins (LDL) carry cholesterol <u>to</u> the arteries, where it can eventually clog and form a clot. High-density lipoproteins (HDL) carry cholesterol <u>away</u> from the arteries to the liver, where it is destroyed. It is important to reduce LDL and increase HDL levels. Losing weight and decreasing the total fat (not just cholesterol) from your diet will decrease LDL. Regular aerobic exercise can increase HDL. The ratio of total cholesterol to HDL will give you a good indication of your risk for heart disease. Some other general guidelines are 200mg. or below for cholesterol and 130mg. or below for LDL. Ask your doctor to explain your lipid test results at the time of your physical exam.

Don't be confused by the words "cholesterol free". This does not mean fat free. Peanut butter contains no cholesterol but is all fat. Reducing your intake of fat means <u>total fat</u>. Animal products, coconut and palm oils are saturated. Vegetable products (corn, soybean, safflower) oils are unsaturated. All have equal calories. The FDA has proposed standards for cholesterol labelling, but again don't be confused by a low cholesterol high fat food. The typical American diet still is high in red meats, fried foods, whole milk, and eggs. Fast foods claim excess calories from fat. The hidden fat in food preparation adds calories. Stir fried vegetables may provide fiber, but all that oil in the wok adds fat calories. Try using water instead.

Family history provides valuable information. Many slim regular exercisers are shocked to find elevated cholesterol levels. A strict low fat diet, and, as a last resort, drugs are often prescribed. Check your children early for a baseline value. Cholesterol starts building in the blood at the age of two. Learn to eat healthy as a family. A low fat diet does not have to be boring, and you don't have to give up all your favorite foods.

Surveys show that less than ten percent of Americans know their cholesterol levels, and many are confused over the terms used to sell food products with fat. But public awareness is growing, and we are making dietary changes. Although we still get more than 30% of our daily calories from fat, food consumption surveys show we are buying more fruits, vegetables, fish and chicken. Change is always slow, but you can have a

major impact on your life and your family by "knowing your number" and doing something about it!

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PLAN OF THE DAY NOTES

Sports Nutrition Quiz (True/False)

1. Supplements
   Vitamins, minerals, bee pollen, brewer's yeast, and protein formulas improve performance. FALSE. Individuals who increase their calorie needs from all food groups to compensate for increased activity should require no additional supplements. High doses of certain vitamins and minerals can be very expensive as well as toxic.

2. Sports Drinks
   Water is the most critical nutrient for all exercisers. TRUE. Many sports drinks contain sugar, which delays stomach emptying and slows body cooling. The best drink is water or diluted fruit juice. Be sure to drink before, during, and after activity, especially in hot humid climates.

3. Calorie Requirements
   People who exercise mainly to maintain a level of fitness do not need to increase calories. TRUE. However, the training athlete should increase total calories, particularly in complex carbohydrates, to adjust to calorie needs for the sport performed. It is important to eat at least 3 meals per day to prevent calorie overload which leads to increased fat storage by the body.

4. Protein Requirements
   Protein builds muscle. FALSE. When we eat increased protein, it is burned for energy just like carbohydrate or fat, and the excess is stored as fat not muscle. Eating large servings of protein foods can be dangerous for the kidneys, which need to work extra hard to rid the body of the byproducts of protein. The old training table days of steaks and pitchers of whole milk actually do a disservice to our bodies by drastically increasing fat intake and cholesterol levels in the blood.

5. Athletes and Weight Control
   Too often, athletes whose sports, like wrestling, induce a weight limit will resort to starving, use of diuretics, vomiting, laxatives, and sweating in saunas or plastics suits to "make weight". TRUE. Not only do these practices cause only temporary water losses, but they can be very dangerous. They interfere with strength, stamina, and the body's ability to cool itself during and after competition. If weight is a factor, begin your weight program well in advance of competition to insure maximum performance.

FAT

1. Cholesterol is a fatty material found in all animal products-milk, butter, meats, and eggs. It is not found in fruits, vegetables, beans, and grains. The body makes its own cholesterol for hormones and other processes. The extra cholesterol we get from our diet can lead to a buildup along blood vessel walls which eventually can lead to a clot and heart attack. Studies have shown that this process can begin at the age of two. Desirable cholesterol values should be less than 200. Moderate risk is 200-239. High risk is 240 and above. Be sure to check your values and ask the doctor on your next physical.

2. Saturated fat is found in all animal products and some vegetable oils (coconut, palm oils). Unsaturated fats include peanut and olive oils, sunflower, safflower, corn, and fish oils. All fats and oils contain the same number of calories. The words "cholesterol free" do not necessarily mean no fat or no calories. It is advisable to reduce all fat intake. The fats we do eat should be more unsaturated than saturated. Remember that oil can be a hidden fat in food preparation.

3. Triglycerides are the main type of storage bodyfat. They are made of fatty acids and glycerol. The fatty acids may be saturated or unsaturated. A high sugar diet and heavy alcohol intake may contribute to higher triglyceride levels. Acceptable levels are age related, but values should be in the low 100's or below. This information will also be provided along with cholesterol on your physical examination.

4. Omega-3 fatty acids are one of the latest fads. Omega-3 refers to the structure of this highly unsaturated oil found in fish. (Omega-6 fatty acids occur in polyunsaturated plant oils). The omega-3 oil appears to: make platelets (clotting factor in blood) less sticky, lower blood fat levels, and alter the balance of fat in the blood. Eskimos, who eat high levels of these fats, have low incidence of heart disease. Doctors suggest eating more fish, not pills. Many of these pills do not contain 100% omega-3, have not been refined, and still provide fat calories. There have also been cases of hemorrhaging due to self-diagnosed heavy intakes of fish oil pills.

5. High Density Lipoproteins (HDL) form a coating on the arteries and help dissolve fatty deposits. The goal is to increase HDL levels. The HDLs may be decreased by some medications and smoking. Exercise will help increase levels. Men should try to maintain HDL levels at least above 45 or 20% of their cholesterol level. Women should aim for at least 55 or 25% of total cholesterol.

6. Low Density Lipoproteins (LDL) carry and deposit fat to the arteries. The goal is to lower LDL levels. The LDL blood levels can be reduced by eating less fat, losing weight, exercising, and using certain drugs as a last resort. Ideal levels should be less than 130. Moderate risk is 130-159. High risk is over 160. Very Low Density Lipoproteins (VLDL) become LDLs after delivering triglycerides to the bodyfat storage areas.

7. What is your cholesterol ratio? It is total cholesterol divided by HDL. Men should aim for a ratio of 5 or less, women 4 or less. For example, my total cholesterol is 215 and HDL is 50. My ratio is 215/50 or 4.3. You should always look at each value separately, not just the ratio.

8. How to decrease total fat in your diet. Select lowfat or skim milk instead of whole milk and limit yourself to 2 glasses per day. Eat fish and chicken more often (baked not fried). Do not use extra butter/margarine on potatoes, bread, vegetables. Limit gravy and salad dressing. Choose fruits instead of rich desserts. Eat fewer deep fried foods of all kinds. Be careful of snacking on chips, candy bars, and ice cream. Know what you are eating, not just how much.

9. Cholesterol Lowering Drugs. When strict diet, weight reduction and exercise fail to lower cholesterol, doctors might prescribe drugs to help reduce cholesterol levels. In many cases drugs may actually reduce cholesterol up to 25%. This method is only successful when combined with an aggressive nutrition program. Drugs must be taken continually to keep cholesterol levels low.

SODIUM, FIBER, SUGAR

1. Sodium is a mineral that occurs naturally in many foods. It combines with chloride to form table salt, which is added to food for flavor or as a preservative. We often interchange the words sodium and salt. One teaspoon of salt contains 2000 mg. The suggested daily intake is no more than 3000 mg. The average American diet contains up to 10,000 mg. daily. A diet high in sodium can contribute to high blood pressure.

2. What foods are high in sodium? Taste is usually a good indication. Processed meats (ham, bacon, lunch meat) are much higher than plain meats (chicken, beef, fresh pork). Canned soups, vegetables, meats, cheeses, snacks (chips, pretzels, nuts) are also high in sodium. Some cereals and baked goods contain high sodium levels that are not always detected by taste.

3. Be a sodium ingredient watcher. The following ingredients in food contain sodium: sodium citrate (in juices), sodium nitrite (in cured meats), baking soda and powder (in baked products), and monosodium glutamate (MSG- flavor enhancer). Seasonings such as soy sauce, steak sauce, barbecue sauce, salad dressings, and all the seasonings salts contain large amounts of sodium. Again, the amount and frequency is as important as the kind of food. Sprinkling soy sauce over that serving of rice will increase a sodium amount of 0 mg. to 1000 mg.

4. Complex carbohydrates consist of starches and fiber. Examples are fruits, vegetables, and grain products (rice, noodles, breads). In themselves, they are low in calories and fat. Simple carbohydrates are sugars including table sugar, brown sugar, corn syrup, honey, and molasses. Some sugars occur naturally in foods such as fructose (in fruit) and lactose (in milk). One teaspoon of table sugar contains only 16 calories, but most products contain more (1 can of soda has 9 teaspoons).

5. Too much sugar in your diet especially the amount and type (sticky food like candy) can contribute to tooth decay. Many high sugar foods are high in calories and fat and low in nutrients. Although sugar does not cause diabetes or heart disease, obesity is a related cause. Cutting down on high sugar foods can reduce total calories and aid in weight reduction.

6. Fiber is the part of plants that we can not digest. Plants contain different amounts of fiber: 1/2 cup beans- 9 grams, 1 oz. all bran- 8 grams, 1 slice whole wheat bread- 2 grams, 1/2 cup lettuce- .4 gram. Processing can lower the fiber content: 1 apple- 4 grams, 1/2 cup applesauce- 2 grams, 3/4 cup apple juice-.2g. Research has shown positive benefits of fiber on cancer, diabetes, heart disease, and obesity. It still is not certain how much fiber we need daily, but Americans could benefit from increasing fiber intake.

7. How can we increase fiber in our diet? Whole wheat bread is not the only answer. Other whole grains include oatmeal, popcorn, corn tortillas, cornmeal, and brown rice. Many cereals are high fiber. Beans, peas, fruits and vegetables with skins, stems, and seeds are good fiber sources. Nuts, seeds, and granola, though high calorie foods, are good fiber sources. It is not necessary to take fiber supplements or use supplemental oat bran if you eat a variety of foods.

WEIGHT CONTROL

1. What is ideal weight? Weight charts can not always tell you if you have a weight problem. Ideal weight does not mean you are fit. If you weigh more than the charts say, is your excess weight fat or muscle? Exercise and decreased calories will help slim you and reduce your bodyfat.

2. What is percent body fat? Everyone needs some fat to insulate the organs and provide energy. Your percent body fat value is your fat weight divided by your total body weight. Several methods can determine this number, and the accuracy of each depends on both the equipment and the person taking the measurement. Average values for men are 15% and 20% for women. But most Americans are heavier. You may be within an acceptable weight for your height, but still have an excess of that weight as fat. Excess fat contributes to obesity, heart disease, diabetes, cancer, and high blood pressure. It takes a long time to lose body fat. Measure yourself only once per month. If you are losing too fast, chances are it's muscle, not fat. If you regain the weight, it will be fat. You will end up with more fat than when you started! Exercise will help you keep the fat off.

3. What body type are you? There are three basic body types: ectomorph (very slim), mesomorph (stocky, muscular), and endomorph (pear-shaped, heavier). Where is most of your fat located? Research indicates that people with weight located at waist and above as opposed to below the waist (heavier hips and legs) may be at more risk for certain diseases (cancer, heart disease). You can't change the body type you got from your parents, but you can control the size through diet and exercise.

4. What is a calorie? A calorie is a unit of heat. Foods are placed in a box called a bomb calorimeter (a small chamber surrounded by water) and burned. The amount of heat given off by the burning food is measured by how hot the water becomes. This unit of heat is called a calorie. Your body "burns" the food you eat. The calories burned perform various body functions. The extra calories are stored as fat.

5. How many calories do you need per day? If you are at your ideal weight and perform moderate exercise three times per week, multiply your weight by 12. If you are overweight, multiply your weight by 10. It is a fallacy that all overweight people eat more than thin people. Since fat takes fewer calories to maintain, an overweight person can hold or increase his/her weight on fewer calories. If you are in training or a very heavy exerciser, multiply your weight by 15.

6. Exercise makes you hungry. FALSE. Exercise actually depresses the appetite. It also develops endurance, reduces stress, and maintains weight loss. Exercise in itself does not burn many calories, but the overall effect is to gradually speed up the body's metabolism (rate of burning of calories). If you do not continue exercising following weight loss, you may find that you will regain lost pounds.

7. Beware of diet fads. Many diets advocate very low calorie levels, special combinations of foods, pills, and eliminating entire food groups. Any diet, regardless of gimmicks or food combinations, will work if it's lower in calories than you need to maintain your weight. However "on a diet" eventually leads to "off the diet". Make permanent healthy changes. It may take longer, but the rewards will be longlasting.

VITAMINS AND MINERALS

1. A vitamin is an organic substance found in food that is needed by the body in very small amounts as part of body processes. Some vitamins are stored by the body (Vitamins A, D, E, K). Others are not stored (Vitamins B, C). It is not necessary to take vitamins in pill form if you eat a variety of foods from all the food groups. There is an old saying that Americans have the richest urine in the world from all the needless supplements we consume on a daily basis.

2. Minerals are also substances found in foods and needed by the body in small amounts. Minerals include calcium, potassium, iron, and magnesium. There have been cases of toxicity from overuse of minerals. Some supplements, such as iron and calcium for some women, may be indicated. However, don't diagnose yourself. Remember, you are already getting minerals from your food.

3. The "B" Vitamins provide extra energy and prevent stress. FALSE. That rundown feeling can only be overcome by sleep, exercise, good eating habits, stress reduction, to name a few. Extra "B" vitamins or concoctions of brewer's yeast won't overcome a bad lifestyle. There have been cases of deficiencies, but these are very rare. Get your "B" vitamins from whole grains, meats, green leafy vegetables, and dairy products. Many cereals, breads, noodles, and rice are enriched with these vitamins.

4. Does Vitamin C cure colds? NO. The Royal Navy cured cases of scurvy using citrus fruit juice containing this vitamin (the name "limeys" for their sailors). New research shows vitamin C may lessen the severity but not cure colds, but this is still controversial. Adults can get their daily needs from 1 glass of orange juice. Extra is not stored by the body. Other sources include dark green vegetables, tomatoes, and potatoes. Long cooking can cause Vitamin C loss.

5. Vitamin E can slow aging, increase endurance, and increase sex drive. FALSE. Some functions include protecting Vitamins A, D, K, and red blood cells. Vitamin E is found in small amounts in a variety of foods, so deficiencies are very rare. Vegetable oils, green vegetables, wheat germ, and eggs are good sources. Large doses in treating diseases such as sterility, cancer, ulcers, and skin disorders has been unsuccessful.

6. Natural vitamins and minerals are always better than synthetic. FALSE. Health food stores love this myth. Of course, it's always better to get your needs from food. However, the structure for a vitamin is the same whether it comes from a plant or is manufactured. Many "natural" supplements do not contain all natural ingredients. Your body needs a balance of all the vitamins and minerals. When you take self-prescribed supplements, you may upset this balance and get much more than you really need.

7. Calcium is important in maintaining strong bones and teeth. Many women do not get adequate calcium daily, exposing themselves to the risk of osteoporosis (brittle bones). Dairy products, dark green vegetables, and fish with bones provide calcium. Lowfat foods include skim and lowfat milk and yogurts, and lowfat cheeses. Remember the amount. 1 cup of milk, 2 cups of cottage cheese, and 1 3/4 cups ice cream all contain equal amounts of calcium, but they differ in calories. Many men consume extra calories by drinking large quantities of milk. Remember, 2 servings per day meets your needs.

ALCOHOL

1. Alcohol has seven calories per gram. TRUE. Both alcohol and mixers contain calories and little nutrients. Approximately equal amounts of alcohol are found in 1 can of beer, 1 shot of liquor, and 3 oz. of wine. Lite beers are not always lower in calories. Mixers (sodas, cocktail mixes, and juices) add calories. Try club soda, sparkling water, diet soda. You can be aware of what and how much you drink and still enjoy yourself.

BALANCED DIET

2. Do you eat a variety of foods every day? No one food supplies all the nutrients you need. A varied diet includes foods from the milk, fruit and vegetable, meat and meat substitute, and bread, cereal, and other grain product food groups. This does not mean you can't enjoy your favorite "sweet or fattening" treat. What is important is what you routinely eat.

3. The milk group includes milk, yogurt, and cheese. If you don't or can't drink milk, try cheese, tofu, tortillas made with fortified calcium, salmon and sardines. Baked products, ice creams, and frozen yogurts may have calcium, but they also contain large amounts of fat and sugar. Learn to trade off a high fat calcium food for low fat. 1 cup of skim milk has no fat and 80 calories. 1 cup of low fat milk has 1 tsp. of fat and 120 calories. 1 cup of whole milk has 2 tsp. of fat and 180 calories. Daily requirement is 2 servings.

4. Fruits and vegetables provide vitamins, minerals, and fiber. The daily need is 4 per day. Try to include a citrus source (orange, grapefruit) for Vitamin C. Dark green vegetables (broccoli, greens) provide Vitamins A and C. Yellow (squash, tomatoes) provide Vitamin A. Fruits and vegetables taste good raw, but you can obtain nutrients from cooked and canned if you have limited access to raw and steamed foods. Be moderate in your use of fat, sauce, salad dressings, and syrup on fruits and vegetables, or drain off these items before eating them.

5. Meats provide protein, vitamins, and minerals. Eggs, nuts, seeds, peanut butter, and cheese can substitute, but these are all high in fat and calories. Chicken, especially when skinned, and fish contain less fat than beef and pork. However, breading and frying increase calories. Choose baked lower fat meats or pull the breading off a fried item. Just because you are served a 8 oz. portion of steak does not mean you have to eat all of it. A hamburger from the speed line may be lower in calories than the casserole due to the fat! If you choose the hamburger, then skip the fries and have a salad and fruit. Aim for 2 daily servings of this group.

6. Breads, cereals, and grains contribute B vitamins, minerals, and some protein. They also include cereals, noodles, rice, and other products made from grain. The variety can again be high or low calorie depending on the preparation or what you add at the table. 1 serving of plain rice has 80 calories; fried rice has up to 200. 1 cup of corn flakes has 110 calories; 1 cup of granola has 560 (hidden fat and sugar). Whole grains (wheat bread) may contain more fiber, vitamins, and minerals, but storage is limited due to rancidity. Most breads, cereals, and rice products are already enriched or fortified, providing you with what you need. Average daily intake should include 4 servings of this group.

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