

HOW DOCTORS CAN INFLUENCE PATIENTS' EATING HABITS

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ABSTRACT

Doctors, including family physicians, are crucial in promoting preventive healthcare, particularly in guiding patients towards healthier eating habits. With the introduction of Singapore's Healthier SG initiative, which seeks to improve overall public health and reduce the incidence of chronic diseases, doctors play a crucial role in encouraging dietary changes during consultations. This article outlines practical strategies for doctors to support and assist patients in adopting healthier eating behaviours. It also delves into methods like individualised dietary advice, motivational interviewing, and promoting of national health campaigns to influence patients' behaviours effectively.

Keywords: Nutrition, diet, dietary counselling, chronic disease prevention and motivational interviewing

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INTRODUCTION

The Healthier SG initiative, launched by Singapore's Ministry of Health (MOH), is a nationwide strategy to enhance the population's health through preventive care measures. A vital element of this initiative is the management of chronic diseases, including those linked to unhealthy diets, within the communities.¹ This care is supported by doctors, including family physicians, and their integrated healthcare teams. Given the growing cases of chronic diseases such as diabetes, hypertension, and hyperlipidaemia in Singapore, doctors are pivotal in promoting behavioural changes related to diet.² Their role in shaping patients' dietary habits during consultations is essential in furthering the objectives of Healthier SG.

Incorporating dietary counselling into routine consultation allows doctors to raise awareness and help patients adopt healthier eating habits, which is crucial in preventing and managing chronic diseases. This article discusses how doctors can use communication techniques, practical advice, and promotion of national campaigns to effectively influence their patients' dietary intake.

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BRINGING AWARENESS TO NUTRITION AS PART OF THE CONSULTATION

Doctors often develop long-standing relationships with their patients. In a 2007 study conducted in Singapore's Redhill region, 60 percent of interviewed residents reported high trust in their family physicians.³ This trust is a valuable tool that can significantly impact patients' dietary choices. A 2017 meta-analysis highlighted the positive association between trust in healthcare providers and improved health outcomes.⁴ However, trust alone is not enough. To fully harness this trust, doctors must actively engage patients in conversations about healthy eating during consultations.

Raising awareness about dietary habits through these conversations is particularly important for patients with chronic diseases. Doctors can begin by asking straightforward questions about their patients' eating habits or areas where they feel their diet needs improvement to manage their chronic conditions better. This can lead to more detailed discussions about healthier options. By consistently addressing nutrition and monitoring progress, physicians underscore its importance, in line with the Healthier SG framework that advocates for preventive care at the primary level.

INDIVIDUALISED DIETARY ADVICE BASED ON PATIENT NEEDS

Tailoring dietary advice to each patient's needs is crucial for effective nutrition counselling. Generic advice might not resonate with patients or fit into their lifestyle, making it less likely to be followed. For instance, patients with uncontrolled diabetes may benefit from target recommendation on having regular meals, as skipping meals would potentially lead to larger carbohydrate portions at subsequent meals.⁵ Similarly, patients with hypertension might need guidance on reducing their sodium intake to lower blood pressure.⁶

However, it is important to note that managing these common chronic diseases such as diabetes, hyperlipidaemia, and hypertension does not deviate from the fundamental principles of "My Healthy Plate". This model provides a balanced approach that can be adapted to address specific health conditions while maintaining overall nutritional balance.

My Healthy Plate

My Healthy Plate is Singapore's adaptation of the United States' MyPlate, introduced by the Health Promotion Board in 2014.⁷ It provides a clear, easy-to-follow guide for balanced eating, tailored to meet various health needs. Below is a summary of the fundamental principles behind My Healthy Plate that doctors can use to counsel patients:

Brown Rice & Wholemeal Bread

Fill one-quarter of the plate (10" in diameter) with whole grains like brown rice, wholegrain noodles, oats, wholemeal bread, or chapati. Whole grains offer several benefits, including providing sustained energy and improving glycaemic control for patients with diabetes. They can also help reduce LDL cholesterol for those managing hyperlipidaemia. For individuals with obesity, whole grains promote fullness, which helps reduce calorie intake and prevent snacking.⁸

Tips for Increasing Whole Grains⁸:

- Gradually replace at least 20 percent of refined grains with whole grains.
- Experiment with different whole grains like oats, barley, quinoa, or wholegrain noodles.
- Look for products with the Healthier Choice Symbol (HCS), which indicates higher whole grain content.

Meat & Other Protein Sources

Allocate another quarter of the plate to protein-rich foods, such as meat, fish, poultry, tofu, eggs, or pulses. Protein plays a crucial role in increasing meal satiety, helping to prevent overeating, and maintaining muscle mass. For patients managing hyperlipidaemia or obesity, focusing on lean protein sources can reduce fat intake and support healthier weight management.⁸

Tips for Choosing Lean Protein⁸:

- Opt for lean cuts of meat and trim visible fats.
- Choose fresh meats over processed options like sausages or luncheon meat.
- Incorporate both plant-based and animal-based proteins for variety.
- Select low-fat or non-fat dairy products instead of full-cream alternatives.

Fruits & Vegetables

Encourage patients to fill half their plate with diverse fruits and vegetables. For individuals with diabetes, emphasise the importance of non-starchy vegetables and lower-glycaemic fruits to help prevent sharp increases in blood sugar. For those managing hyperlipidaemia or obesity, fibre-rich vegetables and fruits help manage cholesterol by promoting cholesterol excretion through the digestive system and increasing satiety, aiding in weight control.⁸

Tips for Including Adequate Fruits and Vegetables⁸:

- End meals with fresh or frozen fruits.
- Choose whole fruits over fruit juices.
- Incorporate fruits and vegetables into dishes that usually contain meat.

- Keep frozen fruits and vegetables on hand to ensure a steady supply.

Choose Water

Emphasise the importance of staying hydrated by choosing water as the primary beverage. This is important for patients with obesity and diabetes, where sugary drinks can contribute to weight gain and spike in sugar levels.

Tips for Limit Sugar Intake⁸:

- Limit sugary drinks.
- Choose beverages lower in sugar or no added sugar by looking out for the Healthier Choice Symbol or Nutri-Grade A and B.

Use Healthier Oils

Encourage the use of healthier oils, such as olive oil, canola oil, or sunflower oil, for cooking and meal preparation. For patients with hyperlipidaemia and hypertension, these oils provide heart-healthy unsaturated fats and help reduce the intake of saturated and trans fats found in processed foods. This can improve cholesterol levels and support cardiovascular health.⁸

By following the My Healthy Plate model, physicians can offer patients a clear, practical framework for making healthier food choices adaptable to their specific health conditions. This approach ensures that dietary recommendations are personalised and grounded in a balanced, sustainable eating plan that supports overall health and well-being, addressing the complexities of managing chronic conditions like diabetes, hyperlipidaemia, hypertension, and obesity.

DIETARY MANAGEMENT FOR OBESITY, DIABETES, HYPERLIPIDAEMIA AND HYPERTENSION

In addition to utilising the My Healthy Plate model, additional dietary strategies are essential for effectively managing obesity, diabetes, hyperlipidaemia, and hypertension. As outlined in the table below, specific dietary interventions can be customised to meet the unique needs of patients with these conditions, complementing the core principles of My Healthy Plate. Refer to **Tables I to IV** for the additional dietary strategies and **Table V** for the top three prioritised dietary management for these common chronic diseases.

Table I: Additional Dietary Strategies for Obesity

Practice mindful eating by drinking water before and during meals to enhance satiety, use smaller plates, and chew slowly to promote awareness of food intake
Maintain a regular meal schedule and avoid skipping meals to prevent overeating later in the day
Avoid fad diets for long-term sustainability; do not restrict certain foods or entire food groups excessively
Cease or limit alcohol consumption to no more than two servings daily (e.g., 330 ml of beer, 100 ml of wine, or 30 ml of hard liquor) ⁹

Table II: Additional Dietary Strategies for Diabetes

Space out meals and snacks 3-5 hours apart to allow blood glucose to return to baseline ¹⁰
Cease or limit alcohol consumption to no more than two servings daily (e.g., 330 ml of beer, 100 ml of wine, or 30 ml of hard liquor) ⁹
Avoid drinking alcohol on an empty stomach to reduce the risk of hypoglycaemia
To minimise blood glucose fluctuations, maintain consistent carbohydrate intake and regular meal timings, especially when using sulfonylureas or insulin

Table III: Additional Dietary Strategies for Hyperlipidaemia

Limit cholesterol intake to less than 300 mg per day by reducing consumption of internal organs, limiting seafood (excluding fish) to ≤2 times per week, and restricting egg yolks to ≤4 per week ¹⁰
Avoid or minimise alcohol consumption to help lower triglyceride levels

Table IV: Additional Dietary Strategies for Hyperlipidaemia

Follow a DASH diet by increasing intake of fruits, vegetables, whole grains, nuts, seeds, and legumes, while reducing saturated fats, trans fats, and cholesterol ^{10,11}
Reduce sodium intake by ¹⁰ : <ul style="list-style-type: none"> • Limiting processed foods • Avoiding salted snacks and foods • Adopting healthier cooking practices, such as reducing salt and sodium-rich seasonings, and using natural herbs and spices • Make healthier choices when eating out, such as limiting gravies, avoiding dipping sauces, and leaving soup behind
Cease alcohol or limit alcohol consumption to no more than two servings per day (e.g., 330ml of beer, 100ml of wine, or 30ml of hard liquor) ⁹

Table V: Prioritised Dietary Management of Chronic Diseases

Chronic Diseases	Dietary Management
Obesity	<ul style="list-style-type: none"> • Reduce overall caloric intake • Increase fibre • Reduce refined carbohydrate and fats
Diabetes	<ul style="list-style-type: none"> • Regular meal and avoid excessive carbohydrate • Increase fibre • Reduce refined carbohydrate and fats
Hypertension	<ul style="list-style-type: none"> • Reduce sodium • Reduce overall caloric intake, especially if overweight • Limit alcohol
Hyperlipidaemia	<ul style="list-style-type: none"> • Reduce total, saturated, and trans fats, replace with unsaturated fats • Increase fibre and reduce refined carbohydrate • Limit alcohol, especially if high in triglyceride

USING MOTIVATIONAL INTERVIEWING TECHNIQUES

Changing eating habits can be difficult due to ingrained behaviours, cultural influences, and personal preferences. To help patients navigate this challenge, family physicians can use motivational interviewing, a counselling technique that encourages patients to reflect on their habits and recognise the benefits of changes. This approach is especially practical in nutrition counselling, as it allows patients to identify their motivations for adopting healthier eating habits and set realistic goals.

One core aspect of motivational interviewing is the OARS techniques¹²: Open-ended questions, Affirmations, Reflective Listening, and Summarising. Instead of simply instructing patients to change their diet, physicians can ask open-ended questions that encourage patients to explore their thoughts and feelings. For example, asking a question like “If you did really decide you want to lose weight, how could you improve your diet?” allows patients to express their ideas and take ownership of the process.

Affirmations involve acknowledging and validating the patient’s efforts and strengths, such as saying, “It is encouraging to see how committed you are to reducing sugary drinks.” This recognition fosters trust and openness, making patients more likely to continue their positive changes and less likely to become defensive. On the other hand, reflective listening entails paraphrasing what the patient says to demonstrate empathy and guide them towards change. For example, responding with something like “It sounds like you are worried about how your diet impacts your blood sugar” helps validate their concerns and encourages deeper self-reflection.

Example of Reflections:

- It sounds like...
- What I hear you saying...
- So, on one hand it sounds like...
- It seems as if...
- I get the sense that...
- It feels as though...

Summarising brings together critical points from the conversation to reinforce the patients' goals, such as "Your pants are getting tighter, you are more breathless when walking, and you have lesser energy. So, you want to reduce your sugar intake and add more vegetables to help with your weight." At this point, physicians can guide patients in setting SMART goals – Specific, Measurable, Achievable, Realistic, and Time-bound¹³. For example, a SMART goal could be: "I will stick to My Healthy Plate at lunchtime on Monday and Thursday for the next three months".

PROMOTING NATIONAL HEALTH CAMPAIGNS

Family physicians can further amplify the impact of their dietary advice by promoting national health campaigns during consultation. The Healthier Choice Symbol, Nutri-Grade, and Eat, Drink, Shop Healthy campaigns are designed to make healthier food options more accessible to the public. Physicians can recommend this initiative as part of a broader strategy to help patients make healthier choices outside the clinic.

Healthier Choice Symbol

The Healthier Choice Symbol (HCS)¹⁴ is a label introduced by the Health Promotion Board (HPB) to help consumers identify healthier food options. Products with the HCS meet specific nutritional criteria, including lower levels of saturated fat, sugar, and sodium, and higher levels of dietary fibre. This label simplifies healthier food choices, promoting better dietary habits among the public.

Nutri-Grade

Nutri-Grade¹⁵ is a food labelling system that classifies food and beverage products based on their nutritional content. It uses a grading system from A to D, with A indicating the healthiest options and D representing the least healthy choices. The grading considers factors such as fat, sugar, and sodium levels. Doctors can use Nutri-Grade to help patients understand the nutritional quality of their food and beverage choices, guiding them towards healthier options and better management of chronic diseases. For instance, physicians can recommend that patients avoid beverages with Nutri-Grade C and D labels, as these labels are mandated for higher-sugar and saturated-fat beverages.

Eat, Drink, Shop Healthy Challenge

The HPB organises the Eat, Drink, Shop Healthy Challenge¹⁶ to motivate individuals to make healthier choices when buying meals, drinks, desserts, or groceries. Participants earn digital stamps and Healthpoints with each qualifying purchase, which can be redeemed for rewards.

These campaigns provide a framework for doctors to discuss lifestyle changes with patients. By incorporating these health messages into consultations, doctors can help patients make informed decisions about their diet, beverage consumption, and grocery shopping habits, improving public health outcomes.

CONCLUSION

Doctors play a crucial role in shaping their patients' dietary habits. By leveraging trust-based relationships, providing personalised advice, using motivational interviewing techniques, professionals, and promoting national health campaigns, doctors can effectively influence patient behaviour. This approach supports Singapore's goal of enhancing population health through preventive care.

Incorporating nutrition counselling into routine consultations allows doctors to help reduce the prevalence of chronic diseases such as diabetes and hypertension. This strategy aligns with Healthier SG's vision of fostering a healthier, more resilient nation.

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LEARNING POINTS

- **Family physicians play a key role in promoting healthier eating habits and supporting national initiatives like Healthier SG to manage chronic diseases such as diabetes, hypertension, and hyperlipidaemia.**
 - **Tailored dietary advice, using tools like My Healthy Plate, increases the likelihood of patients adopting sustainable healthier eating habits.**
 - **Motivational interviewing and promoting national campaigns like the Healthier Choice Symbol and Nutri-Grade help patients take ownership of their dietary changes and make healthier choices easier.**
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