How to Handle Food Cravings

When people follow restrictive diets or cut out groups of food, cravings can become intense and lead to a cycle of indulging, overeating and guilt. Here are tips for handling food cravings:

1. If you sometimes crave chocolate, keep some dark chocolate on hand and eat it mindfully, enjoy it and then put it away when you are satisfied.
2. Schedule your snacks. Plan for nutritious snacks to keep your body fed. Keep these snacks readily available (ex: in your desk, backpack, or car).
3. Take a walk, work on a hobby, or call a friend. When cravings hit, take a moment to consider what you may be needing at that moment. Are you hungry, or are you bored or lonely?
4. Keep a craving journal. Note the time of day when cravings hit, how long it lasted, and how you handled the situation.

source: [www.eatright.org](http://www.eatright.org)

Diets. You likely can name a handful of them and maybe have even tried several yourself. And although some diets may bring success, the diet mentality may be our biggest barrier as Americans. The diet industry promises improved appearances and instant results, but time after time this means being too restrictive and labeling foods “good” and “bad”. And time after time these diets end in failure because they are not sustainable. In fact, 90-95 percent of all diets fail and we tend to blame ourselves, not the diet! “Isn’t it ironic that with a massive failure rate for dieting, we don’t blame the process of dieting?”

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Below you will find key lifestyle modifications to help you get started. Remember, it is not expected that all these happen overnight. If that were the case it would be called dieting, after all, and not sustainable or lifelong eating.

- Get back to the basic food groups. Focus on choosing more vegetables and fruits. Non-starchy vegetables such as green beans, broccoli, cauliflower and carrots, fill you up while providing ample vitamins and minerals, and do not raise your blood

see Diets pg 4

source: [www.eatright.org](http://www.eatright.org)
From the chairman

The fight against cancer continues unabated over the last several decades. Scientists continue to develop new diagnostic tests that permit the earlier diagnosis of cancer and are trying to optimize treatment protocols. These protocols take many forms, and developing treatment strategies that are unique to the tumor and designed for an individual patient (personalized medicine) offer an approach to the treatment of this devastating disease. The net result of all of these efforts has led to earlier diagnosis, less toxic and more effective treatments and preservation of the quality of life. Many people survive with cancer and many pediatric patients are surviving into adulthood.

As with any treatment there are side effects and unintended consequences. One of these is the effect on fertility. Oncofertility, or the preservation of fertility in cancer patients, is a relatively new subject of inquiry. This issue highlights the basic science work we are performing in the Olson Center for Women’s Health to help understand the effects, and to develop ways to reduce the effects, of cancer treatment on the ability to get pregnant and enjoy successful pregnancies. Dr. So-Youn Kim, our newest addition to the faculty will describe these issues in more detail in our newsletter.

We hope you find this information useful. For those of you battling cancer, where fertility is an issue, we encourage candid conversations with your providers about the effects of treatment on your ability to conceive and the potential effects on the pregnancy.

Carl V. Smith, MD, FACOG
Chairman
Department of Obstetrics & Gynecology
College of Medicine
University of Nebraska Medical Center
The word ‘Oncofertility’ combines oncology and fertility and was coined in 2006 by Dr. Teresa K. Woodruff at Northwestern University. The goal for oncofertility is to provide and expand the possible options for the reproductive future of young cancer patients. When young cancer patients including children, teens, and young adults receive the devastating news that they have cancer, they face fear in many ways. They are fighting against a brutal disease that changes their childhood playtime with friends, college plans, early careers, etc. Life-saving treatments such as cancer therapy unintentionally affects non-cancerous cells in their bodies. One of the most serious side effects is the loss of eggs (also called oocytes) and sperm, threatening the future fertility in young female and male cancer patients.

In addition to fertility concerns, loss of endocrine support (the normal functioning of the ovary) in females can cause a cascade of medical and quality-of-life problems beginning in young cancer patients. Damage to reproductive organs, specifically the ovary, can lead to genetically damaged eggs, or loss of them, causing premature ovarian insufficiency (POI) and early menopause. The symptoms of POI include sterility, osteoporosis, depression, anxiety, cardiovascular disease, and dementia, and generally compromise the quality of life for young cancer patients. However, the current management options of POI are inadequate. Successful oncofertility care requires meaningful communication and prompt decision making among patients, families, reproductive endocrinologists, oncologists, patient navigators, and other health care providers. Patients and family members should be provided with enough information regarding the proposed cancer drugs that pose a threat to fertility and all possible options to avoid the risk to future successful fertility. Currently, there are procedures available for the preservation of eggs, embryos, and ovarian tissues for young adults. However, those options are not available for young cancer patients. Young girls receiving cancer therapies are faced with delayed menarche (their first period), the possible necessity of hormone replacement therapy for their lifetime if their ovaries and hormone system are affected by cancer treatments, and the mental and emotional stress of not being able to have children. Therefore, developing an effective intervention to prevent the loss of ovarian function is an unmet need in the field.

Dr. So-Youn Kim’s research in the Department of Obstetrics and Gynecology focuses on understanding the mechanisms by which specific chemotherapy medications deplete eggs. She is also currently investigating ways to lessen the effects of treatments for even non-cancerous diseases (ex: gastrointestinal and metabolic diseases; rheumatologic, neurologic, renal, and gyn disorders) on ovarian function and is developing physician-guided tools that will facilitate communication between basic research and clinical practice.
sugar. Choose lean meats and other protein options to keep you full longer and protect muscle mass. Tips to make meat lean are avoiding fried/breaded meat, draining fat off cooked meat or trimming visible fat off meat before or after cooking. Choosing whole grains whenever possible can help provide more fiber and nutrients which most Americans are lacking. Low-fat dairy products such as milk, cheese, cottage cheese or low-sugar yogurt can provide protein as well as calcium and vitamin D for bone health. Lastly, healthy fats from avocado, olive oil, and nuts and seeds are essential but should be consumed in moderation.

- Cook more at home. A key to a healthier lifestyle involves eating out less, whether it’s a sit-down restaurant, fast food restaurant or takeout. Restaurants have a way of sneaking in fat and calories that can prevent one from getting to their health goals. Meal planning may help with cooking more at home. Try picking out 1 - 2 healthy recipes from a cookbook or online and buy the ingredients ahead of time so they are readily available during the week.

- Watch your portions. American portion sizes are often super-sized compared to other countries. A good rule of thumb is to choose 3 - 4 ounces of lean meat, make half your plate non-starchy vegetables, and include a smaller portion of carbohydrates which includes pasta, rice, bread, fruit or starchy vegetables like potatoes, corn and peas.

- Assess hunger cues. Honoring our bodies natural hunger cues can be very helpful in regulating a healthy weight. Avoid letting yourself get overly hungry by starting to eat as soon as you get hunger pangs (often growing or gurgling of the stomach). Stop eating when your stomach feels completely satisfied, before feeling full and stuffed. If it is difficult for you to save leftovers or throw away a small amount of excess food, it may be beneficial to try reducing portion sizes or using smaller plates.

- Reduce calorie-filled beverages. Calories and sugar that you consume from liquids add up very quickly and can be harmful in your efforts to maintain or get to a healthy weight. Try choosing sugar-free fluids as much as possible and get variety with Crystal Light® packets, Mio® drops, Propel®, SoBe Lifewater Zero® and other similar products.

- Move more. Nobody can deny that moving our bodies more can lead to better overall health, and it does not have to be structured exercise to count! Walking, dancing, housework – it all adds up. Find activities that bring you joy.

If weight loss is one of your health goals, the Bariatrics Center at Nebraska Medicine offers various options for those who want additional help. The multidisciplinary team is specialty trained in medical weight management and includes nurse coordinators, physician assistants, endocrinologists and registered dietitians like myself. Non-surgical weight loss options are available and include weight loss medications, one-on-one dietitian visits for education and accountability, and a meal replacement program that is medically supervised.

If you feel like you’ve tried all your options, have been unable to keep weight off and have serious health conditions because of your weight, it may be time to see a doctor about additional options such as working toward weight loss surgery. While gastric bypass and sleeve gastrectomy are two of the most common, the Bariatrics Center team will work with you to determine which procedure will most likely give you the best results. To learn how the Bariatrics Center at Nebraska Medicine can help you reach your weight loss goals and keep the weight off, call 402-559-9500.

Contributed by Laura Evans, MMN, RDN, LMNT
Nebraska Medicine Bariatric Center
Empower Every Hour! How Olson Center Social Workers Help Our Patients

People often wonder what do social workers do and in what areas do they work. According to the National Association of Social Workers (NASW), the primary mission of the social work profession is to enhance human well-being and help meet basic and complex needs of all people, with a particular focus on those who are vulnerable, oppressed, and living in poverty. Social work takes the unique perspective of looking at individuals and their environment, to assist clients to set goals and empower them to make changes.

Social workers can be found making a difference in many settings: child welfare, social programs, medical centers, nonprofit agencies, prisons, nursing homes, substance abuse, mental health, hospice, public health, research, and administration, just to name a few! Social work positions require at least a bachelor’s degree, while others require a master’s degree, and Clinical Social Workers require a license in social work.

In the inpatient setting at Nebraska Medicine, most social workers assist in coordinating the next steps of healthcare maintenance of the patient after they are dismissed from the hospital. However in the outpatient setting, the social work role looks a little different. For example, in the Olson Center for Women’s Health, social workers are most often used as an additional support for our pregnant and postpartum mothers, as well as patients in the Internal Medicine - Patient Centered Medical Home (PCMH) Clinic.

Typically in obstetrics, Olson Center Social Workers will see any mother who is Medicaid eligible, a teen mother, or when referred by another healthcare provider. Specific social work services include assessing mental health needs, housing, food, clothing and basic needs, transportation, domestic violence, and links to community resources. We assist patients with the onsite Women, Infants, and Children (WIC) food and nutrition program. We also work closely with the Nebraska Medicine Reproductive Psychiatry Clinic, behavioral health, addictions services, and our on-campus Children’s Physicians Clinic. Additionally, we have close relationships with many outside services and agencies that are of benefit to our patients, such as local resources for pregnancy and parenting classes, case management programs, pregnancy living programs, and resources for baby supplies. We also work closely with the Zeta Phi Beta Sorority to help administer their Stork’s Nest incentive program to eligible pregnant patients and new mothers.

For the PCMH Clinic, Olson Center social workers see any patient by provider referral. These referrals may be for community resources, mental health, financial assistance, transportation, housing, home health care, placement, etc.

Our newest role in the Olson Center is leading the Lean In Pregnancy and Postpartum Support Group. We encourage all pregnant and postpartum mothers, up to a year, to join us every first and third Monday of the month.

The Olson Center Social Work Team provides valuable insight for all our patients’ specific needs and available services at Nebraska Medicine and within the community. If you feel you could benefit from the services of a social worker, be sure to let your healthcare provider know! You’ll be glad you did!

Contributed by Amanda Schraut, LCSW and Bailey Baumann, MSW-PLMHP
Olson Center Social Workers

Lean In Pregnancy and Postpartum Support Group

- Feeling overwhelmed with life or parenting stressors?
- Can you use help with coping and self-care techniques?
- Would talking with other moms in a group setting help you?

Lean In is an Olson Center program for pregnant and postpartum mothers, fathers, and their support systems. Any mother with a need for emotional support is welcome to attend, make new friends, help others, and feel like they are heard.

Please join us on the 1st and 3rd Monday of each month in the Olson Center classroom. Call 402-559-5352 for more information.
in the news

Mark your calendars for several opportunities for education, for both the community and healthcare professions.

Women’s Health Week
Celebrate Women’s Health Week May 13 – 17. For a schedule of events, call 402-559-6345.

2019 Webinar Series returns
Tues., May 14: “Dissecting Direct-to-Consumer Genetic Testing”
Tues., June 11: “Medical Cannabinoids: High Expectations”
The Webinar Series is open to all interested individuals, and 1.0 contact hour credit is provided for nurses free of charge.
To register, go to unmc.edu/cne/education/genetics or unmc.edu/cne/education/cannabinoids.

“Breastfeeding: Baby’s Natural Choice Conference”
Join us on Wed., August 28, 2019 at the La Vista Conference Center. Our keynote presenters will be Cathy Watson Genna, BS, IBCLC and Jarold (Tom) Johnston, DNP, CNM, IBCLC. For more information, please call 402-559-6345.

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in the Olson Center provide a valuable link for our patients’ needs to available services.