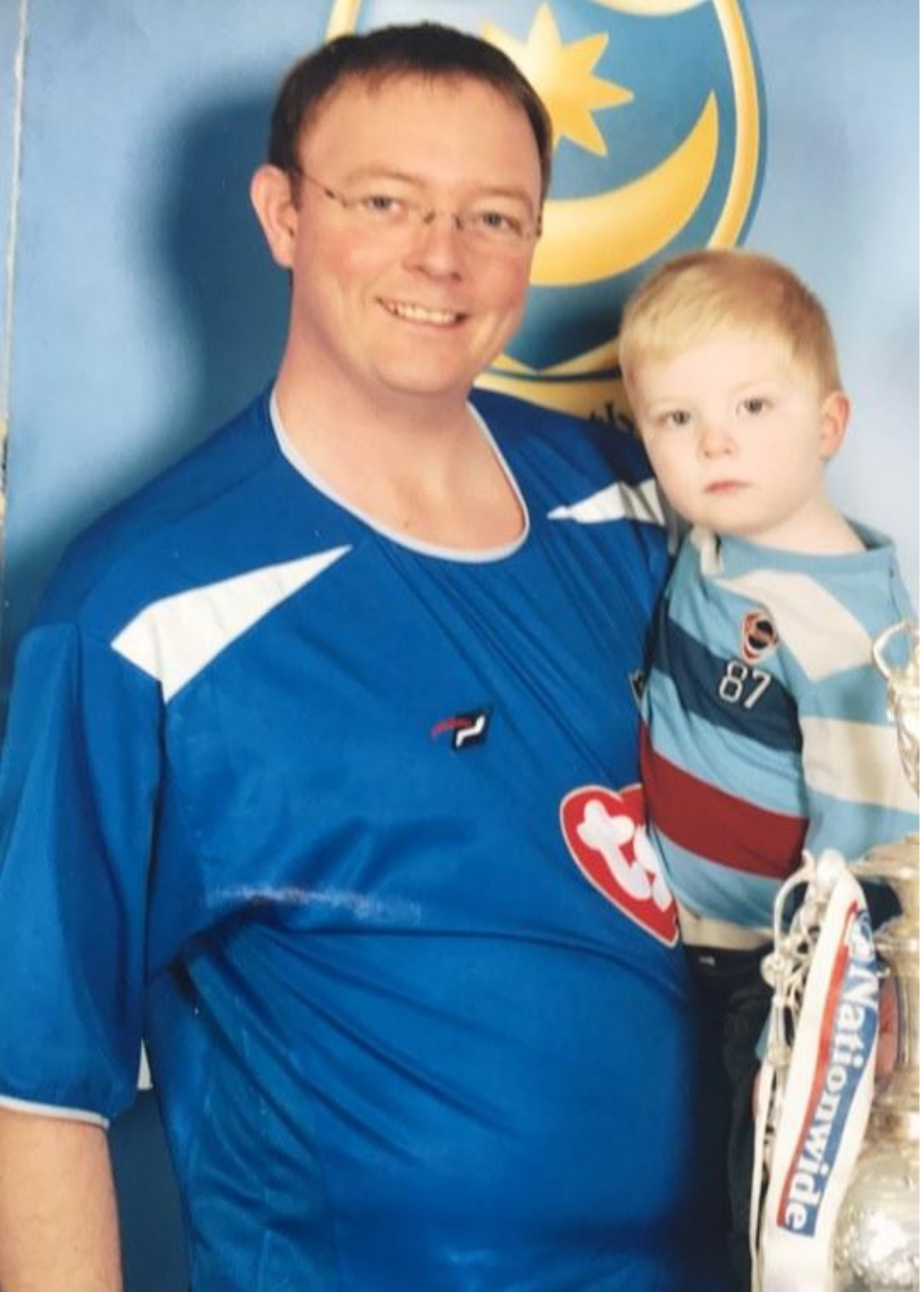
Our Metabolic Health Programme

Supporting healthier lives through GP practices

Mark Hancock & Nicola Woolhead
NHS Health and Wellbeing Coaches

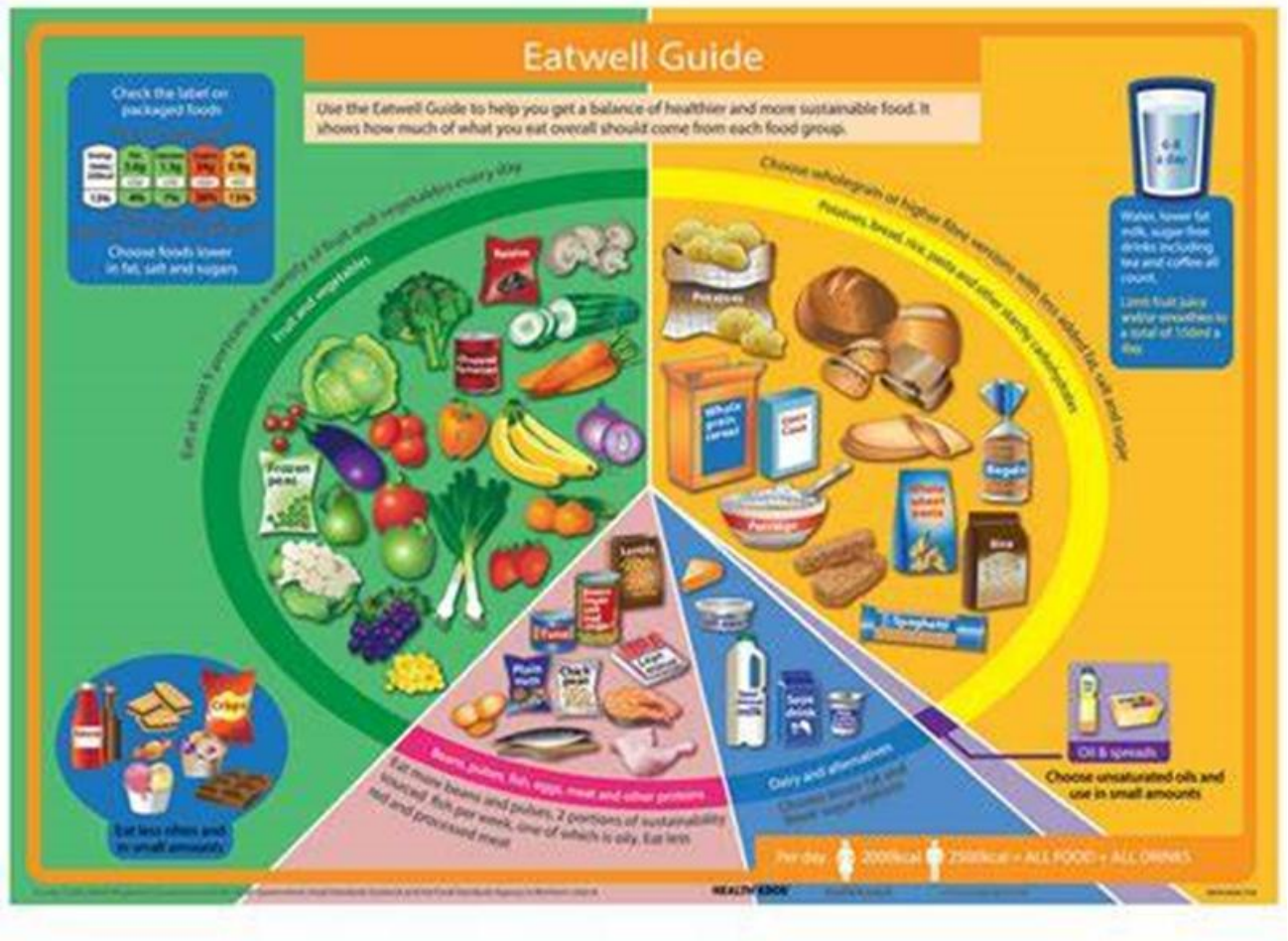
Nutrition Movement Mindset Sleep





A PICTURE I HID FOR YEARS

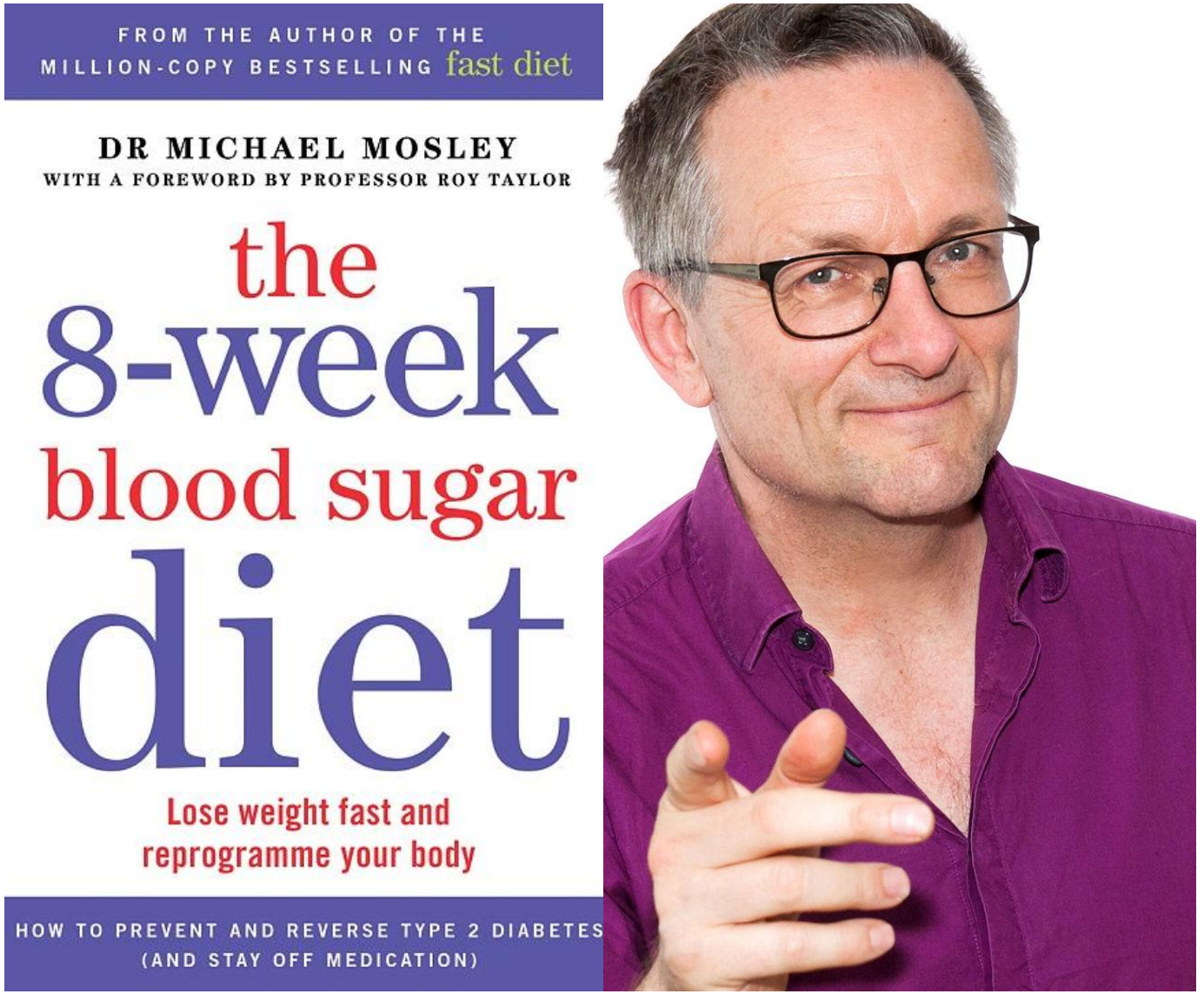
THE EATWELL GUIDE



I COULDN’T RUN FOR A BUS!



MY HERO ☺

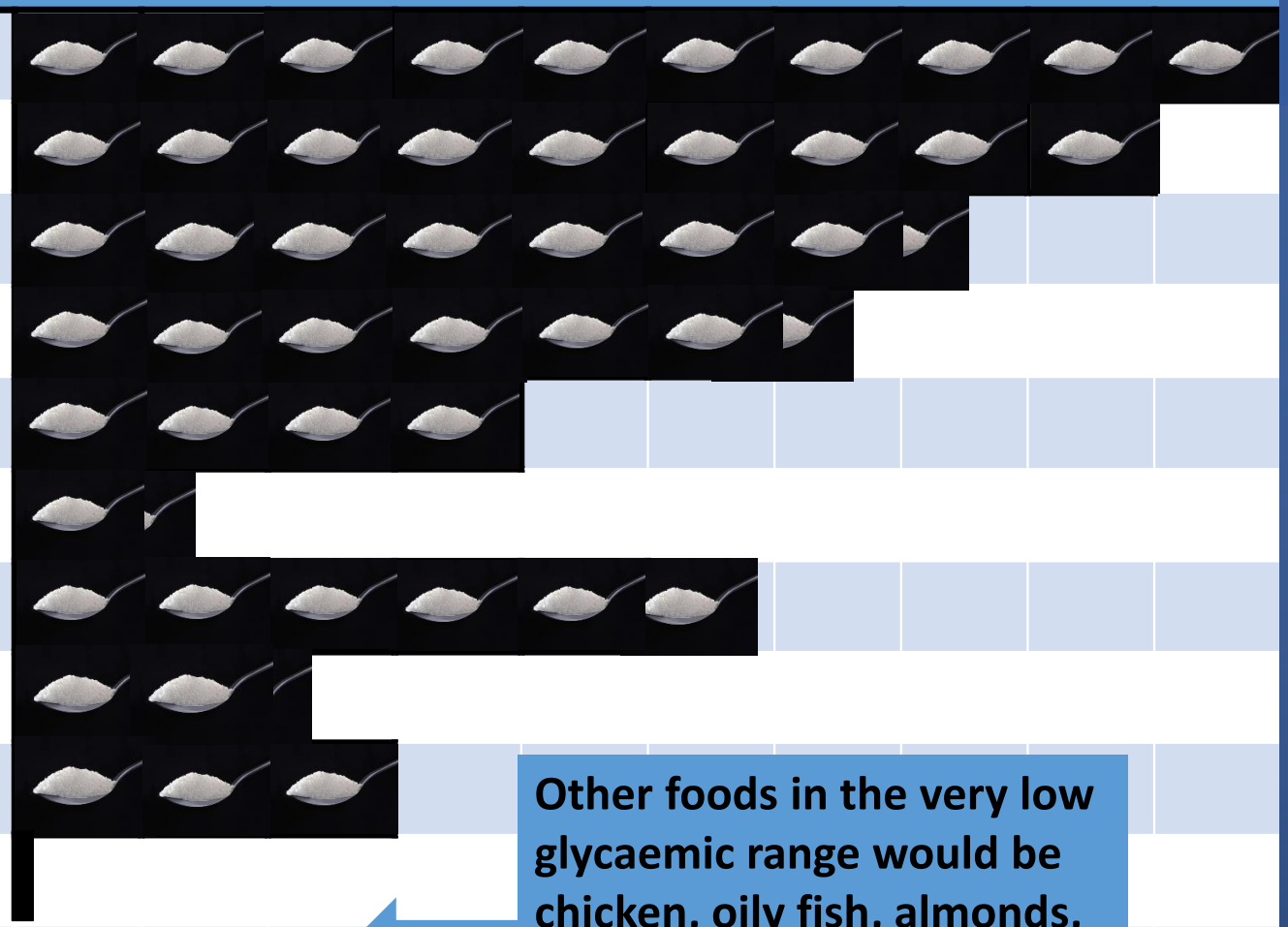

FROM THE AUTHOR OF THE
MILLION-COPY BESTSELLING fast diet
DR MICHAEL MOSLEY
WITH A FOREWORD BY PROFESSOR ROY TAYLOR
the
8-week
blood sugar
diet
Lose weight fast and
reprogramme your body
HOW TO PREVENT AND REVERSE TYPE 2 DIABETES
(AND STAY OFF MEDICATION)



ANOTHER HERO

DR DAVID UNWIN

Food Item	Glycaemic index	Serve size g	How does each food affect blood glucose compared with one 4g teaspoon of table sugar?
Basmati rice	69	150	**10.1**
Potato, white, boiled	96	150	**9.1**
French Fries baked	64	150	**7.5**
Spaghetti White boiled	39	180	**6.6**
Sweet corn boiled	60	80	**4.0**
Frozen peas, boiled	51	80	**1.3**
Banana	62	120	**5.7**
Apple	39	120	**2.3**
Wholemeal Small slice	74	30	**3.0**
Broccoli	15	80	**0.2**
Eggs	0	60	**0**



Other foods in the very low glycaemic range would be chicken, oily fish, almonds, mushrooms, cheese

NORWOOD SURGERY STATS

- 253 Type 2 Diabetics have been placed on a Low Carb Diet
- 127 have achieved full drug free remission
- 50% no longer need medication
- Lost an average of 10.5kg in weight
- Yearly drug budget savings of £68,353

Royal College of General Practitioners | Type 2 Diabetes and the low GI diet

The low GI diet – does it work in real life practice?

The Norwood surgery has been offering the low GI diet as an option to patients with type 2 diabetes for over 5 years.

The table below shows the improvements achieved in HbA1c, lipids, blood pressure and weight. Looking at the wider picture, in four years the practice has moved from being one of the worst in the CCG for diabetes control to one of the best, whilst having the lowest spend on diabetic drugs. There is currently no data on hard end points such as mortality, but given the well known link between obesity and various cancers as well as cardiovascular events it reasonable to suggest that mortality may be reduced.

Cohort of 66 patients with type 2 diabetes on a low carbohydrate diet for an average of 26 months

Biometric	Baseline mean	Latest follow up mean	Improvement mean (IQR)	P value	Matched pairs n (%)
Weight in Kg	96.1	86.7	9.4 (5.3, 14.4)	<0.001	64 (97)
HbA1c in mmol/mol	65.9	48.2	17.8 (7.8, 26.8)	<0.001	66 (100)
Serum cholesterol	4.8	4.5	0.3 (0.1, 0.8)	<0.001	43 (65)
HDL cholesterol	1.2	1.4	0.2 (0.2, 0.1)	<0.001	53 (80)
Triglyceride	2.3	1.3	1.0 (0.1, 1.6)	0.005	46 (70)
Systolic BP mmHg	142	131	10.3 (2, 17.5)	<0.001	60 (91)
Diastolic BP mmHg	81.3	76	5.3 (0, 10)	0.003	60 (91)

Click here to view further details

Information not medical advice


NHS
Our Metabolic
Health Course

What are the 4 Pillars of health?



The aim of the course

Is to improve blood sugar readings and HbA1c

Reduce medication

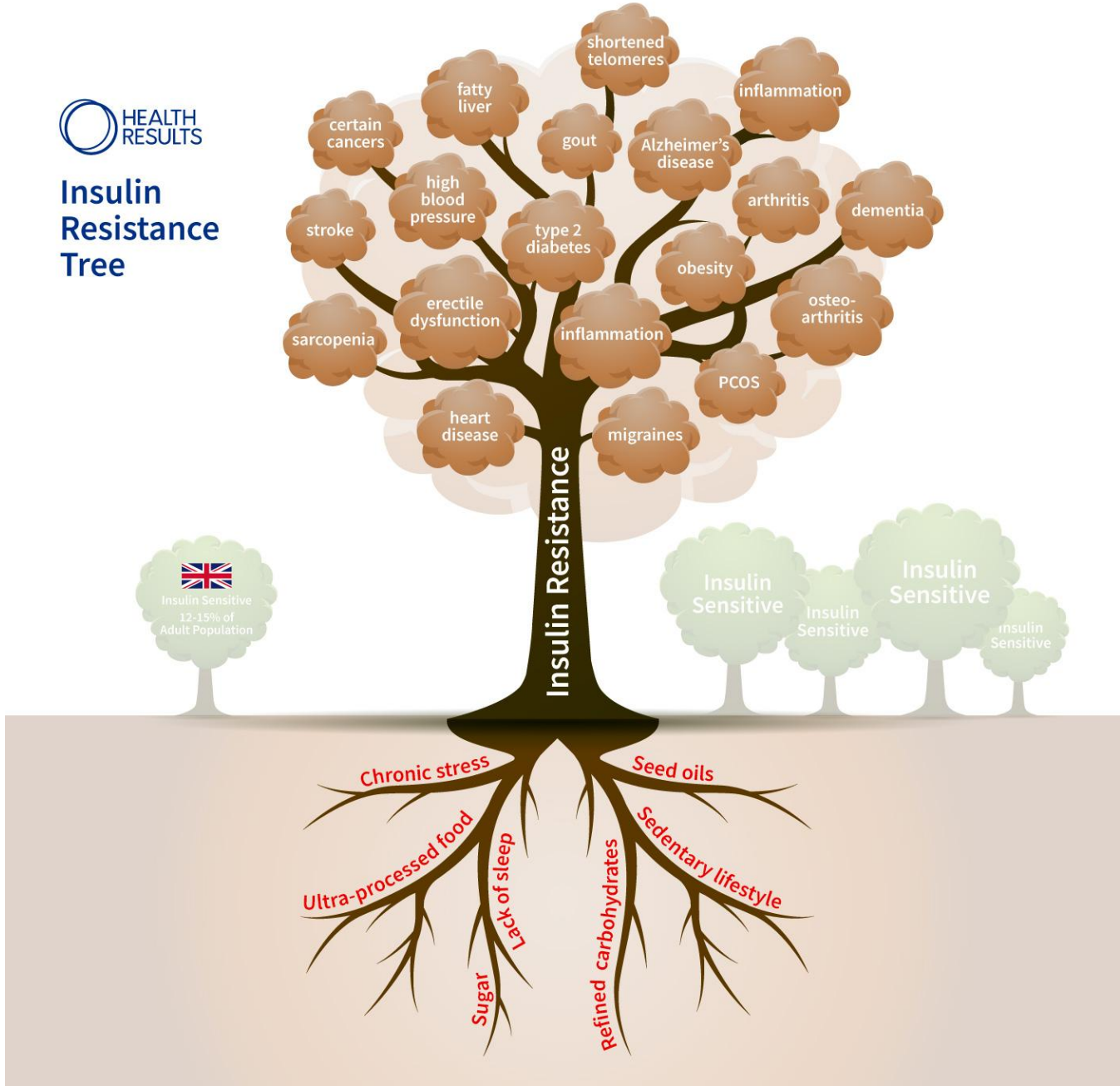
Improve cholesterol profile

Help the patient to lose weight if they need to

Other health conditions may improve

HEALTH RESULTS

Insulin Resistance Tree



What do the 6 weeks look like?

Week 1 – What to Eat

Week 2 – Should we still fear all fats?

Week 3 – Exercise and Movement

Week 4 – Intermittent Fasting

Week 5 – Recognising Stress

Week 6 – The importance of Sleep

Ongoing Support



Patient Experiences

Supporting people with metabolic health in primary care

Delivered in primary care settings


I'D BEEN ILL LAST
YEAR

Could we bring this programme to your patients?

Working with GP practices and PCNs to support better metabolic health.

Let's have a conversation.

Scan the QR code to register your interest or find out how our seven-week online programme could work with your surgery.

Mark Hancock & Nicola Woolhead
NHS Health and Wellbeing Coaches

Thank you for listening