

Creating diets takes planning

By NANCY AUSTIN

You have just finished a routine physical exam and are waiting for the doctor to give you the results of both the exam and the laboratory tests. You have felt pretty well, maybe a little overweight, but you've been counting calories for a while now.

Otherwise you're sure you're OK and all tests will be normal.

The doctor enters her room, pulls up a stool, sits down, and gives you the news.

"Most of the tests were normal," the doctor tells you, "but there is one exception. You have a high triglyceride level. You'll have to modify your diet to bring the level down. Here is a list of the foods you'll have to avoid. Come back and see me in a month and we'll re-check you."

You leave the office somewhat confused. Questions speed through your mind. Adjusting your diet for calorie control is tough enough. And now this? If all seems overwhelming.

Furthermore, you don't really understand the nature of triglycerides, but you must try to comply with his request.

"What will happen if I don't?" you wonder. "No. Better not. Better do what the doctor says. But how? Why?"

THIS SCENARIO is not at all uncommon. In fact, according to Katharine Crossman, a registered dietitian, an elevated triglyceride level is becoming a common diagnosis.

Because of this dietary problem and other specific reasons that people must change their diets, Ms. Crossman has decided to set up a private practice in dietary counseling. She believes she is the first in this area to do so.

Creative Diets, the name of her business, represents a concept in diet planning. Ms. Crossman tailors diets specifically for individual needs.

"First, I have the individual set his or her own goals to get a long-term picture of what needs to be achieved," she said. "For example, if weight control is the central problem, then we determine how much weight a client wants to lose. Then he decides how fast to lose it. We also will help him to work on changing specific eating habits."

WEIGHT CONTROL is not the primary objective of her practice, but a large number of the people who go to her do lose weight. Often the need to lose is connected with hypoglycemia or diabetes or some other medical condition. Others just want to shed pounds to look and feel better.

Ms. Crossman said she keeps the procedure simple so that clients understand what needs to be accomplished. Whatever the nature of the health problem, Ms. Crossman said she first makes sure that both she and the client understand the nature of the problems that requires dietary modification. Then she has him write out — meal by meal — the kind of a diet he would like to go on to correct the problem.

"I work closely with the patients in terms of the foods they like and the schedules they are on," she explained. "The diets must be suited to them. Then I adjust for nutritional value."

"Children do extremely well in following a diet. They write out what they want, and they like that. They don't want anyone to tell them what to eat and what not to eat. I work with the child first, then have a conference with the parents. The child makes his own decisions and they lose weight like crazy."

WEIGHT LOSS problems are among the easiest to solve and triglycerides pose one of the most complicated, Ms. Crossman noted.

In working with the latter, levels of triglyceride (substances included in the fat group) must be lowered. This is not well understood by most patients.

Ms. Crossman said she reviews the condition with her clients, so that they understand what is involved. Most have just come from the doctor's office on a referral and understand there is a need for modification, she added.

PHYSICIANS ARE supportive of the services Ms. Crossman offers. Most cannot give extensive time to counseling and meal-planning but recognize the need for dietary change. Ms. Crossman has for several years been counseling those who have special dietary needs.

As a registered dietitian, she is a member of the American Dietitians Association, and a consulting nutritionist who spent two years as a consulting dietitian with Pediatric Associates of Farmington. She counseled children and their parents in problem areas like overweight, allergies and hypoglycemia.

It was through her experience in working with allergic children that she aided in the research and subsequent publication of a book, "Cooking and Caring for the Allergic Child."

Published in 1974, the book has now been updated and publication rights bought by a new publishing house. It will be released in the summer of 1980.

Ms. Crossman, helped with the research, and kitchen-tested all of the recipes that appear in the book.

"It's really amazing," she said. "Allergies are strange. We had to go back and study many botanical origins to find out one food was related to an allergy."

"Sometimes the association isn't very clear until the research has been done. It is because of the time spent in with so many allergic children and in the work on this book, that I probably have more knowledge and clinical experience in the area of allergy diets than most dietitians."

MS. CROSSMAN said many people are confused about how a dietitian can help them. Dietitians are not particularly cooks, she explained, but rather those who have the education and clinical training to analyze food for content and learn how they can be used to derive the necessary diet components.

The counseling she does involves imparting this knowledge to those who need to change their diets and improve the nutrition they are receiving.

Report with a client's physician is an important part of her program. After the consultation, and after working with a client, a full report is sent to his physician, so he is aware of what is going on. But confidentiality is maintained at all times.

It may take two to three visits to help a person understand what is needed. Ms. Crossman's fee is \$30 a visit for one hour.

But, she said, she has some financial incentives worked into the program and one client told her, "it's the best \$30 I have ever spent."

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