

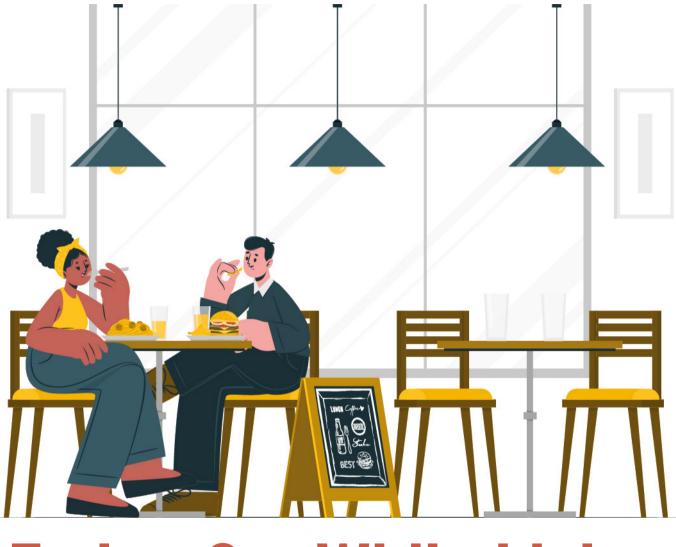
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Eating Out While Living with Type 1 Diabetes

utrition is "a window through which it is possible to observe, understand, and comprehend the articulation of a broad and diverse cultural fabric"¹. When a person is diagnosed with type 1 diabetes mellitus (T1DM), they begin a new relationship with food because the task of insulin secretion, previously managed by the pancreas, now falls on the person with T1DM or their caregiver. In fact, expressions like "acting as a pancreas" are common in messages shared within the diabetes community.

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Upon receiving the diagnosis, the person with T1DM encounters a new language on their plate. From then on, they start to count the carbohydrates in their food, administer the units of insulin corresponding to that count, manage the timing of their meals, and monitor their actions through glucose measurement devices to confirm and evaluate (or judge) what they have decided to do. This already complex dietary reality becomes even more pronounced when the person steps out of their controlled environment (their home) and enters other contexts of social eating, such as a birthday, christening, wedding, a movie outing, or a

day at a tapas bar. It is often said that people living with T1DM also coexist with the medicalization and rationalization of their meals and a new relationship with food. In nutritional consultations, we often observe individuals who experience fear, anxiety, or reluctance to resume their previous social eating habits, especially those who have been living with diabetes for a short time. In this article, we will share some points to consider in contexts where food plays an important role and where diabetes must be managed using different tools that can be addressed through a structured educational program.

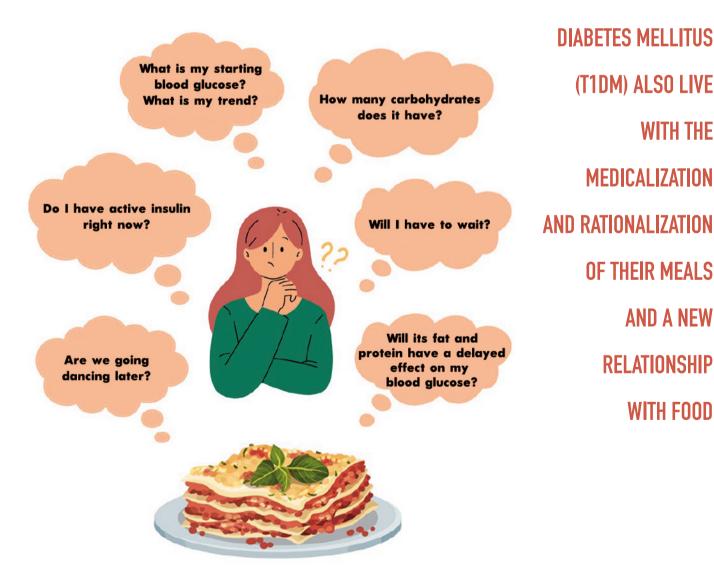


FIGURE 1. Some questions around food that a person with T1DM might ask.

» 6 KEY QUESTIONS FOR MANAGING FOOD OUTSIDE THE HOME

The 6 guiding questions that may be useful when conveying how to manage food outside the home for people with T1D are as follows:

Where and when will the event take place?

The location and time are important because, based on this, it will be possible to determine the ratio to use, approximate quantities that might be consumed, or get a general idea of the types of foods to be managed. It is not the same to go to a tapas aperitif, dine at an Italian restaurant, or have dinner at an Argentine barbecue.

2.What types of food will be available?

Knowing the types of food and drinks that will be consumed, at least, in general terms, will help determine which tools may be useful. It is often possible to find the menu of the venue online or to ask the event organizer about it in advance. If this information is not available, you can ask the staff at the location upon arrival about any doubts you may have. It is important to encourage confidence in people with diabetes to ask these questions, as they may often feel embarrassed to do so.

3.How do we count the carbohydrates in the food?

It is important to have visual resources handy (on a mobile phone, for example) to compare with what will be eaten or to review it beforehand. Taking a photo and then storing it in a personal collection with notes can be useful for future visits to the same place or similar ones. Various guides and apps can be helpful [2, 3, 4, 5, 6] and providing them to people with diabetes is a great support. Nutritional consultations can also be an opportunity to discuss these situations and practice educational tools on nutrition and diabetes management. For example, reviewing the menu of a wedding they plan to attend and discussing how to manage that meal in conjunction with insulin, physical activity, and emotions.

4.Are they fast- or slow-absorbing?

Knowing whether the carbohydrates to be consumed are high ("fast") or low glycemic index ("slow") can be useful in determining whether or not to wait between insulin administration and eating. As most of these settings involve unknown spaces and times of preparation, it is important to emphasize not being too strict with waiting times to avoid possible hypoglycemia.

5.What will we do during and after the event?

It's not the same to be sitting and talking at a wedding as it is to dance all night after dinner. Therefore, it is important to consider this point when adjusting the amount of insulin administered for the meal. Tools like understanding the concept of active insulin and reviewing the protocol for managing hypoglycemia will be useful.

6.Reduce the level of strictness

As we can see, there are several tools to manage in a setting where many aspects are unknown or develop on the spot. Transmitting calmness and reducing the strict focus on "staying in the glycemic range" can be replaced by other indicators, such as avoiding significant hyperor hypoglycemia that would hinder their enjoyment. As psychologist María Alonso suggests, consider "emotional time in range," emphasizing emotional aspects and being less "glucocentric."

PRACTICAL STRATEGIES BASED ON FOOD CONTEXTS OUTSIDE THE HOME

On the next page, you'll find a table of contexts and practical dietary tools that, while not exclusively featuring "healthy" foods, are important to understand for managing meals as best as possible and avoiding moments of insecurity, fear, or restriction. **D**

CONCLUSIONS

Eating is not just a physiological act but a complex setting where the emotional, cultural, and social intersect. Health professionals, as the American Diabetes Association points out, must consider that "it is important to maintain the pleasure of eating by providing non-judgmental messages about food choices..."8 especially in contexts like the ones mentioned above. It is also crucial to remember that, by combining scientific knowledge on nutrition with the experiences of people living with diabetes, we can support them more effectively.

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^{5.} Diabetes a la carta [app y sitio web] https://diabetesalacarta.org/

CONTEXT	KEY DIETARY ASPECTS	CONSIDERATIONS
BIRTHDAY PARTIES	Carbohydrate counting for: - Cake (3-4 servings per slice) - Candies (18g = 1 serving) - Popcorn (20g = 1 serving) - Cheese puffs (28g = 2 servings) - Chips (30g = 1 serving) - Sandwich (2 servings per unit) - Hot dog buns (2.5 servings each) - Carb-free snacks: olives, cheese, turkey, berries, ham, nuts.	- Consider physical activity before, during, or after the event (e.g., ballpark, escape room, dancing, walks, or sitting). - Adjust the waiting time if possible.
EDDINGS, BAPTISMS, Communions	Carbohydrate counting for: - Cake (3-4 servings per slice) - Event menu: - often includes fats and proteins, low in carbs - Drinks: wine, beer, spirits, soft drinks. Alcohol impact: - Beer (1 bottle = 1.5 servings) - Wine has little effect on blood sugar. - Alcohol-related hypoglycemia cannot be corrected with glucagon; eating is required. - Bread (1-2 servings per 20-40g).	 Advise on the administration of insulin at a cocktail meal. Suggest asking the event organizers about the chosen menu. Conduct a prior carbohydrate count if the menu is available. Consider whether there will be dancing or not
RESTAURANTS	 Consider the type of restaurant (Mediterranean cuisine, Oriental, fast food). If possible, start meals with vegetable-rich appetizers (e.g., salad, grilled vegetables, stir-fry). Carbohydrate count for: Hamburgers (approximately 4.5 servings per unit) Pizzas (1/4 of a pizza is approximately 2.5 servings of carbohydrates) Pasta (a serving of pasta weighing 200-250 g is approximately 4-5 servings of carbohydrates) Sushi (a medium roll contains approximately 1 serving of carbohydrates) Durum Kebab (contains approximately 4 servings of carbohydrates) Consider the delayed effect of fats and proteins if the meals are rich in these nutrients. 	- Have visual resources or applications on hand that assist with carbohydrate counting
THE MOVIES	Carbohydrate counting for: - Popcorn (4 servings per microwave pack) - Medium drink + popcorn (7 servings) - Candies (18g = 1 serving) - Chocolates (40g of nuts = 2 servings; 25g chocolate = 1 serving) - Fried corn (30g = 2 servings) - Soft drinks (330 mL can = 3 servings)	- Active insulin if planning to eat dinner afterwards. - Suggest water or sugar-free drinks.
SUMMER	Carbohydrate counting for: - Paella: A medium plate contains approximately 4 servings of carbohydrates. - 1 slice of tortilla: Contains approximately 1 serving of carbohydrates. - 4 fried calamari: Contains approximately 1 serving of carbohydrates. - 3 small croquettes: Contain approximately 2 servings of carbohydrates. - 1 medium glass (300 mL) of gazpacho: Contains 1 serving of carbohydrates. - 1 ce creams: A medium scoop contains approximately 2 servings of carbohydrates. - Ice creams: A medium scoop contains approximately 2 servings of carbohydrates; a medium cone contains 2 servings of carbohydrates. - If eating at a beach bar, keep in mind the difficulty of controlling the timing between insulin administration and food intake. - It is advisable to order salads or vegetables as a first course. - It is recommended that carbohydrate-rich dishes be served at the end of the meal. - Consider whether sauces like aioli are consumed as accompaniments with paella or fried fish.	
CHRISTMAS	Carbohydrate counting for: - Grapes (12 grapes = 2 servings) - Nougat (50g = 2 servings) - Chocolates (35g = 2 servings). - Most holiday foods are rich in fats and proteins.	 Consider physical activity: long gatherings, dancing, or long walks. Be mindful of alcohol effects on blood sugar.

TABLE 1. Main contexts of shared meals and aspects related to the management of T1DM

 Note: 1 serving = 10g of carbohydrates.