The Coalition with Dr. Shani Belgrave: A Dietitian's Guide to Nourishing Change feat. Casey Flowers Transcript

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Introduction and Guest Background

Welcome to The Coalition. This is a talk show dedicated to discussing health, wellness, and inspiration. I'm your host, Dr. Shani Belgrade. Hello, everybody.

Welcome to The Coalition. I'm your host, Dr. Shani Belgrade. I am a bariatric and general surgeon in Atlanta, Georgia. You can stay connected with me at www. DrShaniBelgrade.com.

I am delighted to welcome to the show today, Ms. Casey Flowers. Casey Flowers is a registered dietitian with an expertise in obesity and weight management.

Ms. Casey Flowers, thank you so much for joining the coalition. Thank you for having me. Super excited to be here. Yes, indeed. So as a bariatric surgeon, I spend a lot of my time counseling patients about healthy eating and weight loss.

And so I'm really excited to have you offer your expertise as a dietician. I know this is going to be really impactful. Before we get into it, can you please get us started by telling us a little bit about who you are and what you do?

Of course. And I'm sure you see my dog in the background. She's also all over my social media. That's Lila. She's my favorite thing. But like you said, I'm Casey.

I'm a registered dietician, but I'm also a certified diabetes care and education specialist. So right now I work in an interdisciplinary clinic. So my main focus is bariatric surgery, but I also do diabetes education, help with nutrition interventions with cardiology or nephrology as well.

So lots of talking to a bunch of different people. And then on the side, I also, I am a professional speaker. So I'll go and talk at a lot of conferences, especially about health equity and how to connect to the community.

Amazing. Well, you are the perfect person to join the coalition because that's what this is all about. How can we spread information on health to empower people to live their best lives?

So I'm just going to get right into it. Protein. You know, this is something we talk about a lot.

Protein Needs and Sources

From the dietician's perspective, how much protein do we need and what are some good sources of protein? That is a great question. I think I say protein 10,000 times a day.

And there's some common misconceptions about protein. Sometimes you'll be working with a personal trainer and they're telling you, you need 200 grams a day.

It's like, well, who has that much time to eat that much food? So what we really do is we evaluate your labs, Make sure your kidney function is okay, and you can handle a higher protein load.

And then we look at your activities of daily living, less your physical activity, and then we give you a range. So on the low side of the range, we're looking at point eight grams per kilogram of body weight, high side, maybe up to two grams per kilogram of body weight.

Typically for our bariatrics, they average around 60 to 80 grams of protein a day, and our medical weight loss,

because they can eat a little bit more, they have a larger stomach, we go up a little to 100 grams or more a day.

Fantastic. So what is your take on the best way to get this protein in, and what foods would you say you recommend? And then also, what is your take on the protein powders?

Oh, definitely. I love a combination of food. I think it's really hard to eat meat three times a day. I know we've all had that moment where we ate that meatloaf or hamburger.

We're like, why do I feel so heavy and slow? Well, higher fat things take longer to digest. And our meat-based protein, even our lean cuts like chicken, turkey, and fish, they still come with fat.

So I like to do, again, a combination with plant-based protein as well. So yeah, I sure have chicken, but instead of doing like six ounces or eight ounces of chicken half your plate, maybe just stick it to the quarter size of the plate and then pair it with something like beans or quinoa.

That's also going to be some plant-based protein. And back to when you have surgery, it's hard. It's hard to get, you're going to get full fast with all the weight loss medications now, especially the semi-glutides.

They make food move so slowly through your system. You feel full for a long time. So those protein powders can come really in handy. But there's a difference, right?

There's like protein powders and then meal replacements. So if I'm replacing the entire meal, I'm going to need a meal replacement, which is going to give me all my vitamins versus if I just worked out or I'm trying to get my extra protein up in between meals, I'm just going to focus on a protein supplement that may not all have all those vitamins and that greedy taste that vitamins come with.

Right okay, so you know I know there's a little bit of controversy out there in terms of what is the best diet there's been good information about the Mediterranean diet.

And I also try to refrain from the word diet, because we know that dieting doesn't really work, so I try to promote lifestyle change.

Carbohydrates and Bariatric Nutrition

Um, and so one thing that I found in dealing with my patients is a trend toward gaining weight as processed foods are reintroduced or diets that are high in carbohydrates.

Also with bariatric patients, I'm often weary of high carbs because it can precipitate dumping. So I wanted to get your take on where do you stand or what is your personal opinion on carbohydrates in terms of what's a good amount.

what we need to know. Definitely. So I like to look at it as a percentage of your total diet. So the recommended daily allowance is between 40 to 60%. In an active weight loss phase, we're looking closer to that 40%. And then as you get closer to maintenance, we slowly increase to slow your weight loss down.

Um, when it comes to carbohydrates, I don't like to say like you, I don't like to say there's like good or bad of anything. Cause I don't want to like demonize food, but I explained to everyone there's a time and a purpose.

So carbohydrates that may break down quicker, well, like our cookies, candy cakes, are you moving your body enough to process those? And nine times out of 10, I don't know about you guys sitting in front of this computer all day, I'm not moving my body enough to have those every day, but they fit in somewhere.

So how can we make it work for you? Is there choosing a higher fiber option that we can choose from? Is there knowing what's processed or unprocessed?

And like you said, for bariatrics, it can be really tricky because they are at higher risk for dumping syndrome. So really anything of over 10 grams we're going to be cautious about.

Like, did you eat your protein food first to slow that absorption down? Or are you just drinking some juice out of nowhere and then in the bathroom, unfortunately, for 30 minutes?

So lots of education on types, amount, eating pattern, making sure you're eating your protein food first. Um, but also still making sure you get enough so you're not dragging throughout the day.

Cause carbs are our body's primary fuel source. So, you know, I kind of made up a jingle that my patients will, will say they've heard over and over, which is really watch out with the rice, bread, pasta, potatoes, pancakes, cookies, chips, grits, like that whole kind of, you know, food group, food type, you know, if you're not careful, we can see the weight regain.

Um, and so as we've kind of alluded to, I agree with what you were saying about push the protein first. Um, and you know, I try to simplify it as much as possible.

Protein and produce is kind of, you know, the, where we really want to lean in. And as you said, fiber and we can get a lot of our fiber from vegetables.

Another thing that patients oftentimes are trying to figure out after surgery is portion sizes, right? Cause as you said, you can't eat a whole lot at a time.

And then trying to figure out those cues of, okay, I ate a certain amount and I feel like I'm full. You know, I probably need to stop, but then am I getting enough in?

So what's your recommendation for patients that have had bariatric surgery, sleeve gastrectomy, gastric bypass, when they're making their plate, What kind of guide do you use?

Is it the size of a fist or what are some visual cues they can look at to know that I've gotten so many grams of protein or this is enough for me to eat in one sitting?

Yeah, great question. And do you also notice there's a lot of fear with like introducing larger portions too? I find myself oftentimes like, well, let's let's have a visit where you eat in front of me and like we just kind of watch how you do it.

Portion Sizes and Hydration

Because I think you're a little bit too afraid to eat as much as you can. And so, nutrition is as easy or as complicated as you want to make it. So I like to start a little easy.

I really encourage my folks to get like those smaller plates off of like Amazon or bariatric pal where it's like split in those small sections and oftentimes they even come with like smaller utensils like so it forces you to take a smaller bite and so you don't end up having to chew as much because that's an issue too.

A lot of people don't realize how much they have to chew their food after surgery. I always say like 80% of your stomach's gone so 80% of more of the work needs to happen in your mouth So when you're using those small plates, typically your protein is half that plate.

And our protein portion sizes are around three ounces or the size of the deck of cards. Three ounces is going to be a lot of math. Three ounces is 21 grams of protein.

And how much did we need today? Around 60, right? That means 60 grams. Yes. So if I break that up into three little individual things, then perfect. I'm doing great.

And then I still have a little bit, you know, a quarter of cup when I'm first starting a veggie then the one to two tablespoons of a starch and then I'm building up from there.

Now back to easy or complicated, some people who do have a more of a fear of eating and they're they're really afraid of going over they get a scale and so that way they can exactly weigh out that three ounce portion so they feel a little bit more comfortable.

Wonderful. Any tips or tricks for staying hydrated? I always tell everybody it's the secret of the sip, shooting for about 64 ounces, and that really the way to do it is to keep something with you and sip throughout the day.

But do you have any other tips on how perfect? Your water bottle should be your best friend. It's your new favorite accessory. Just like you said, sip, sip, sip throughout the day.

Somebody posted on our Facebook page, they said, I think I have a relationship with the clock now because they're looking at the clock to separate the eating and drinking.

They're looking at the clock to make sure they've gotten their eight ounces in within like that 45 to 60 minutes thing. They look at the clock for everything.

And it's not like that forever, you know, eventually you'll just notice like, oh, I'm thirsty, I need a little bit of sip in. But when you first have surgery, it's so important, you know, just get enough to cover your tongue and then slowly build up from that, avoiding big gulps.

Sometimes we recommend like not using straws because it does bring some more gas in. So practice like maybe using those little one ounce cups or little eight ounce bottles because if I just had surgery and I had to drink out this whole thing, I'm probably not going to make it right.

But if I have like some little attainable things throughout the day, it makes it so much easier. And then like sometimes too cold is too much. Um, so play with room temperature, um, play with warm liquids.

It doesn't just have to be water. Other things count like herbal tea, maybe a little bit more gentle. So playing around with your options is always good.

I agree. Thank you so much for co-signing on that. Um, because I'm always telling everybody, we really want to make sure we're staying hydrated. And as you said, right after surgery, if anyone's having any issues, I have them use those small medicine cups, because it's easier to quantify.

OK, four of these is four ounces. And then as you get the hang of it, then you can progress to the bigger cup. But you touched on something, and I'm glad you did, because I wanted to go into that in a little bit more detail, separating eating and drinking by 30 minutes.

Can you give the explanation from the dietician's perspective on dumping? Because that's part of the reason we are separating eating and drinking. So for people listening who maybe don't know what dumping is, what is dumping?

So dumping is when either you've had like too much sugar, too much fat or you drank something or ate something too fast and it's hitting your stomach very hard.

Dumping Syndrome and Meal Timing

It's entering your intestines causing your body to pull in a lot of water and when it pulls in all that water it flushes things through and you just feel awful you know shaky sweaty irritable and then all that water in your intestines is going to lead to diarrhea so we don't want that to You don't want that to happen at all.

So separating eating and drinking works for two reasons. So if I drink during my meal or right before my meal, that

water is going to move slower through my system and I may not be able to get all my protein in.

So let's say it's seven o'clock and I need to go eat at seven thirty. I'm going to just pay attention to make sure I stop drinking at seven. Then I'm gonna eat my meal.

I'm gonna take my time to chew chew chew and then I'm gonna give my food adequate time to digest I'm not gonna push it through and I'm gonna wait 30 minutes after There's actually a really cool video on YouTube that visualizes this they have like they put applesauce in a little Container they slowly pour sips in there.

You can just see the applesauce flushing through that's kind of mirrors What's happening in your stomach? So you really do want to make sure you're using your tool effectively using your tool effectively.

I love that because surgery is very durable and effective, but it's a tool. So you got to use your tool to really get the most out of it. Yes. So another common thing that I talk to patients about is healthy meal ideas, because it's helpful if people have some ideas and then so that they're not always eating the same thing over and over again, some different ideas for some variety.

From your perspective, what are some healthy meals as well as snacks that you recommend? Yeah, of course. And I studied to be a dietitian in Memphis because I was like, if I could learn how to make southern food in Memphis healthy, I could do it anyway.

So that being said, if you have a healthy or unhealthy food that you love, bring it up to your dietician because they may be able to help modify it for you.

It depends on what stage you're in. In the beginning, let's say you're puree. One of my favorite go-tos is doing ground turkey with some low acid tomato sauce and some Parmesan cheese and blending that together.

It's like an inside of a lasagna and you get your protein in. Another very simple recipe, and a lot of grocery stores have started making meal preps for these is salmon, because we have our protein, but we also have omega-3 that helps reduce inflammation.

And then they'll pair it with asparagus and a really nice roasted sweet potato, which is also high in fiber and high in vitamin A. So that's a really easy go-to, and Elena loves salmon.

So no one ever gets to have that one.

Healthy Meals, Snacks, and Takeaways

For snack options, I like a lot of plant based snack options. So there's like roasted edamame. There's a company called Harvest Snaps. They make something that looks like a chip, but it's really just like a dehydrated bean, high in protein, high in fiber and low in calorie.

A yogurt's always a good, easy snack. And depends on where you are on your surgery. I like to do combination snacks. Like don't just eat an apple. Eat an apple with like a tablespoon of peanut butter.

Healthy carb, healthy fat. or a little bit of protein. Um, don't just do yogurt, maybe do yogurt with a couple of pieces of fruit. Again, like trying to get that balance.

And I don't know about you, but sometimes like as they get later in their stages and they are focusing more on like the protein veggies and starch each meal.

I kind of have them step away from snacking a little bit to like go back into those bad habits of grazing. Cause it is a tool and you can eat around that tool.

So let's make sure your meals are balanced so you don't have to rely on snacks as often. I a hundred percent

agree with that. You definitely want to minimize the snacking.

And then if you get hungry in between meals, get something that's healthy. So, you know, things that I've often recommended is carrot sticks or raw broccoli.

Another thing I like are the individually packaged nuts. And I say individually packaged because that way you can be mindful of the serving size. Yes, that's out of control real quick.

Wonderful. Well, this has really been a fantastic discussion. I know that this is going to help so many patients. What would be your takeaway message for people watching?

Yeah, my biggest thing is what breaks my heart the most is when someone needs help or they can't come up with meal ideas or foods making them feel uncomfortable and they don't reach out to me.

My whole job is just to help you. So my takeaway would be bring it to your dietitian. If you again have a favorite recipe that you want to modify or if you're having that fear of weight reoccurrence or you're struggling to get your fluid in, We've done this.

We played around with all of these options and our only job is to help you get through it as easy as possible. So give us a call. I love that. Reach out is the takeaway message.

Yes. So to that end, what is the best way for people to contact you? Oh, awesome. I just started my social media after years of avoiding it. So you can follow me at Eating with Flowers.

I'm on Instagram and TikTok. And then you can follow me at Casey Flowers on Facebook as well. Wonderful. Well, thank you so much, Miss Casey Flowers, for taking some time to join the coalition.

I'm hopeful you'll come back another time. Definitely. Would love to. Well, everybody, thank you so much for tuning in to another impactful episode of The Coalition.

You can stay connected with me at www. DrShawneeBelleGrave.com. Very special thank you to Ms. Casey Flowers, registered dietician with a specialty in obesity and weight management.

You can get connected with Ms. Casey Flowers at Eating With Flowers on Instagram. Thank you so much for watching. Make sure you share this episode with friends and family so we can transform lives.

I'll see you next time.