Do low-carb diets work?

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Low-carbohydrate foods are the latest craze, with increasingly more “low-carb” options available at restaurants and in grocery stores. But do low-carb diets actually work?

To fight the bulge, you must eat fewer calories than the amount of calories you use for daily activity. Any eating plan that helps you consume fewer total calories can help—including low-carb diets. The trick is to meet nutritional needs by choosing healthy foods. It’s important to be aware of certain risks that can be associated with a low-carb diet and to understand labeling terms.

Benefits. First of all, any diet that severely restricts choice can reduce calories through boredom. For example, eating bacon and steak and nothing else can result in fewer total calories because you’re bored with eating the same thing all the time. Eating plenty of colorful, “allowed” low-carb vegetables, such as broccoli, lettuce, bell peppers and spinach, will provide important vitamins, mineral, potassium, folic acid, fiber, and phytochemicals that are found naturally in healthy foods.

Risks. Even though many manufacturers are jumping on the low-carb bandwagon, consider these risks with high-protein, low-carb diets:

- **Heart disease.** Low-carb diets high in saturated fat and cholesterol may increase risk for heart disease. Go heavy on the chicken and fish if choosing this type of eating plan.
- **Cancer.** The risk of cancer may increase if fruits, vegetables, and high-fiber grains and beans are eliminated from diets. Pick a diet that includes all the food groups.
- **Temporary weight loss.** Greatly limiting the number of foods people are allowed to eat reduces their food and calorie intake. Once boredom and cravings set in, bing- ing on desired foods causes the weight to come back.
- **Reduced athletic performance.** While a high-carb diet can enhance endurance during strenuous athletic events, a low-carb diet may reduce athletic performance.
- **Increased blood pressure.** Low-carb diets may cause an increase in blood pressure. In contrast, diets rich in fruits, vegetables, whole grains, and low-fat dairy foods (such as the DASH Diet), tend to lower blood pressure since they are rich in potassium, calcium, and magnesium.

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Summer is a great time for grandparents to spend special one-on-one time connecting with their grandchildren.

Although I personally have not had the grandparenting experience yet, my children have wonderful memories of spending special times with two sets of grandparents. While sharing activities with grandparents, such as baking cookies, going to a movie, getting books at the library, working in the garden, or just taking a walk, they had many opportunities over the years to share and discuss opinions, feelings, and interests.

Some grandparents may have more time and money to do things they may not have been able to do as parents. All generations benefit from interactions and friendships between grandparents and grandchildren.

The greatest rewards for grandparents are the opportunities to share their love, enjoy a more active lifestyle and gain satisfaction from watching grandchildren learn and grow. Grandchildren benefit from experience, wisdom, unconditional love and acceptance, and many happy memories.

Here are some suggestions to help build relationships and create memories that both will cherish:

- **Spend as much time as you can together.** If you don’t live close together, be sure to phone, write, and e-mail as often as possible. Share photographs, videotapes, and audiotapes.

- **Be personal.** Share opinions and feelings. Go for walks together, play games, read, and talk together. Respect each other’s choices and decisions.

- **Share family history.** You may be surprised at the questions children will ask while looking through carefully-packed boxes of keepsakes from years gone by. They will probably want to know who all the people in the pictures are and how they are related. They might even make comments about the funny hairstyles and clothing styles. Children especially like to hear stories about how their own parents behaved as children, both good and bad.

- **Communicate your own needs to your grandchildren** so they will learn to respect adults. Give them love, structure and, more importantly, set a good example.

- **Decide together on a project to do.** Of course, keep in mind that it is age-appropriate so your grandchild will achieve success, not frustration. Possibilities are to assemble a jigsaw puzzle, learn to bake bread, plant a small garden, or complete a small sewing project.

- **Realize your grandchild’s interests may change.** Although Sesame Street might have been a favorite television show for a 4-year-old, a 9-year-old may consider it too “babyish.” Parents should be able to tell you about new activities or hobbies. Show you are aware of your grandchild’s efforts and are thinking about him/her by sending a note or e-mail with wishes of good luck before an event in which your grandchild is participating.

Now is a perfect time to begin building important grandparent/grandchild relationships.

All children can benefit from positive adult influences, especially from people who will listen and try to understand them.
Gardening tips: 
The right time to prune shrubs

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Is it OK for me to prune my shrubs now? This question, among others, starts popping up with gardeners as we come to the end of winter and welcome spring. As the days get longer and sunnier, so does the itching of most gardeners’ fingers to get to the outdoors and do something!

When is the right time to prune spring-and summer-flowering shrubs?

Most spring-blooming shrubs should be pruned right after they flower (within two weeks after flowering for shrubs blooming from early spring to early June). These shrubs bear flowers on buds formed the previous season. Waiting to prune them off in late fall or winter will cut off the blossom buds that developed in late summer and fall.

Spring-blooming shrubs include: Forsythia, deutzia, dogwood, fringe tree, golden currant, lilac, magnolia, mountain laurel, flowering quince, mock orange, azalea, rhododendron, climbing roses, spring-flowering spirea, snowball and weigela.

Spring and Summer flowering shrubs bloom on current year’s wood and should be pruned in late winter or early spring while dormant. These include abelia, potentilla, butterfly bush, rose of sharon, crepe myrtle, beautyberry, summersweet and spirea. Avoid pruning in late summer-early fall, since this may force renewed growth that could get damaged or injured through freezing during winter.

Evergreen shrubs, like yews and junipers, are best pruned in late March to mid-April before new growth begins.

What to prune?

Prune off scraggly, thin and weak-looking wood, crossing wood, dead, diseased and damaged branches, water shoots or branches that are tall and leggy or growing near the base. Also prune overgrown and neglected plants. After bloom time and once the flowers begin to fade, prune off the stems carrying the blooms in azaleas, rhododendrons and magnolias.

There should be no guilty feelings about pruning. Nature normally takes care of its own when pruning is done properly; so don’t be afraid to prune. Pruning will help control the size and shape of your shrubs, as well as keep the shrubs flowering more regularly.

Source: Guidesheet G6870, “Pruning ornamental shrubs,” by Christopher J. Starbuck, Department of Horticulture, University of Missouri. Available online at: http://muextension.missouri.edu/explore/agguides/hort/g06870.htm

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- Increased risk of gout.
- Increased risk of kidney stones and osteoporosis. Low-carb diets that are high in protein and fat are bad for bones and kidneys.
- Bad breath. A diet too low in carbohydrates can cause “keto breath.”

Labeling. Low-carb claims on nutrition labels are illegal because the Food and Drug Administration (FDA) has not defined the term “low-carb.” The FDA prohibits any nutrient claim it has not defined. Most “low-carb” labels do not back up their claim (as the FDA requires for claims such as “reduced fat” and “low-calorie.”)

In some cases, “low-carb” foods do not have fewer total carbohydrates, but only have what manufacturers refer to as fewer “net carbs.” The use of the term “net carbs” by manufacturers is misleading. “Net carbs” is a figure found by subtracting grams of sugar alcohols and fiber from total carbohydrates. However, sugar alcohols do have calories, so the net carb value may not help you choose a healthier food. Without research showing health benefits, the FDA will not approve claims on labels.

Low-carb restaurant meals vary. Some meals with low-carb claims are actually lower in calories, but other meals have more calories. A 1000-calorie, low-carb lunch is still a 1000-calorie meal. The following low-carb restaurant meals all top 1000 calories: low-carb Buffalo wings, low-carb spring chicken salad, low-carb steak fajitas, and low-carb rib-eye.

To cut carbohydrates in low-carb breads, manufacturers replace sugar with artificial sweeteners like sucralose and wheat flour with extra fiber, soy protein, wheat gluten, or wheat protein. These products are often similar to regular 100 percent whole wheat breads. Check labels to compare similar products. Subtract fiber in the original bread from the carbohydrates on its label for a more accurate comparison.

Low-carb frozen desserts use sugar substitutes like sucralose (Splenda), cellulose gums, and sugar alcohols (mannitol, xylitol, sorbitol). Some of these products are also high in saturated fats.

Low-carb candies use sugar alcohols, but these are not low-calorie products. In addition, too much sugar alcohol can have a laxative effect.

Recommendations. A low-carb diet may lead to weight loss, but don’t expect as much as the diet books claim. If you choose a low-carb diet, try a healthier version based on a small portion of low-fat protein. Fill up with plenty of fruits and vegetables and smaller amounts of nuts and seeds. Healthy diets are rich in fruits and vegetables, beans, whole grains, seafood, poultry and low-fat dairy products, as well as some oils, nuts, and unsaturated fats.

Sources: American Journal of Kidney Disease, August 2002; and Melinda Hemmelgarn, former associate state nutrition specialist, University of Missouri-Columbia.

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