

THE NETWORK NEWSLETTER

Connecting Consultants of S & S Nutrition Network Inc.



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S & S NUTRITION NETWORK ANNUAL MEETING AGENDA

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NEW CONSULTANTS AND ANNIVERSARIES

NEWSWORTHY: BOOKS, PODCASTS AND YOUTUBE

MICROBIOMES THROUGH HEALTH AND DISEASE

S & S MENUS NOW WITH IDDSI

S & S Annual Meeting or BUST!

It might not have a ring to it but the excitement still rings true! Personally I'm even more excited for this year because I will be able to join the S & S team for both days!

When preparing for this meeting I think we always recall what we meant to do better after the year before. So maybe you all can help us out. Take pictures of our group and send them to us! We'd love to see them and they could have potential blackmail material. Also, while in sessions or when reflecting, think about what else you'd like sessions on or more information on. It can be difficult to come up with new material so let us know your thoughts and ideas. But mostly, have fun! We have some new names and faces so extend a warm welcome and enjoy the time together!

S&S Nutrition Network, Inc.
2019 Annual Educational Conference
 Boise Centre on the Grove - 850 W Front St

Tuesday, July 9th, 2019

7:45-8:15 am - Introductions and Networking

Hot Topics Presented by Your Peers - 8:15 - 11:15 am	Time
RDN Order Writing	8:15-8:35
Lab Value Update	8:35-8:55
Pressure Injuries and the RD Role	8:55-9:15
Zero Waste Ideas for Home and Work	9:15-9:35
S&S Nutrition - You Tube Channel	9:35-9:45
Break	9:45-10:00
NCP, ADIME & Writing Great PES's	10:00-10:20
Medication Interactions	10:20-10:40
Care Planning Revisited	10:40-11:00
Food Allergies & Intolerances	11:00-11:15

11:15-12:15 pm - Relationship Building for Consulting Success

Rachell Larsen, RDN, LD and Marissa Rudley, RDN, LD

12:15-1:15 pm - Head to Veterans Home - Boxed Lunch on the Green

1:15 - 3:45 pm - Sanitation Drill Down - In the Kitchen with the FDA Guy

& IDDSI Update (The group will be split into two - one group will do sanitation rounds with Patrick while the other group participates in "hands-on" IDDSI - then swap spots)

Patrick Guzzle, Mountain West Food Safety, LLC /

Kelly Dimond, RDN, LD, Terri Perez, CDM, CFPP and Sue Linja, RDN, LD

4:00 - 4:45 pm RDN Consultant Role - Back to the Basics & Into the Future

Review the Tasks Included in the Consultants Contract and How to Efficiently and Effectively Accomplish These (for the best resident, relationship and survey outcomes) / Maureen Sykes, RDN, LD (Outside on the Green)

5:30pm - Evening Entertainment & Dinner - Lit Candles & Heavy Apps

Wednesday, July 10, 2019

Boise Centre on the Grove - 850 W Front St

7:45-8:30 am - Meet at Dutch Bros for coffee next door before the conference begins (optional)

8:30 - 10:00 am - Understanding Your “WHY”?

*Motivation for the Consultant and Those Around You - Unlock the Reasons Behind Why You Do What You Do! / **Biona Lindsey, CDM, CFPP***

10:15 - 11:45 am - PDPM, VBP, MDS, PPS, OMG!

*Vital Information For the RDN - Including How to Help Maximize Reimbursement for Your Facility and How to Complete a Physical Nutrition Exam for Malnutrition / **Rick Holloway, LNHA and Lori Tollinger, RDN, LD***

11:45 -12:30 pm - Financial Planning and Tax Breaks for the Consultant

*Tips and Tricks for the Consultant Dietitian to Maximize your Savings and Make Smart Financial Business Decisions / **Eric Tarver, Wood Financial Group***

12:30 - 1:15 pm - Catered Lunch and Awards/Prizes

1:15-1:45 pm - Visit the Tradeshow or Take a Walk

1:45 - 3:15 pm - The Costs of Malnutrition & Dehydration

*Foregoing a cookie cutter approach and individualizing nutrition intervention is key to the success of the resident | **Elaine Farley-Zoucha, RDN, LMNT, EZ Nutrition Consulting, PC Owner and President***

3:30 - 5:00 pm - The Solution Room

*In this interactive session, come with your biggest challenges and discuss among your peers and panelists to find solutions. Through openness and discussion, discover ways to change challenges to solutions! / **Moderator: Sue Linja, RDN, LD***

5:00 pm - Conclusions and Farewells

A Closer Look:

Understanding Your “Why” ...Looking Beyond the Person in the Mirror

Bionca Lindsey, CDM, CFPP

8:30 am – 10:00 am

Everyone has a reason for doing what they do, but many of us haven't taken the time to narrow down our why. Wouldn't you like to learn what really motivates you? Perhaps turn your passion into what you do every day? That's the entire premise behind identifying your why. Let's look beyond the normal necessities of life and go below the surface to peel back our layers to see what we are all about.

Attendees will:

- Unlock and understand the reason behind why they do what they do; • Self-reflect, evaluate their thought process, learn a little more about their communication skills and how all of these affect their decision making; and
- Look at the message they are marketing and see if it lines up with their true intentions.

The Costs of Malnutrition & Dehydration

Elaine Farley-Zoucha, RD, LMNT

EZ Nutrition Consulting, PC Owner and President

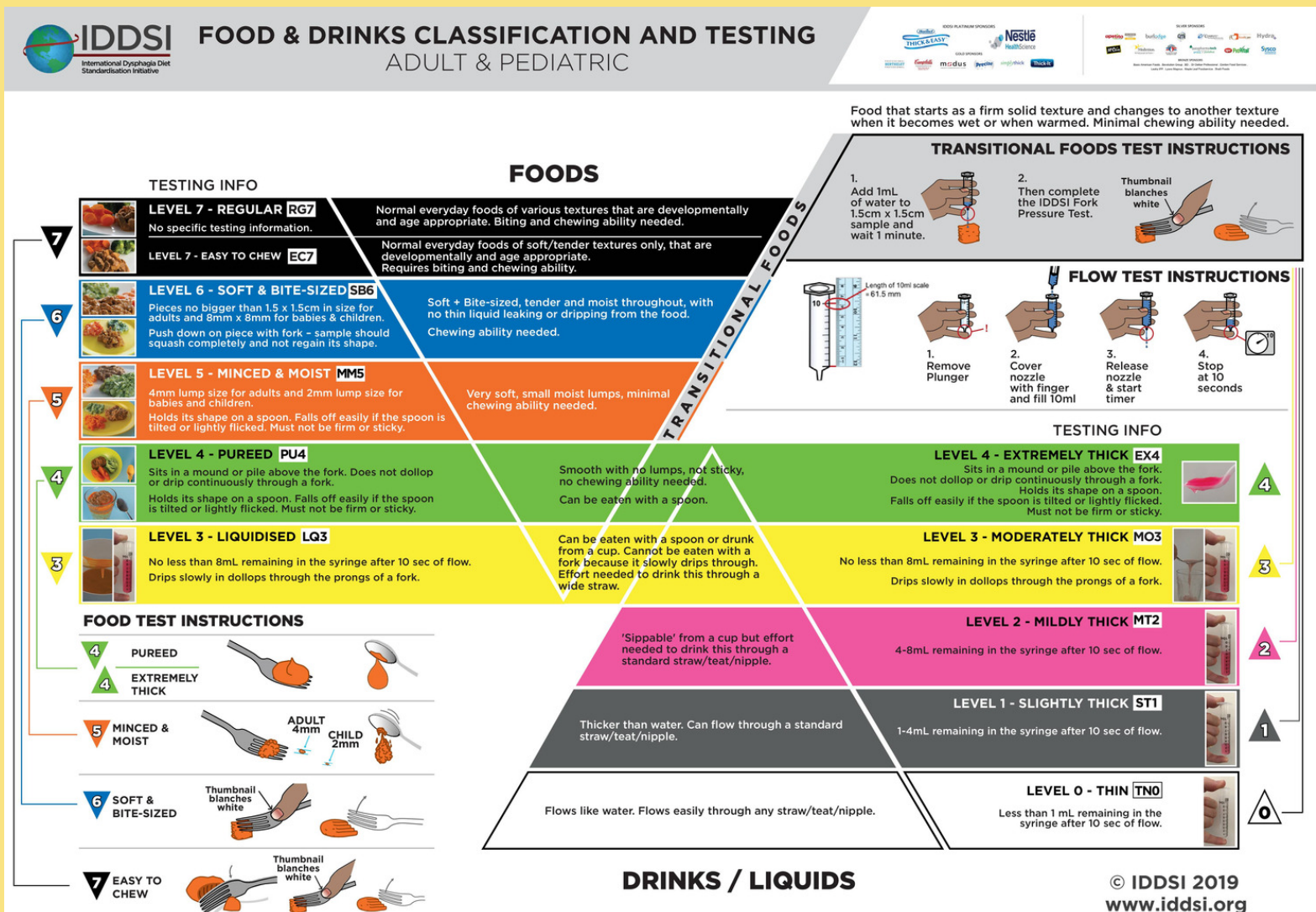
1:45 pm – 3:15 pm

According to a study conducted by the University of Illinois and Abbott Laboratories disease-related malnutrition costs the U.S. approximately \$15.5 billion annually. Malnutrition in the geriatric individual can lead to significant negative outcomes, therefore accurate and timely identification of malnutrition is essential to resident success. Foregoing a cookie cutter approach and individualizing nutrition intervention is key to the success of the resident. In this session you will:

- Demonstrate an understanding of how malnutrition increases costs in healthcare facilities.
- Understand the signs and symptoms of malnutrition.
- Identify out of the box approaches to combat malnutrition.
- Identify key areas to monitor when replenishing the malnourished resident.

IDDSI for All Dietitians

It's REAL, everyone. And as an RDN consultant with S&S Nutrition Network, you are expected to know the changes and help lead the charge within your facility/place of work. The International Dysphagia Diet Standardisation Initiative (IDDSI) and yes, standardisation is spelled with an "s") created global standardized terminology and definitions for texture-modified foods and thickened liquids to improve the safety and care for individuals with dysphagia, a swallowing disorder, which affects an estimated 560 million people worldwide. Learn more about the IDDSI Framework at IDDSI.org. The Academy of Nutrition and Dietetics and the American Speech-Language-Hearing Association together support May 1, 2019, as the official launch date for IDDSI implementation in the United States. The announcement was made at the 2018 Food and Nutrition Conference and Expo™ in Washington D.C. The IDDSI website provides information on the framework, testing methods, FAQ and implementation resources. IDDSI.org also produces a monthly newsletter containing the latest news in the IDDSI community. Please check out their website and watch for various ways to become educated on these changes that will be rolled out in EVERY area of our field - hospitals, home care, communities, skilled nursing, assisted living and more. S&S Nutrition will provide some training at our annual conference in July as well.



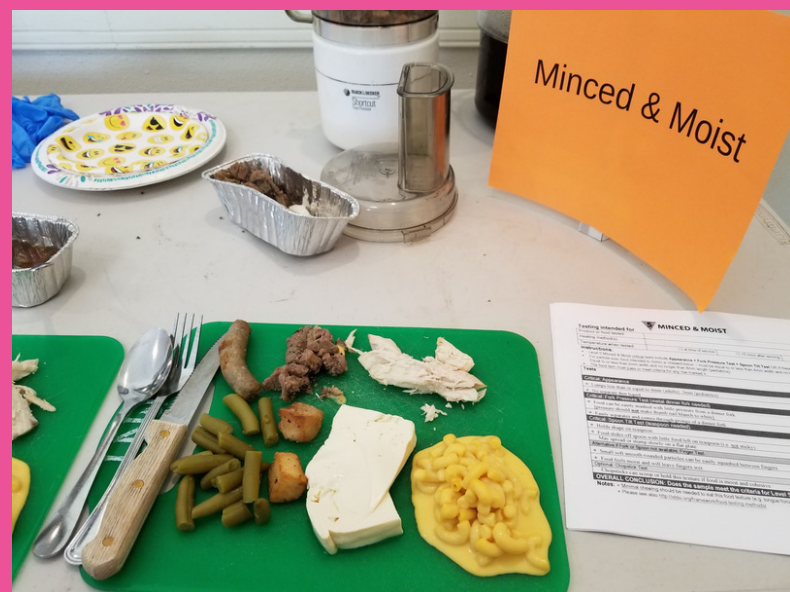
IDDSI Training on the Road!

Sue and I (Sarah Bair) took to the road for two weeks in June to do IDDSI Training all across Idaho and into Washington. In July we are also hitting the Seattle, Portland and Albany areas.

In total we will have been at 9 locations and conducted 19 two hour sessions. We had 164 attendees the first week and 163 the second week.

We should have approximately the same for our week in OR/WA as well.

We had a nice variety of attendees with RDs, CDMs, SLPs and Nursing staff in almost every session. This provided for some great discussion regarding IDDSI and the implementation process and challenges. Everyone seemed to appreciate the breakout sessions, the discussions and the materials provided.



S & S Nutrition Network

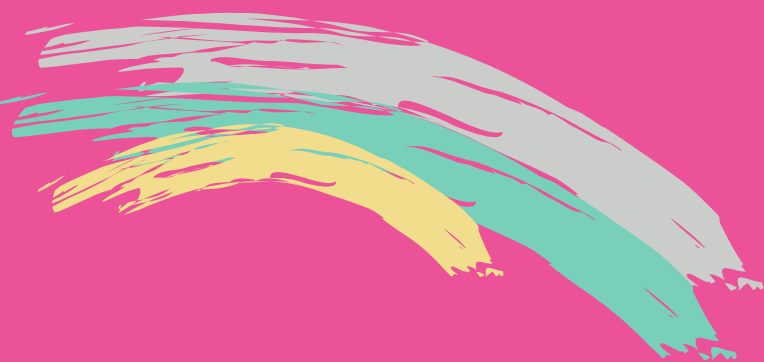


WHAT IS IDDSI?

International Dysphagia Diet Standardisation Initiative

SEE LOCATIONS, DATES
AND REGISTRATION INFORMATION
ON PAGE 2. TWO SESSIONS OFFERED EACH
DAY TO COVER ALL SHIFTS!

IDDSI is rolling out in your state and across the nation - ARE YOU READY? Register today to learn the basics of IDDSI and how to begin implementation. This basic (hands-on) training is relevant for all types of health care and all levels of staff - Administration, Nursing, Speech Language Pathologists, Food and Nutrition Services (all food service staff and CDM). Certificate of Completion available.





A big Welcome to
these additions to the
S & S family

Marie Bilodeau
Libby Reynolds
Clare Rezendes

Let's Celebrate this Quarter's Anniversaries!
>5 Years

Julie Richardson (6 years)

>10 Years

Leslie Bell (10 years)

Kelly Diamond (10 years)

Rebekah Ramsey (10 years)

Betty Trounsen (10 years)

Jamie Zabel (10 years)



FDA confirms PFAS chemicals are in the US food supply

By Nadia Kounang, CNN

(CNN)The US Food and Drug Administration confirmed that PFAS chemicals have made their way into the US food supply. On Monday, the FDA publicly acknowledged the initial findings of the agency's investigation into how the "forever chemicals" have been detected in the foods we eat.

PFAS is a family of nearly 5,000 synthetic chemicals that are extremely persistent in the environment and in our bodies. PFAS is short for perfluoroalkyl and polyfluoroalkyl substances and includes chemicals known as PFOS, PFOA and GenX, sometimes called forever chemicals. These chemicals all share signature elemental bonds of fluorine and carbon, which are extremely strong and difficult to break down in the environment or in our bodies.

These chemicals can easily migrate into the air, dust, food, soil and water and can accumulate in the body. They've been linked to adverse health impacts including liver damage, thyroid disease, decreased fertility, high cholesterol, obesity, hormone suppression and cancer.

In the body, PFAS chemicals primarily settle into the blood, kidney and liver. A study from 2007 by the US Centers for Disease Control and Prevention estimated that PFAS chemicals could be detected in the blood of 98% of the US population.

Listen, Read, Watch..

PODCAST: American Journal of Public Health Podcast -- This month I discuss the role of science in assessing public health risks associated with industrial products, reviewing two cases prominently featured in the news recently: ovarian cancers linked to asbestos present in talc powder, and glyphosate contained in the herbicide Roundup associated with cancer and neurological troubles. I address the complex relationships between corporations and governmental agencies when consumers' public health comes into question with David Rosner, historian, Columbia University, Howard Rodenberg, a former health officer in Kansas, and Jonathan Samet, Professor and Dean at the Colorado school of Public Health.

YOUTUBE: IDDSI Webinar Series -- Through this playlist, IDDSI brings you our webinar recordings so you have continuous access to the content we share with people around the world.

BOOKS: What Do I Eat Now?: A Step-by-Step Guide to Eating Right with Type 2 Diabetes 2nd Edition

by Patti B. Geil & Tami A. Ross

Any person diagnosed with diabetes has one simple question: What do I eat now? When diagnosed with type 2 diabetes, doctors typically tell their patients to start eating healthy. But what does that mean? If figuring out what to eat seems like taking a test, here's the solution, the American Diabetes Association book, What Do I Eat Now?. Written in clear, concise, and down-to-earth language that takes the mystery out of confusing nutrition recommendations, this indispensable guide can help readers make lasting changes in as little as a month. In only 4 weeks, readers can eat better, improve their diabetes management, and live a healthier lifestyle. With What Do I

Eat Now?, readers will be able to:

Start off fast – quickly turn their diet around

Do It Right – learn what to eat and when

Cut to the Chase – follow easy, straightforward advice from diabetes experts

Leave Confusion Behind – learn essential nutrition tips everyday

For those simply looking to be told what to eat, What Do I Eat Now? has everything needed to take the guesswork out of healthy meal planning. Start eating better today!

<https://www.the-scientist.com/news-opinion/three-studies-track-peoples-microbiomes-through-health-and-disease-65946>

Three Studies Track People's Microbiomes Through Health and Disease

The second phase of the Human Microbiome Project reports on microbial composition in prediabetes, inflammatory bowel disease, and pregnancy.

May 29, 2019

EMMA YASINSKI

ABOVE: A scanning electron micrograph of bacterial biofilms attached to vaginal epithelium, sampled from a study participant who had inflammation caused by bacterial overgrowth, or bacterial vaginosis.

JUDY WILLIAMSON AND KIMBERLY K. JEFFERSON, VIRGINIA COMMONWEALTH UNIVERSITY

In 2008, the National Institutes of Health funded the [Human Microbiome Project](#)—an ambitious project, similar to the [Human Genome Project](#)—aimed at characterizing the incredibly complex microbes that live in and on each of us. Six years later, the program expanded to become the integrative Human Microbiome Project (iHMP), with a goal of understanding how the microbiome in different parts of the body changes overtime and in various states of health such as pregnancy or disease.

Three studies from the iHMP, published today (May 29) in *Nature* and *Nature Medicine*, connect microbial composition to [type 2 diabetes](#), [pregnancy](#), and [inflammatory bowel disease \(IBD\)](#). Each study included data from thousands of blood samples, biopsies, and microbial swabs taken repeatedly from patients over time.

The main finding of all three studies, says [Curtis Huttenhower](#), a computational biologist at Harvard University and the senior author of the IBD study, is that “everything is interconnected. Everything changes at once, and when the bugs change, you can see the human respond, and vice versa.”

Prediabetes and infection

One of the studies hit close to home for [Michael Snyder](#), a geneticist at Stanford University who had shifted his research to focus on type 2 diabetes when he was diagnosed with the disease. Many patients, like Snyder, are diagnosed with diabetes following viral infections, but scientists don't understand the connection between infections

and insulin. He and his team wondered if people with diabetes or prediabetes respond differently to infections than those with healthy insulin function.

They followed 106 participants over four years (83 of which agreed to make their data [open-access](#)). Half of the volunteers had prediabetes, a condition in which blood sugar levels are elevated, but not quite to the point of type 2 diabetes. When the patients said they were healthy (not experiencing acute illnesses), the scientists took blood, stool, and nasal samples every three months. They used the samples to monitor the patients' blood sugar and run deep genome sequencing to characterize the makeup of the gut microbiome and observe changes over time.

Everything changes at once, and when the bugs change, you can see the human respond, and vice versa.

—Curtis Huttenhower, Harvard University

“We sequenced the genome from the host, the transcriptome, the proteome, and metabolome,” Snyder tells *The Scientist*, “and microbiome as well, obviously.”

If the patients reported that they'd gotten sick, had an immunization, gained weight, or experienced other significant life stresses such as colonoscopies, the researchers asked them to come in more frequently to give samples.

Thirty-two patients had respiratory infections during the study.

They found that patients with prediabetes or dysfunctional insulin receptor signaling had impaired and delayed responses to respiratory viral infections, which the authors suggest can lead to extended, low-level inflammation, known to exacerbate diseases such as diabetes. The nasal and gut microbiomes changed differently in response to an infection than those of patients with healthy receptor signaling.

More importantly though, the difference in microbial makeup from person to person was greater than the difference within one person when he was sick or healthy. This means that “it's really, really important that you capture someone's profile when they're healthy so when they get disease you can see [any changes] at the earliest time,” says Snyder.

Inflammatory bowel disease

Huttenhower and his colleagues found a similar idiosyncratic phenomenon in their sample of patients with IBD.

“The exact ways in which the disease's flares manifest differ from person to person,” he says. “One of the surprising outcomes there is just really how different everyone is.”

The group followed 132 patients for a year each. Patients used home collection kits and mailed a stool sample to the investigators every two weeks. The researchers also analyzed quarterly blood samples and biopsies from the patients' colonoscopies.

IBD is an autoimmune disease, but the samples showed that it's not just the immune system that's disrupted. The known biomarkers of Crohn's and colitis, two types of IBD, are antibodies in the blood, but these are only present when there are also changes in the gut microbiome.

"It's not just that the immune system is generally disrupted during Crohn's disease or ulcerative colitis, it's very specifically during periods of disease activity. When there are microbial and biochemical changes in the gut, you can also see the immune system respond throughout the body with changes in which antibodies are present," says Huttenhower.

Pregnancy and prematurity

The final study in the trio didn't track disease, but changes in microbial diversity as they related to pregnancy—especially in those that end with preterm deliveries.

Scientists have made enormous progress in supporting preterm babies after they are born, but there is still no way to predict when it is likely to happen.

In the United States, women of African ancestry are more likely than any other women to give birth prematurely. In hopes of better understanding the issue in this population, [Greg Buck](#), a microbiologist and immunologist at Virginia Commonwealth University, and his team analyzed a subset of samples from the 1,527 women involved in the Multi-Omic Microbiome Study-Pregnancy Initiative (MOMS-PI). The subset of pregnant women was mostly of African descent and ended up including 45 who had preterm births (defined as pregnancies lasting less than 37 weeks), and 90 who went to term.

Until these microbiome studies create actionable outcomes and test hypotheses, we won't know if they are high impact or just expensive association studies.

—Gregor Reid, Western University

"The question was, could we identify any microbial signatures or multi-omic signatures that would give us some idea of how to either predict risk of preterm birth or give us some idea of the mechanisms by which bacteria [cause preterm birth]?" says Buck.

The team collected samples of the vaginal microbiome from the women at every appointment throughout their pregnancies. Like the other studies, they studied these samples in the context of the rest of the body, also collecting cord blood and placenta tissues at birth, and other microbial specimens.

The group identified certain bacterial taxa associated with preterm birth. Most surprising, says Buck, was that the signals seemed to be greatest early in the pregnancy, instead of as the women approached labor. Previous studies had shown that during the first trimester, the vaginal microbiome is very diverse, but throughout pregnancy that

decreases, and the microbial community becomes dominated by *Lactobacillus*. In the current study, the signs of potential preterm delivery disappeared along with microbial diversity.

[David Sela](#), a nutritional microbiologist at the University of Massachusetts who was not involved in the study, called the work “expansive” and “well executed,” and added that the identification of microbes tied to preterm birth could one day help inform interventions.

However, Buck and his colleagues are not yet ready to take the leap of claiming that they can predict which moms will deliver early. And it’s unclear how much practical utility the massive scientific undertaking of the integrative Human Microbiome Project will have.

[Gregor Reid](#), a microbiologist and immunologist at Western University who was not involved in any of the studies, says, “Until these microbiome studies create actionable outcomes and test hypotheses, we won’t know if they are high impact or just expensive association studies. . . . We need to go beyond following people and not testing interventions.”

W. Zhou et al., “Longitudinal multi-omics of host- microbe dynamics in pre-diabetes,” [Nature](#), doi:10.1038/s41586-019-1236-x, 2019.

J. Lloyd-Price et al., “Multi-omics of the gut microbial ecosystem in inflammatory bowel diseases,” [Nature](#), doi:10.1038/s41586-019-1237-9, 2019.

J. Fettweis et al., “The vaginal microbiome and preterm birth,” [Nature Medicine](#), doi:10.1038/s41591-019-0450-2, 2019.

S&S Nutrition Network

Menu Services

S&S is pleased to announce that our menus now reflect IDDSI (International Dysphagia Diet Standardisation Initiative).

Healthcare Standards are changing and so are we. Of course not everyone is ready to make the change to IDDSI today, so our menu spreadsheets are still appropriate for those who haven't made the transition, offering mechanical and puree extensions.

What changes can I expect?

1. Diet extensions are now printed in color reflecting IDDSI diet levels: 4 (pureed), 5 (Minced and Moist), 6 (Soft & Bite Size)
2. Descriptors are available for texture modifications at the bottom of each recipe.
3. Resources from IDDSI are included and printed in color Including; Audit sheets, food test cards and IDDSI Frame work.

\$550 Menus will still include;
4 Weekly Alphabetized Recipe Books
Week at a Glance (WAG)
Daily Diet Spread Sheets (Improved!)
Alternate Recipe Book
Alternate Diet Guide Spreadsheets
Substitutions for Vitamins A & C
Measurement Reference Form
Food Preference Form

Current Diets include: Regular, Consistent Carbohydrate, Liberal Renal, 2 Gram Sodium
Gluten Restricted and High Calorie/Fortified.

Anticipating IDDSI Menus available beginning mid-April.

If you aren't interested in waiting for all the IDDSI pieces menus are available April 1 st.

Expect more changes in the future. We change so we can help you in meeting ever changing healthcare standards. Let's work together. Our current project is assembling some IDDSI friendly recipes for puree and pre-gelled bread products and we'd love your contribution.

Any questions? Contact kdimondrd@gmail.com