



# Nutrition Research Review

## ANHI | August 2024

### Dietary Intake by Patients Taking GLP-1 & Dual GIP/GLP-1 Receptor Agonists: A Narrative Review & Discussion of Research Needs

**Publication:** Obesity Pillars

**Publish Date:** September 2024

**Authors:** Christensen S, Robinson K, Thomas S, Williams D

#### SUMMARY

Obesity and type 2 diabetes mellitus (T2DM) are increasingly common worldwide and weight reduction is recommended to improve outcomes. Due to the efficacy of glucagon-like peptide receptor agonists (GLP-1RAs) and dual mechanism glucose-dependent insulinotropic polypeptide/glucagon-like peptide receptor agonists (GIP/GLP-1RAs) for weight reduction and glycemic control, their use is rising among patients with obesity and/or T2DM. However, their impact on dietary intake is less understood. This review summarizes studies on dietary intake in people with obesity and/or T2DM using GLP-1 or GIP/GLP-1 RAs. Studies show a 16–39% reduction in caloric intake, but few

assess diet composition. More research is needed to understand nutritional needs and develop guidelines for these patients.

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## Oral Nutritional Supplementation with Dietary Counseling Improves Linear Catch-Up Growth & Health Outcomes in Children with or at Risk of Undernutrition: A Randomized Controlled Trial

**Publication:** Frontiers in Nutrition

**Publish Date:** July 2024

**Authors:** Ow MYL, Tran NT, Berde Y, Nguyen TS, Tran VK, Jablonka MJ, Baggs GE and Huynh DTT

### SUMMARY

Childhood undernutrition is associated with increased morbidity, mortality, and socioeconomic burden. The Supporting Pediatric GRowth and Health OUTcomes (SPROUT) trial evaluated the effects of an oral nutritional supplement (ONS) combined with dietary counseling (DC) compared to DC alone. The study included children aged 24–60 months in Vietnam who were at risk of or had undernutrition based on WHO Growth Standards criteria.

### Results demonstrated:

- ONS + DC showed a larger weight-for-age Z-score (WAZ) increase at day 120 compared to DC (LSM (SE): 0.30 (0.02) vs. 0.13 (0.02);  $p < 0.001$ ).
- ONS + DC had greater improvements in weight, BMI, and weight-for-height indices at days 30 and 120 (all  $p < 0.01$ ).
- Height gain was larger in ONS + DC, including height-for-age difference (HAD; cm: 0.56 (0.07) vs. 0.10 (0.07);  $p < 0.001$ ) at day 120.
- ONS + DC had larger arm muscle indices, higher parent-rated appetite, physical activity, energy levels, better sleep quality, and fewer awakenings compared to DC.

Adding ONS to DC improves growth, catch-up growth, and health outcomes in children with or at risk of undernutrition.

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## Nutrition for the Older Adult – Current Concepts. Report from an ESPEN Symposium

**Publication:** Clinical Nutrition

**Publish Date:** August 2024

**Authors:** Volkert D, Delzenne N, Demirkan K, Schneider S, Abbasoglu O, Bahat G, Barazzoni R, Bauer J, Cuerda C, de van der Schueren M, Doganay M, Halil M, Lehtisalo J, Piccoli GB, Rolland Y, Sengul Aycicek G, Visser M, Wickramasinghe K, Wirth R, Wunderle C, Zanetti M, Cederholm T

### SUMMARY

A scientific symposium organized by ESPEN addressed nutrition-related challenges for the older population, summarizing the current state of knowledge. Eighteen issues were presented by international experts and summarized in this report. Progress has been made in standardizing definitions, though not all are complete. For malnutrition, the GLIM approach has been shown suitable in older adults, but a consensus definition is needed for anorexia of aging. Integrated, person-centered interventions should aim to optimize intrinsic and functional capacity. Studies like EFFORT and FINGER show the benefits of individualized, multifactorial interventions. Nutritional intervention combined with physical training is crucial, while restrictive diets and drug treatments should be used cautiously. Obesity management must consider sarcopenia risk. Future precision nutrition may enhance nutritional care. Meanwhile, stakeholders should focus on better implementing current strategies and collaborate to improve nutrition for older adults.

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## Diagnosis & Management of Eosinophilic Esophagitis in Children: An Update from the European Society for Paediatric Gastroenterology, Hepatology & Nutrition

**Publication:** Journal of Pediatric Gastroenteral Nutrition

**Publish Date:** July 2024

**Authors:** Amil-Dias J, Oliva S, Papadopoulou A, Thomson M, Gutiérrez-Junquera C, Kalach N, Orel R, Auth M, Nijenhuis-Hendriks D, Strisciuglio C, Bauraind O, Chong S, Ortega GD, Fernández SF, Furman M, Garcia-Puig R, Gottrand F, Homan M, Huysentruyt K, Kostovski A, Otte S, Rea F, Roma E, Romano C, Tzivinikos C, Urbonas V, Velde SV, Zangen T, Zevit N

## SUMMARY

Eosinophilic esophagitis (EoE) is a chronic inflammatory disease of the esophagus characterized by symptoms of esophageal dysfunction and predominantly eosinophilic infiltration of the squamous epithelium. The European Society for Pediatric Gastroenterology, Hepatology, and Nutrition (ESPGHAN) published an updated guideline due to evolving knowledge leading to a better understanding of childhood EoE. This guideline incorporates the new findings and provides a practical guide for clinicians treating children diagnosed with EoE.

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## Personalized Nutrition Therapy without Weight Loss Counseling Produces Weight Loss in Individuals with Prediabetes Who Are Overweight/Obese: A Randomized Controlled Trial

**Publication:** Nutrients

**Publish Date:** July 2024

**Authors:** Basiri R, Cheskin L

## SUMMARY

This study investigated the impact of personalized nutrition therapy (PNT) combined with continuous glucose monitoring (CGM) on weight and body composition in 30 overweight or obese individuals with prediabetes. Participants were randomly assigned to either a treatment group, which used CGM data plus PNT, or a control group, which was blinded to their glucose data. Both groups received dietary recommendations and personalized glucose control goals. Over 30 days, both groups lost weight and fat mass, but the treatment group had twice the reductions, a significant decrease in carbohydrate intake, significant increase in physical activity, and higher compliance. The results suggest that individuals who are overweight or obese and have prediabetes can

lose weight and improve their body composition through personalized glucose control education, even when weight loss is not the main focus.

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