



Welcome to the Renal Diet Headquarters Podcast with your host, Mathea Ford, CEO of Renal Diet Headquarters. This is our weekly talk about how you can succeed with a kidney diet, brought to you by [RenalDietHQ.com](http://RenalDietHQ.com), a website whose mission is to be the most valued resource on kidney disease that people can use to improve their health.

Hello, this is Mathea Ford, and this is the Renal Diet Headquarters podcast

number eleven, being published on March 5, 2014. You can find our show notes and the information I talk about at [RenalDietHQ.com/011](http://RenalDietHQ.com/011). Send me an email with your questions to [podcast@renaldietHQ.com](mailto:podcast@renaldietHQ.com), and I will do my best to answer them on the next podcast. Thank you in advance for listening.

Today I am going to talk a little about National Kidney month, and I am going to talk about the new food labels as our topics for today.

But before that, just a little chat. It is March, and I am so amazed, did your March come in like a lamb? In Oklahoma it came roaring in like a lion. My kids are missing two days of school because of the snow and ice. I thought spring was suppose to start in a couple weeks, I guess it will start, but I don't know that the ice will stop! Daylight saving time changes this Sunday, all the signs that the weather should be improving, but we are expecting another ice storm on Wednesday and then on Saturday, so Mother Nature is keeping us on our toes. She just does not want us to forget she is in charge.

I know lots of the US is experiencing this "weird" weather and I feel your pain. I know in a lot of other countries they are experiencing weird weather too, it is just that kind of year. But enough about the weather let me start.

March is National Kidney month; a month to celebrate all that your kidneys do and all that science and medicine does to improve our health. This month, The National Kidney Foundation has declared as National Kidney month. I would like to take a moment and do an exercise that The National Kidney Foundation recommends and encourages.

They encourage you to take a piece of paper and say this is what early detection of early kidney failure/ disease means to me, then you write it out. I am just going to verbally say what it means to me.

Early detection of kidney failure/ disease is something that I wrote an entire book about, I wrote my first book on [Living with Chronic Kidney Disease – Pre-Dialysis: Secrets To Make It Easier For You To Manage](#), so that kidney failure was not inevitable. I wrote a book about what you can do for pre-dialysis kidney disease and how to talk to your provider, your doctor, just your regular doctor not necessarily a nephrologist, and get the treatment you need to slow down the progression of kidney disease.

That is something I feel very strongly about. I feel very strongly that dialysis is not inevitable, that is something that really irritates the heck out of me, when I get the feeling that doctors have just said or given you the impression that ‘well, you are just going to end up on dialysis anyway’ or not to do too much and they kind of wait until you get really sick, that is just not okay. So that is why I wrote this book, it is on [Amazon](#). You CAN slow it down. The thing you need to do is; you are at risk if you have heart disease, high blood pressure or diabetes. You need to take action now. This is not something to wait to see what will happen, you need to get your labs and talk to your doctor, you need to find out if you are in any stage of kidney disease and if you have had diabetes or high blood pressure for any period of time, you probably have some level of kidney damage.

You need to find out what it is and get it taken care of. You need to do the small things that you can do, like certain medications you can take that will help to slow down the progression of kidney disease so that you don’t get to the point that you have to do these special diets and protein limitations and follow all kinds of special rules. You need to get your diabetes and your high blood pressure under control and you will slow down that kidney failure. Early detection means that you will slow down kidney failure and it could mean you won’t go to dialysis and that is what I want for you. Even though dialysis is a very helpful therapy, it is still something a lot of people would like to avoid. I will get off my soap box about that now.

I wanted to take a minute and remind you about it being National Kidney month and say thank you to those who have done what they can to slow down the progression of kidney disease and those who are out there helping people to understand what they can do. There are a heck of a lot of people out there that just don’t know that there is anything they can do about it.

I promised you that today I was going to talk about the new proposed food labels. I am sure you heard something about it late last week, if you didn’t, I can’t believe it; I saw it

on the news, lots of blogs and Facebook. The FDA has come out with a new proposal for how to change food labels.

The food label has been on the back of most foods, in the US since about 1994. Now, I started college in 1990 and that is when they passed this food labeling act. I remember learning about it and being so excited that they were going to talk about these components of the foods and do these portion sizes. In 1994 it rolled out to be on a lot of foods, I remember it was not even on ice cream at that time but it eventually got there.

It has been about 20 years and we have found, there was some research, The National Eating Trend Service did research and back then they saw that about 60% or more of Americans said that they read labels, now they find that it is about 48% of Americans. So about 48% of people reading labels and I think that is because most of the time we have already read the label. If we eat a food often or it is something that we kinda consume without thinking about it, we are not going to look at the label. If it is a new product or we have suddenly had a dietary change or we are looking for something by reading the ingredients, we are looking at something on the label, we are paying attention to those things that are listed on the food label. I think that explains why about half of Americans read the labels on a regular basis.

The label has changed very little since being implemented in 1994. They have added the trans-fat and a few other things since then, but this new proposed label I think is very exciting for people with kidney disease or failure especially those in stages 4 through dialysis, because the big thing is they are recommending the addition of potassium and making the portion sizes more applicable to what people actually eat! So they are recommending that it is mandatory that they put on potassium amounts and make the portion sizes more applicable to what people actually eat.

So let me explain the overall proposals are. The proposed changes, from the FDA website, they are saying a greater understanding of nutrition science, they want to add information about added sugars. So if they are adding sugars to replace the fat or to make it a more caloric dense food, it is important to identify that. Let me explain why that is a good thing. When it is identified on the label, the same thing that happened with trans-fats, people understand that they don't need trans-fats and should not eat them, once it got put on labels; it decreased the amounts that were in those foods.

Now, I don't have any research, I am sure there is some out there, but I can tell you that once manufactures were required to label with how much trans-fat they put in that food, all the sudden they thought twice about how much they were putting in it, and the same thing will happen with added sugars. Just like we have a lot of people concerned about

sodium, that same thing will start happening with added sugars. Everybody is concerned about added sugars.

They are going to update the daily values for nutrients like sodium, dietary fiber and vitamin D, that is the amounts that they recommend you take in on a daily basis. They are going to require manufactures to declare the amount of potassium and vitamin D on the label because they are new nutrients of public health significance. Calcium and iron will continue to be on the label. Also vitamins A and C can be on their voluntarily. They will also have the total fat, saturated fat and trans-fat. They are going to remove the calories from fat because the type of fat is more important than the amount.

The other things they are going to do is update the serving size requirement and new labeling requirements for certain package sizes. What they are going to do is, look at the amount that in one sitting a person typically eats. What that will do is, take for example a 20 ounce bottle of soda, you typically drink that whole thing in one sitting, and you don't use it 2.5 times, so they will require that to be one serving. Think of a pint of Ben and Jerry's ice cream, it is labeled right now as 4 servings, a lot of people eat that whole thing, or at least half of it at one time. You would have to see the label in that context.

They are also going to redesign it so that it is clearer to see the calories, the amounts of cholesterols, and the percent daily values are going to be placed on the left hand side and be more prominent so people will start to understand those better.

I think it is a great thing, let me take a moment now to tell you about my opinion of it. I have told you what it is going to be and where it started. My opinion, obviously this is not a final decision, they are still talking about it, they are still negotiating, and this probably won't roll out for another year or more. I think this is an excellent start. You know, you have already heard me say that. People need to know how much potassium is in their food. It is really hard, even for someone like me who has the ability to go look them up in my books, to tell you how much potassium is in a specific type of food because potassium can be added in some of the preservatives, like potassium sulfate or other types of potassium. Manufactures are going to start using potassium to replace sodium, they probably already do that more than we realize. When you have kidney disease, you need to know, that hey, they are going to replace some of this flavor, yes they are taking out the salt, but oh my gosh, they just added 500 mg of potassium. In some ways, that is not important to some people with kidney failure, because they don't have to worry about potassium, they are more concerned with salt, but as you progress with kidney failure you are more concerned with potassium and salt, and you need to know what is in there.

I think this is going to be great because I think that there is a bunch of hidden potassium that we just don't know about and really people need to be more aware of it. I don't think there is a bad thing to the new labels, except it would be nice if they would add phosphorus as well. I think they could have done more, but what they have done is added something that is very important.

The added sugars, I think, are very important to understand where they are putting these added things. I would like to see a whole grains on the label. A lot of times you look on the front of the package and you will see, '24 grams of whole grain per serving', I would like to see that on the label under the dietary fiber and under the total carbs. I think that it is important for people to know how much whole grain is in a product and it would be nice if it was mandated to be on the nutrition facts label, that way when you look at the back of food, like bread then you would be aware of what is there and you would be able to compare apples to apples. 'Okay, this one says it has 24 whole grains per serving, this one does not have any or I don't know if it does, it might but they just didn't put it on the label'.

I think that is something they could have added but overall I think the new labels are a big improvement. I'm so excited because I know that, like I said whole grains could have been added but potassium is a huge improvement. It says the milligrams and the percent daily value, you probably as a kidney patient, won't necessarily pay attention to the daily value, just because it will not be based on what your doctor has told you to watch, but you can look at the milligrams and know how much, and since the portion sizes will be more appropriate for what you are actually eating, then you will be able to find a way to make the label be more helpful. Even if that means you need to cut your portion in half, or decided not to eat this food over this food because it has more potassium even though it would normally be a low potassium food because they have added potassium in some way and it will show on the label.

Now this won't show up for another year or so, I don't know how long they have to implement it and obviously there is still a lot of feedback they are getting from the food manufactures, this is just the first step. What I would encourage you to do, is send to your congress people or send to the FDA a note and say I really encourage this to happen, the people in Washington DC, especially those on the committees that handle and deal with the food and drug administration, I will look that up and will talk about it in a future podcast, I will talk about it again. I would just encourage you to take a minute and write a note to your senator or representative. Let them know, 'please encourage the FDA to pass this label as quickly as possible', encourage them to make sure the potassium is on there, because it is important to me as a person with kidney failure that it be included. Let them know it matters to you, they speak for you, and their voice carries a lot of weight with the FDA. If they get enough letters they will make a statement.

Wow, this week has been interesting. I talked to you this week about National Kidney month and the new food label. I am so very excited about the new food label. I encourage you to go out this week and enjoy the weather, if you have good weather where you are. Next week I am going to be talking about National Kidney day, that is on March 13, and National Kidney day is the day they are encouraging people to go out and get tested and to exercise and to think about your kidneys and be healthier to your kidneys.

This month we are also highlighting our [caregivers](#). We are going to have, at the end of the month; we are going to release an item that is a guide for caregivers. Really what this guide for caregivers is going to be is a way for caregivers to take care of themselves and their loved one. It is going to have a guide about how to best take care of a chronic kidney disease person, just dealing with the stress and emotions and all the things that come with it, doctors' visits, just guides like that.

It will also have something that no one else has, which is information on reflexology, which is a way to naturally heal and relax. It will have information about aromatherapy and using aromatherapy oils, ones that are very specific to chronic kidney disease and that help with chronic kidney disease symptoms. How use those, how strong, how to apply them. There are many people that believe strongly in homeopathic remedies. I just know you will find a lot of value in that. There is information on a process called craniosacral therapy, CST, and that is something that is an interesting therapy, it deals with the cerebrospinal fluid.

It is going to have those three things, and at the end of the month I am going to release that, and over the next couple of weeks, I am going to give you the opportunity to pre-order that. What that is going to mean is; I am going to offer it for ½ the normal price of what it will be. I am going to offer you the opportunity to purchase it. If you are a listener on the podcast or on my email list, there is information on getting on the email list at the end of the podcast. During the next couple of weeks, I am going to give you the opportunity to do that, it will be released the last week of March or the first part of April, I can't remember exactly which day we are going to release it. Whenever it is ready, it will be available either as a downloadable product or as a spiral bound product you can receive in the mail. Obviously one will be more expensive because if I am mailing you a physical product that will cost a little more, but it will cost around \$100 when it is done. You will be able to buy it for a little less than ½ of that, by the end of the month. I will give you the opportunity to purchase it early, you will have to wait a week or so to get your copy, and that also helps me to know how many to buy in the first round if it is physical product. Once that is release, I will let you know.

I wanted to make sure you knew that was coming and be aware of it. I am also looking for some caregivers, so send me an email at [podcast@renaldietHQ.com](mailto:podcast@renaldietHQ.com) if you are



interested in reading a part of it. I am trying to get some different parts out to different people to get feedback and information so I can make it just a little bit better. Send me your information if you are interested in doing that.

I appreciate you this week and have a good week and I look forward to talking to you again next week. Thank you.

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