"Let food be thy medicine and medicine be thy food."

**Hippocrates** 



# Food-based interventions to support management of chronic diseases

Edward A. Frongillo Nutrition Symposium March 28, 2024

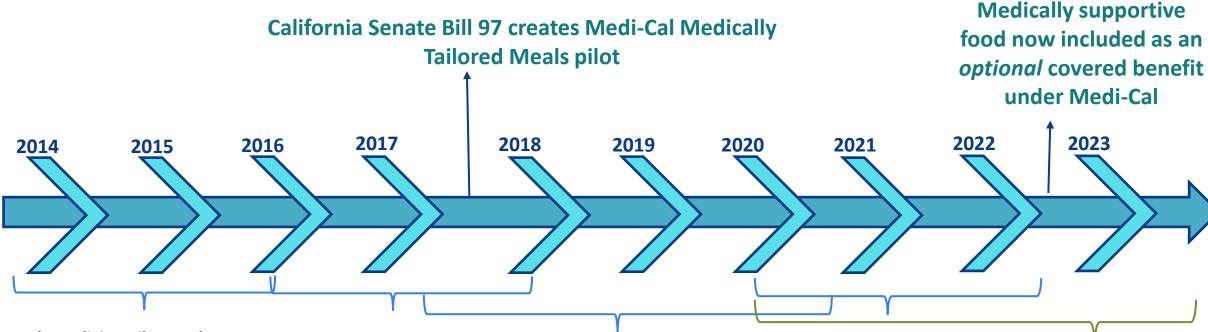




## **UCSF-POH Research Partnership**



meals with love



#### Food=Medicine Pilot Study

- Pre-post design
- No control group
- n=72
- HIV and/or diabetes
- Follow up in 6 months

## **Changing Health through Food Support (CHEFS) Study**

- Randomized trial
- n=191
- HIV
- Follow up in 6 months

#### **Cardiac Recovery through Dietary** Support (CaRDS) Study

- Randomized trial
- n=161
- Congestive heart failure
- Follow up in 1, 5 months

### **Nutrition-Supported Diabetes Education Program (NU-DSMP)**

- Randomized trial
- n=72
- Type 2 diabetes
- Follow up in 3, 6 months

## **Changing Health through** Food Support (CHEFS-DM)

- Randomized trial (ongoing)
- n=246
- Type 2 diabetes
- Follow up in 6, 12 months





# Project Open Hand interventions (3-6 months)



## **Medically tailored meals**

**PLUS** 

**AND** 

Based on Mediterranean diet, compliant with heart- and diabetes-health guidelines





Medically supportive groceries (primarily fresh foods)

**AND** 



**Supplementary items** to round out nutritional intake, provide cooking supplies

Medically tailored nutritional education

Individual and/or group sessions with registered dietitians





## Food = Medicine Pilot



Table 4 HIV- and T2DM-specific study outcomes at baseline and follow-up

	Overall		
	Baseline	Follow-up	p value <sup>a</sup>
HIV-specific outcomes $(n = 30)$			
Internalized HIV stigma (range 7-28]), mean (SD)	12.2 (4.28)	11.5 (4.10)	0.21
ART adherence ≥95%, %	46.7	70.0	0.046
T2DM-specific outcomes $(n = 29)$			
Diabetes distress (range 1-6), mean (SD)	2.64 (0.905)	2.02 (0.777)	< 0.001
Perceived diabetes self-management score (range 8-40), mean (SD)	24.8 (6.35)	27.3 (6.73)	0.007
HbA1c %, mean (SD)	9.23 (2.61)	8.75 (1.95)	0.41
HbA1c < 7% (optimal control), %	10.3	19.2	0.08
Fasting glucose, mean (SD)	164 (86.1)	151 (80.5)	0.48



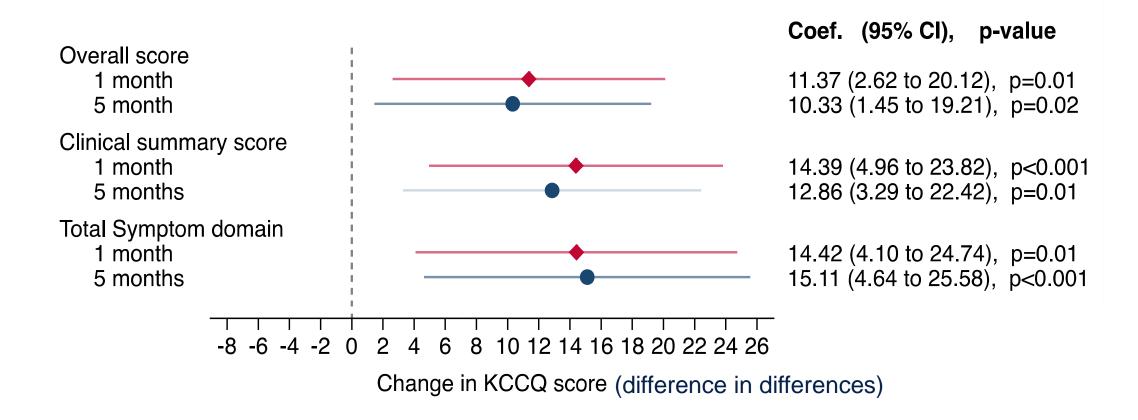


# CHEFS-HIV pragmatic RCT

Outcome (retrospective period)	Adjusted OR for difference in differences	95% CI
Food insecurity (6 months)	0.23	0.09, 0.62
Depressive symptoms (2 weeks)	0.32	0.13, 0.83
≤90% ART adherence (7 days)	0.18	0.038, 0.82
Overnight hospital stay (90 days)	0.11	0.01, 0.09
Unprotected sex (90 days)	0.045	0.004, 0.52



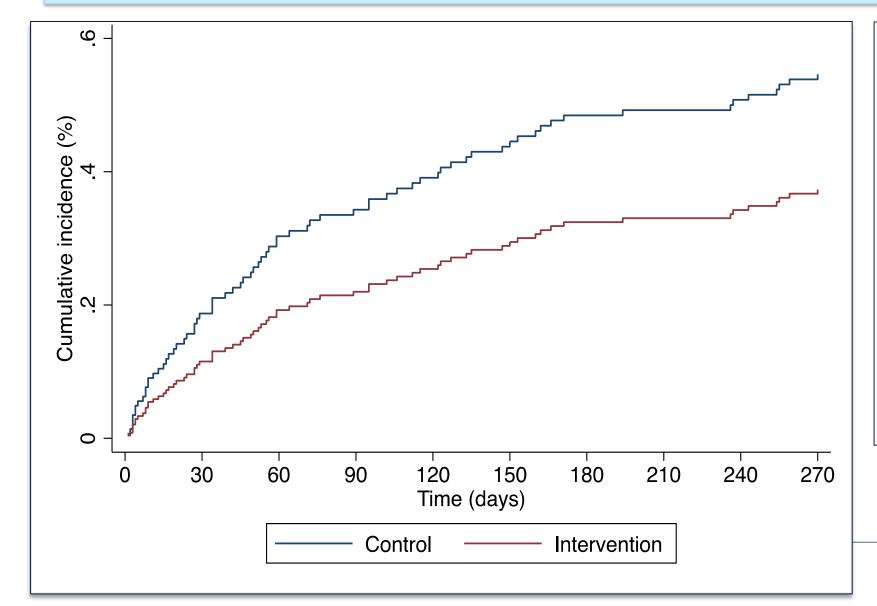
## Improved Heart Failure Quality of Life







## Lower risk of all-cause hospital re-admission



Hazard ratio 30 days:

0.716, 95%CI: 0.319, 1.603 (p value= 0.417)

Hazard ratio 60 days:

0.496, 95% CI: 0.267, 0.976) (p value = 0.042)

Hazard Ratio 150 days (end of intervention):

0.571, 95%CI: 0.342, 0.954 (p value = 0.032)

Hazard ratio 270 days:

0.668, 95%CI: 0.427, 1.046 (p value = 0.078)

Cox proportional hazard model adjusted for baseline hospitalizations





## Some future directions

- Implementation science studies to understand design, delivery, implementation, and uptake
- Promoting meaningful community leadership in Food-is-Medicine research and policy making
- Leveraging secondary data to reduce data collection burden
- Culture- and human-centered Food-is-Medicine interventions
- Integrating Food-is-Medicine with initiatives addressing
  - Other social determinants of health
  - Community development
  - Sustainable food systems





# Food = Medicine Pilot: Perceived Impacts (Diabetes)

- <u>DM health</u>: "The diabetes changed, the numbers. The number because if you eat that kind of food every day, like I did it, the number changes a lot. A lot. A lot...The sugar is more low...Before the program I tested sometimes 200, 220...Over here it go down [to] 130."
- Nutrition: "But I'm realizing I'm buying more vegetables and stuff now than I did before the program. ... The program had an effect on the fact of my buying vegetables... I realized that you got to have them... Vegetables are really vital for your health. They really are."



# Food = Medicine Pilot: Perceived Impacts (Diabetes)

- Mental Health: "You stress about some food. You don't have no money, and get caught...Now I feel more better...I get my food. My food is right there when I hungry. I don't have to be stressing."
- Health-behaviors: "I was able to eat something rather than put it off to take the medicine...Before I missed a lot of medicine...some medicine you need to eat before and...now I can just take some portion of my plate and heat it up to take my medicine."



