### Oral Abstracts

## Oral Abstract 1 - African Food Pyramid (Sara Baer-Sinnott, USA)

#### Health Through Heritage: Using Cultural Roots To Empower and Improve Health

Oldways is well known for the Mediterranean Diet Pyramid, developed in 1993 by a scientific committee, and with the Harvard School of Public Health. Oldways also developed four other cultural models for healthy eating – the Asian Diet Pyramid (1995); Latin American Diet Pyramid (1996); Vegetarian and Vegan Diet Pyramid (1997 and 2013); and an African Heritage Diet Pyramid, introduced in 2011.

To put the African Heritage Diet Pyramid into practice, in 2013, Oldways created "A Taste of African Heritage" – an innovative program that combines cultural history, nutrition education, and cooking lessons to empower and improve the well-being of African Americans by connecting them to the whole, plant-based foods of their ancestors. Led by volunteer teachers, "A Taste of African Heritage" has taken place in over 100 communities nationwide, and is growing steadily. Oldways' next series, "A Taste of Latin American Heritage" is set to pilot in 2016.

This presentation will discuss the African Heritage Diet Pyramid and the benefits and successes of a culturally-inspired, grassroots approach to nutrition education. It will demonstrate how culturally-relevant evidence-based nutrition and cooking information can be utilized as an effective tool for improving public health.

# Oral Abstract 2 - The effect of a vegetarian vs. conventional hypocaloric diet on serum concentrations of persistent organic pollutants in patients with type 2 diabetes

#### (Hana Kahleová, Czech Republic)

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**Objective:** Emerging evidence suggests that environmental factors described as persistent organic pollutants (POPs) are involved in the development of type 2 diabetes (T2D). POPs may be present especially in fatty fish, fish and seafood, meat and dairy products. The aim of this study was to explore the effect of a vegetarian vs. conventional diet on serum levels of POPs in T2D patients after 12 weeks of a dietary intervention.

**Methods:** 74 subjects with T2D were randomly assigned to either follow a vegetarian diet without fish or meat (n=37) or a control group who followed an isocaloric conventional diabetic diet (n=37). Both diets were calorie restricted (-500 kcal/day). To measure insulin sensitivity, the hyperinsulinemic (1 mU.kg<sup>-1</sup>.min<sup>-1</sup>) isoglycemic clamp was conducted. β-cell function was assessed using a mathematical model after a test meal. Magnetic resonance imaging of the abdomen was performed to measure the amount of visceral fat. We measured serum levels of 44 POPs. Dioxins and dioxin-like POPs were

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