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Nutrition In College Health:
Case Studies in Treatment

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#### NUTRITION IN COLLEGE HEALTH

- Describe nutrition related diagnosis that typically present to college health services and the range of services that are required for treatment
   Describe creative approaches to medical
- Describe creative approaches to medical nutrition therapy used to develop a plan of care for nutrition related diagnosis and disease
- Describe case studies of nutrition related disease with use of medical nutrition therapy for treatment

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#### THE STUDENTS

- · Brianne: undergraduate & living on campus with the meal plan
- Jordan: undergraduate & living off campus with his girlfriend
- · Lacey: graduate student & living off campus with room mate's

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# Slide 11

#### **BRIANNE**

- · Course of treatment
- · Regularity of visits
- Management of 'pre-diabetes', obesity and depression
- Compliance
- Lab data
- Medication changes
- Collaboration with on campus counseling center

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# BRIANNE

- PMH: 'pre-diabetes', obesity, depression, addiction issues
- Medications
- · Concurrently in therapy at on
- campus counseling center
   Sought out treatment for
- nutrition & weight loss
   Previous diet recommendations
  & practices
- Exercise history



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# BRIANNE

- · Nutrition education tools utilized
- 1. Food diary
- 2. Individualized goal setting
- 3. Meal plan
- 4. Recommended books and websites
- 5. Follow up care & frequency of appointments

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#### BRIANNE

- CLOSED CO NOT ENTER
- · Emotional relationship with food
- · Familial intervention
- Lack of insurance coverage for follow up labs
- Poly-pharmacy
- · Substance abuse
- · Depression and anxiety with sleep interruption
- DNK appointments

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#### **JORDAN**

- PMH: pilonidal cysts, depression, osteoporosis, obesity, spondylolysis, spondylolisthesis
- Medications
- · Currently not in therapy
- Sought treatment for nutrition & weight loss concurrent with other medical diagnosis
- Previous diet recommendations & practices
- Exercise history



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#### BRIANNE



- Able to work through emotional relationship with food
- Change of habits to include regular exercise and better eating habits
- · Realization of short term weight loss goal
- Further weight loss beyond short term goal & reestablished long term weight loss goal
- Definitive active stage of change to maintenance stage of change during course of treatment

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#### BRIANNE

- · Recommendations moving forward
  - Nutrition plan
  - Regular exercise
  - Techniques for grocery shopping and preparation of meals independently
  - · Follow up visits with NP/RD and therapist
  - Follow up labs
  - · Medications and prescriptions
  - All of above available on campus while student continues undergraduate education

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#### JORDAN

- · Course of treatment
- Regularity of visits
- Management of vitamin D deficiency, obesity and depression
- Compliance
- Lab data
- · Medication changes
- · Collaboration with off campus endocrinology

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#### **JORDAN**

- · Nutrition education tools utilized
  - 1. Food diary
  - · 2. Individualized goal setting
  - 3. Meal plan
  - · 4.Recommended books and websites
  - 5. Follow up care & frequency of appointments

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#### **JORDAN**

- · Recommendations moving forward
  - Nutrition plan
  - Regular exercise in congruence with PT relationship
  - Techniques for grocery shopping and preparation of meals independently
  - Follow up visits with new primary care provider and therapist
  - · Follow up labs
  - · Medications and prescriptions

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# JORDAN

- · Emotional relationship with food
- Depression
- · Multiple new medical diagnosis
- Concurrent ongoing medical issues
- DNK appointments
- Unable to establish habitual regular exercise program
- Unable to move from contemplation and preparation stages of change to action and maintenance stages of

# Slide 23

# LACEY



- Medications
- Currently not in therapy
- Sought treatment initially for medication refills, rash and new onset of insomnia
- •Previous diet recommendations & practices
- •Exercise history •PMH: MDD, tobacco,

# Slide 21

#### JORDAN



- · Began to work through emotional relationship with
- · Minor new healthy nutrition habits
- Recognition of realistic weight loss goal for short and long term
- Continued care with established endocrinology for new medical diagnosis
- · Addition of geneticist to medical treatment team

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#### LACEY

- · Course of treatment
- · Regularity of visits
- Management of ongoing diagnosis of insomnia and depression
- Management of new diagnosis of NIDDM, PCOS, acanthosis nigrans
- · Acknowledgement of obesity & need for weight loss
- Compliance
- Lab data
- · Medication changes

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#### **LACEY**



- · Began keeping a food diary
- · Maintained medication for insomnia and depression
- · Began Metformin
- · Followed up once for fasting labs 3 months after beginning Metformin

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#### LACEY

- · Nutrition education tools utilized
  - 1. Food diary
  - 2. Individualized goal setting
  - 3. NO Meal plan
  - 4. Recommended books and websites
  - 5. Follow up care & frequency of appointments

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#### **LACEY**

- · Recommendations moving forward
- · Nutrition recommendations
- · Regular exercise
- · Follow up visits with referred new primary care provider
- · Follow up labs
- · Medications and prescriptions

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#### **LACEY**



- · Emotional relationship with food
- Depression, insomnia
- · Multiple new medical diagnosis
- · Concurrent ongoing medical issues
- DNK appointments
- Unable to establish habitual regular exercise program
   Unable to move from pre-contemplation to contemplation & preparation stages of change

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# RESOURCES

www.choosemyplate.gov http://nurse-practitioners-and-

http://luise-practitoriers-arid-physician-assistants.advanceweb.com/ Editorial/Content/Archives.aspx? CTIID=3952&int=3 www.eatright.org

http://www.health.gov/ dietaryguidelines/dga2010/ DietaryGuidelines2010.pdf

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