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For "Higher-Health" Think "Lower Glycemic"

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The holidays are rapidly approaching and with them the opportunity to consume lots of delicious food and drink at family gatherings and other social events. One way to help maintain a healthy lifestyle during the holidays is to eat foods with a "low-glycemic index".

The glycemic index was first developed in 1981 as a new method of classifying foods based on the measurement of how dietary carbohydrates effect blood sugar responses after eating. "High-glycemic index" products, like white bread, have carbohydrates that are rapidly digested and absorbed, thus causing sharp increases in blood sugar levels. "Low-glycemic index" products, like soy protein, have carbohydrates that are slowly digested and absorbed, thus producing minimal rises in blood sugar and insulin levels. The glycemic index was later expanded to include the concept of "glycemic load", which accounts for the amount of carbohydrates in a serving in order to better understand the impact of a meal or snack on blood sugars and thus improve diet planning.

Why is the glycemic index or load of foods important? Scientific research suggests that high glycemic diets may increase the risk for cardiovascular disease and type 2 diabetes. In contrast, low glycemic diets have been shown to improve blood sugar control and aid in weight loss, and reduce some cardiovascular disease risk factors.

Soy foods generally have a low to moderate glycemic index or glycemic load. The low glycemic quality of soy foods appears to be an additional benefit of soy for human health and suggests that soy foods are an appropriate part of diet plans intended to improve control over blood sugar and insulin levels.

Selecting a Primary Care Physician

By Craig M. Wax, DO

A primary care physician can be a D.O. or an M.D. This type of physician may be family medicine, internal medicine or pediatrics. Family physicians see most patients from infancy to adulthood. The age range may vary by practice or physician. Internal medicine physicians usually see adults from the age of 18 and up. Pediatricians see infants from birth to 18 years old. There are a few differences in training to consider in making your best choice.

Family physicians may see patients from birth on. Their training includes pediatric and internal medicine and some routine gynecology. It is more geared toward outpatient care than inpatient care. They are a one-stop shop for most family medicine needs. They provide acute care for sudden illness and chronic care for ongoing problems. In addition, family physicians provide routine wellness care and yearly health assessment physicals. These comprehensive examinations may include tests to determine any existing risk factors for disease to develop. Their primary focus and basis is outpatient medicine, although some do hospital inpatient care on a regular basis. This varies by physician and practice.

Internal medicine physicians usually see patients from the age of 18 years old. They may do outpatient and inpatient medicine. Their training is more geared toward inpatient that outpatient care. They do acute care for sudden illness and chronic care for ongoing problems. They can also provide routines wellness examinations and discuss risks for diseases to develop. Some internal medicine physicians only do hospital medicine and may serve as, "hospitalists," for other outpatient physicians.

Pediatricians see infants from birth to 18 years old. They learn both outpatient medicine and inpatient medicine. Some practices are devoted to outpatient medicine and some to inpatient medicine and some to both. They provide acute and chronic care of problems. They provide comprehensive infant and child wellness care. This includes an approach to childhood immunizations for the prevention of disease. They stress routing follow-up for preventive visits.

Primary care physicians serve as your initial point of contact in the health care system. They also act as your "quarterback" in the "football game" of your care. They can initially listen to you, examine you, ask questions of you and synthesize a diagnosis for you. If the diagnosis is not clear, they may refer you to a specialist in the body system field that is relevant. For example, if you seem to be having a heart problem, they may refer you to a cardiologist.

Each health care provider maintains a level of training and may have a board certification. After graduation from the program, a provider in practice usually has to maintain continuing education credits. For physicians, they call these continuing medical education (CME) credits. To keep their license, they must pursue a preset number of hours per cycle.

Board certification is also an option in many health care provider fields. Let us again use physicians as an example. Each specialty national group, or "college," offers a board certification. This checks that the physician has maintained the required hours of ongoing education. Also, they require the physician to complete a written and/or practical test to retain certification. Older physicians certified prior to the 1990's may have certifications that do not require renewal and testing. All new physicians who enter specialty colleges must complete continuing medical education and take interval exams to maintain board certification.

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