

10 Things to Ask a Nutritionist Before Hiring

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WHICH FOODS ARE CARBS? The definition of carbohydrates is complicated, boring, and probably not something you'd want to learn. But a prospective nutritionist should know that carbs include vegetables and fruits, as well as foods most people call carbs – good and bad. (Those include breads, pasta, cereals, potatoes, sweet potatoes, lentils, beans, quinoa, squash, rice, turnips, parsnips and other root vegetables.) For clarity, I call them starches.

DO YOU RECOMMEND LOW-CARB DIETS? WHY OR WHY NOT? How low do you mean? Paleo diets are popular, but not always a good idea. Low-carb may make a poor training diet. Hard workouts demand healthful starches. Refueling with starch plus protein after a tough training helps replace glycogen, critical after a workout. Extremely low-carb diets can even trigger cardiac arrhythmias in some people. Appetite control is easier with a food plan that includes healthful starches. This has to do with brain chemistry. And if you're not eating starches, you may crave sugar and/or alcohol.

IS WEIGHT LOSS JUST CALORIES IN/CALORIES OUT? The ideal answer is calories do make a difference but are absolutely not the whole story. Hormones – insulin is one key hormone in this – influence weight gain, the 24-hour fat oxidation rate, and more. **What** you eat influences weight, not just how much.

WILL YOU WORK WITH MY LIFESTYLE / FREQUENT TRAVEL / DOCTOR'S RECOMMENDATIONS? The ideal answer is “yes.” No food plan should be too strict to modify for these factors. You may need to be willing to prepare – say, in advance of your travel dates. But the plan should allow for your individual needs, and the nutritionist should have suggestions.

WHAT SHOULD I EAT AFTER A WORKOUT? The best answer is starch and protein in a 3:1 ratio. The 3:1 can be easily calculated using calories or grams, since carbs and protein both yield 4 calories per gram. You need to eat no later than 30 minutes following your training. That may mean eating in the locker room and bringing appropriate foods with you. Avoid fats in that 30-minute window because they'll slow the absorption of carbs. Your nutritionist should know **all** of this, and **why** the 30-minute window is critical.

I SOMETIMES HAVE MOOD SWINGS (OR FEEL DEPRESSED). CAN FOODS CHANGE MY MOODS? Let's assume you've talked to your doctor about your moods and received a qualified medical opinion about what you need. The answer to this question is definitely yes: foods can change your moods. A vague answer about eating well and feeling better as you become healthier is not helpful. Foods affect moods because they change brain chemistry. If the nutritionist can't explain the exact changes diet makes – and if moods are an issue for you – you may need one who understands that.

WILL I EVER GET RID OF MY SUGAR CRAVINGS? The answer to this should be yes. A nutritionist who talks about “curbing” cravings or tells you everyone has them might not be ideal for you. If he/she suggests eating a little of what you crave or substituting fruit, that’s also a red flag.

SHOULD I ELIMINATE ANY FOODS OR FOOD GROUPS? WHY OR WHY NOT? If the nutritionist suggests eliminating carbs, or fats, those diets may not work for many reasons. But if she/he recommends eliminating junk – such as white flour or sugar – that’s good.

I HATE VEGETABLES AND ALWAYS HAVE. DO I REALLY NEED THEM, OR CAN I JUST EAT MORE FRUIT? Vegetables and fruits are not equal. Fruits have nutrients but are no substitute for veggies. The nutritionist should know that hating vegetables often indicates a high-sugar diet. The ideal first step is to check that, then check your family history for factors that may make you carb-sensitive, sugar-sensitive, or both. Next would be a plan that can change things, so vegetables no longer seem unpalatable.

I’VE HEARD OF STOMACH HUNGER AND MOUTH HUNGER. WHAT’S THE DIFFERENCE? These terms are typically used to distinguish real hunger from appetite. But they confuse people. Ask someone if she ate because of stomach hunger or mouth hunger, and she’ll say, “I’m not sure.” I describe hunger to be sure a client can recognize and feel it. I use “hunger” for real physical hunger – signals the body sends that it needs food. Any other reason is an urge or desire to eat. It’s less confusing that way.

ARE YOU READY TO MAKE A LASTING CHANGE?

Schedule your free Eating Empowerment Consult with Dr. Joan Kent, Ph.D. now!

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