Meet Our New Extension Educator!

Hello, my name is Bridget Morrisroe-Aman and I am the new Family and Consumer Sciences (FCS) Extension Educator in the Ada County Extension office.

I grew up in the Boise bench neighborhood and graduated from Borah High (Go Lions!) and Boise State University (Go Broncos!). I also have a child studying Textiles and Design in the FCS department at the University of Idaho (Go Vandals!).

I received a Bachelor and Master of Social Work from BSU and have worked in UI Extension programs for the past 15 years—five years as a UI CYFAR program coordinator and 11 years with the Extension Nutrition Program and Eat Smart Idaho as a district program coordinator. Although I enjoyed those years working in Canyon and Owyhee counties, I am very excited to be back to my roots in Ada County. In my leisure time I enjoy spending time with my family, cooking, baking, watching movies, and being active outdoors.

In my new position will be focused on food safety, health, and nutrition. Over the years I have made broad connections with many health-related agencies and organizations throughout the Treasure Valley that will enhance my Food and Nutrition Extension programs. I have also worked with many individuals, families, and communities to support and encourage healthy living. I am passionate about creating healthy communities and promoting healthy lifestyles!

Our Advanced Master Food Safety program began this month and the first-year food safety certification program will start in April. I will be co-leading, teaching, and assisting in both programs as part of our district food safety team. I also plan to target prediabetes, a topic featured in this newsletter, and begin a diabetes prevention class in Ada County this year.

I hope the information in this newsletter will help you “Spring Forward” with new ideas. I look forward to meeting you!

Bridget Morrisroe-Aman
Ada County Extension Educator
Spring Forward with Fruits and Vegetables

BALSAMIC ROASTED BRUSSELS SPROUTS & CARROTS

Ingredients:
- 2 tablespoons balsamic vinegar
- 1 tablespoon olive oil
- 1 tablespoon maple syrup or honey (Optional to add sweetness)
- 2 cloves garlic, minced
- ⅛ teaspoon dried thyme
- ⅛ pounds Brussels sprouts, halved
- 6 carrots cut diagonally in 1½-inch-thick slices
- Salt and freshly ground black pepper, to taste
- ¼ cup dried cranberries (Optional)
- 2 tablespoons chopped fresh parsley leaves

Directions:
Preheat oven to 400°F. Lightly oil a baking sheet or coat with nonstick spray. In a small bowl, whisk together balsamic vinegar, olive oil, maple syrup, garlic, and thyme; set aside. Place Brussels sprouts and carrots onto the prepared baking sheet in a single layer. Stir in balsamic vinegar mixture; season with salt and pepper, to taste. Place into oven and bake until browned and tender, about 20-25 minutes. Serve immediately with cranberries, garnished with parsley, if desired.

Nutrition Facts: Calories 124.9, Total Fat 2.9g, Saturated Fat 0.4g, Total Carbohydrate 23.7g, Dietary Fiber 6.5g, Sugars 11.4g, Protein 4.5g. Yield: 6 servings

STRAWBERRIES FILLED WITH CHEESECAKE

Craving cheesecake but not the calories?

Ingredients:
- 1 lb. fresh strawberries (About 16 large strawberries)
- 4 oz. ⅓ low-fat cream cheese, softened
- ¼ cup powdered sugar
- ¼ teaspoon vanilla extract
- 1 full sized low-fat graham cracker (One sheet of four little rectangles), crushed

Directions:
- Cut off the green tops of each strawberry and discard. Using a paring knife, hollow out each strawberry, removing the white interior.
- In a mixing bowl, combine the cream cheese, powdered sugar and vanilla extract and beat with an electric mixer until thoroughly combined. At this point you can either transfer the cream cheese mixture into a piping bag and pipe it into each berry, or just fill each berry using a butter knife.
- Dip each strawberry, cheesecake side down, into the graham cracker crumbs, coating the top.

Note: These taste best the day they are made, so if you are not planning to serve/eat them all in one day, make the cream cheese filling and store it in refrigerator. Then crush up the graham crackers and store in sealed container. Hollow out the number of strawberries you plan to eat immediately and stuff with filling.

Nutrition Facts: 35 calories, 5 g carbs, 3 g sugars, 2 g fat, 1 g saturated fat, 1 g protein, 0 g fiber. Yield: 16 strawberries

Because You Asked:

Q. How can I be sure the flour I buy is really whole wheat?

A. Whole wheat flours are readily available and, in most cases, can be easily identified by words on the front of the package or ingredient list. When you see “traditional whole wheat flour,” “100% whole wheat flour,” or “white whole wheat flour” this indicates that it is whole wheat flour. Whereas the lack of the words “whole wheat” or descriptions such as “enriched white flour” or “all-purpose flour” point towards refined white flour (whole wheat flour that has been milled to remove the nutrient-rich outer bran and inner germ layers).

Shoppers can be confused as to whether “white whole wheat flour” is, in fact, whole wheat flour. Its white appearance makes it look like a refined flour; this is because it is made from a variety of wheat whose outer bran is lighter in color. Take a look at the first ingredient on the package; it should clearly state “white whole wheat flour.”

Source: Adapted from Tufts Health & Nutrition Newsletter, August 2016

Q. Is the Daily Value (DV%) for elemental calcium or is it calcium in combination with other things (i.e. calcium lactate or calcium citrate)?

Which of these is best?

A. Nutrition Facts panels and Supplement Facts panels found on packaging provide the content of elemental calcium on their labeling. This means that all of the calculations have been completed and you need only to look at the number of milligrams of calcium provided in each food or supplement to determine the amount you are receiving. (The DV percentages used on these labels are based on 1,000 milligrams of elemental calcium which may or may not represent the amount you need, based on your age and gender.)

Calcium carbonate is the most affordable option, but it can cause stomach and gastrointestinal irritation, so it may need to be taken with food. Calcium lactate and calcium citrate cause less irritation and can be taken with or without food. If you are supplementing a majority of your calcium needs, it may be beneficial to spread your supplement intake throughout the day to maximize absorption and minimize any side effects such as gas or bloating.

Source: Adapted from Tufts Health & Nutrition Newsletter, August 2016
Prediabetes—
the Path to Diabetes

One out of three U.S. adults have prediabetes. Nine out of 10 of them don’t know it. A healthy diet and exercise can cut their risk of diabetes in half—and that’s for people whose risk is already high. “We could prevent about 90% of type 2 diabetes in the U.S. if we could keep everyone at low risk,” says Walter Willett, of the Harvard T.H. Chan School of Public Health. Without intervention of a diabetes prevention program, which helps people with prediabetes dodge the disease by changing what they eat and how much they move, 15-30% of people with prediabetes will end up with diabetes within 5 years. Many insurance companies cover these prevention programs because preventing diabetes is far cheaper than treating it.

What leads to type 2 diabetes? The trigger seems to be insulin resistance (or insulin insensitivity). Insulin acts as a key that allows blood sugar to enter cells, where it can be burned for fuel or stored for later. But in some people, especially those who are overweight, the key can’t open the lock. To compensate for that insulin resistance, the pancreas pumps out more and more insulin. If it’s not quite enough, blood sugar creeps up to “prediabetes” levels. “After years of stress on the pancreas to produce more insulin, the pancreatic cells deteriorate and can’t keep up with the demand,” says Willett. That’s when blood sugar reaches the “diabetes” range.

The good news is that you can cut your risk of diabetes quickly. If you make a change in your diet or lifestyle today, you’re taking your foot off the accelerator—and that happens almost overnight. If you exercise today, your insulin resistance goes down within hours and if you keep up the daily exercise, within a day or two your risk of diabetes drops. Changing your diet might take longer to make a difference, but it’s a matter of weeks, not years. “Even if you’re right at the brink of diabetes, you can still rapidly reduce your risk,” says Willett. Also, research suggests that there’s a legacy effect, so that when you lose weight, even if you regain it, there’s a positive long-term impact of that period of weight loss.

Here is some information to help you avoid type 2 diabetes:

- **Unhealthy Carbs.** Cut back on unhealthy carbohydrates—basically white flour and other refined starch, sugar, and potatoes.

- **Sugar drinks.** There’s about a 25% increase in the risk of diabetes for each 12 oz. serving of sugar-sweetened beverages per day. And only about half of that increased risk is due to weight gain. “It’s probably due to the high amount of unhealthy carbohydrate that is gulped down in a few minutes,” states Willett.

- **Meat.** Both processed and unprocessed red meat are related to a higher risk of type 2 diabetes. Replace red meat with some beans, nuts or other plant sources of protein, or some dairy, poultry, or fish.

- **Dairy.** More studies are needed, but so far it looks like yogurt—but not overall dairy—seems to reduce the risk of type 2 diabetes.

- **Coffee.** In Willett’s studies, each daily cup of coffee was linked to a 4-8% lower risk of diabetes. This is likely due to the flavonoids and antioxidants in coffee, because decaffeinated seems to have a similar benefit.

- **Magnesium.** People who consume more magnesium-rich foods—such as leafy greens, beans, nuts, and whole grains—have a lower risk of progressing from prediabetes to diabetes, although other things may also account for their lower risk.

- **Vitamin D.** People with low vitamin D levels have a higher risk of diabetes. But so far, most studies that give vitamin D or a placebo to people with prediabetes have come up empty.

- **Selenium.** People over age 62 who were given selenium supplements (200 mcg a day) for roughly three years were twice as likely to get type 2 diabetes as those who got a placebo. Stick to a multivitamin with no more than about 100mcg.

- **Exercise.** Aim for at least 30 minutes of brisk walking or other aerobic exercise daily and avoid sitting for long periods.

- **Diabetes Prevention Programs:** If you have prediabetes, find a CDC-recognized in-person or online program near you. Go to: cdc.gov/diabetes/prevention.

Source: Nutrition Action Healthletter, Jan/Feb 2017
Get Some Protein at Every Meal
Adapted from Idaho Statesman article by SeAnne Safaii-Waite

What did you have for breakfast this morning? Did it include a significant amount of protein?

Protein is more important in our diets as we grow older. Although our need for calories and some other nutrients declines as we age, this is not the case for protein. In fact, just the opposite is true. Older adults may benefit from proportionally more protein in their diets — evenly distributed across the day — for muscle health.

World-renowned protein expert Douglas Paddon-Jones was in Boise speaking at several events last year. He is a professor of nutrition and metabolism at the University of Texas Medical Branch and a fellow of the American College of Sports Medicine and shared the following information on protein in our diet.

Previously, it was believed that high-protein intake resulted in bone loss, strained the kidneys and was especially risky for older people. But the truth is that the higher intakes are only hazardous for people already suffering from some type of kidney function impairment. (Dietitians usually recommend that 10 to 20 percent of a healthy diet be made up of protein. That’s about 60 to 100 grams of protein daily.)

As we age we progressively lose muscle, and it is difficult but certainly not impossible, to build new muscle. This muscle loss is called sarcopenia. After about age 50, we lose 0.5 to 2 percent of total muscle mass each year. This loss can begin at even younger ages if low protein intake is paired with inactivity. Research demonstrates that consuming moderate amounts of protein throughout the day and increasing physical activity can help prevent or reduce the effects of sarcopenia.

Get protein throughout the day. Once you consume a meal with four to five ounces of high-quality protein (about 30 grams or the size of a deck of cards) your protein tank is full. You will be close to maxing out your muscle-building potential for that three-hour to four-hour period. Eating too much protein (and taking in too many calories), will cause your body to turn the excess protein into carbohydrates and ultimately fat.

Most of us don’t eat enough protein for breakfast and eat too much for dinner, leading to inefficiency. Instead, distributing protein intake throughout the day at all three meals will maximize the use of amino acids for building muscle.

Add high-quality protein to your daily intake. Animal sources offer your diet the highest quality of protein and generally provide the most leucine, an essential amino acid that is a key to the synthesis of muscle tissue. Whey protein from dairy products has been found to be especially high in this amino acid. Foods like eggs, milk, and yogurt are examples of high-quality protein sources that are easy to add to the diet, even for older people who have problems chewing and swallowing.

What if you don’t eat meat? A plant-based diet can be very healthy and it’s possible to achieve the higher recommended protein intake, although it requires much more planning, forethought, and a greater total amount of food. If you’re not a vegan, dairy and eggs are still excellent options, and if you are vegan, seek out a combination of protein sources such as soy products, lentils, beans, nuts and seeds.

### HIGH-PROTEIN FOODS

<table>
<thead>
<tr>
<th>Food</th>
<th>Grams of Protein</th>
<th>Serving Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eggs</td>
<td>8 grams</td>
<td>1 whole</td>
</tr>
<tr>
<td>Cottage Cheese</td>
<td>12 grams</td>
<td>½ cup</td>
</tr>
<tr>
<td>Greek Yogurt</td>
<td>10-12 grams</td>
<td>6 oz.</td>
</tr>
<tr>
<td>Cheese</td>
<td>9 grams</td>
<td>1 oz.</td>
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<tr>
<td>Meat</td>
<td>21 grams</td>
<td>3 oz.</td>
</tr>
<tr>
<td>Fish</td>
<td>22 grams</td>
<td>3 oz.</td>
</tr>
<tr>
<td>Poultry</td>
<td>23 grams</td>
<td>3 oz.</td>
</tr>
<tr>
<td><em>Nuts</em></td>
<td>9 grams</td>
<td>1 oz.</td>
</tr>
<tr>
<td><em>Tofu</em></td>
<td>10 grams</td>
<td>½ cup</td>
</tr>
<tr>
<td><em>Beans</em></td>
<td>11 grams</td>
<td>1 cup</td>
</tr>
<tr>
<td><em>Tempeh</em></td>
<td>15 grams</td>
<td>½ cup</td>
</tr>
</tbody>
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*Plant-based proteins such as grains, legumes, nuts and seeds are incomplete protein—they provide insufficient amounts of essential amino acid. They must be combined with other sources of amino acids to make complete proteins. Therefore larger serving sizes may be necessary.

Paddon-Jones cautions that when you increase protein intake, you should reduce the amount of simple carbohydrates (i.e. sugar) to keep your calorie intake the same. Redistribute your protein to breakfast, and steer away from jam and toast for breakfast. If you are a diehard tea-and-toast lover, try some peanut butter on the toast and some milk in the tea!

Obessing over the exact proportion of protein in the diet is unnecessary; balancing the distribution is the key.

SeAnne Safaii, Ph.D., R.D., L.D., is an assistant professor at the University of Idaho Dietetics Program and a past president of the Idaho Academy of Nutrition and Dietetics.