

## Culinary Counselling in Chronic Care: The Pentad of Cs & Ps

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### Abstract

Diet and nutrition are an integral part of chronic metabolic disease management. Medical nutrition therapy (MNT) providers focus upon caloric and nutrient adequacy, but do not necessarily incorporate person-friendly recipes in their ambit. In this communication, we share a simple framework of culinary counseling. This supplements MNT, and enhances its value by encouraging adherence and persistence to prescribed therapy.

**Keywords:** Culinary medicine, diabetes, diet, medical nutrition therapy, metabolic syndrome, obesity, overweight, person centred care.

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### Introduction

Medical nutrition therapy (MNT) is the cornerstone of chronic metabolic disease management.<sup>1</sup> MNT forms the basis of treatment of diabetes, dyslipidaemia, hypertension and obesity, among others. Conventionally, MNT tries to assure a balanced distribution of macro-and micro-nutrients, along with optimized caloric intake. In recent years, a person-centred approach to MNT has been advocated.<sup>2</sup> This calls for individualisation of targets and techniques to optimize dietary advice. The role of culinary medicine, too, has been highlighted in medical literature.<sup>3</sup> However, it may be challenging for physicians, trained in a conventional curriculum, to incorporate culinary advice in to their routine MNT counseling. We hereby share an alliterative Pentad of Cs and Ps which simplifies the concept of culinary medicine, and offers a user-friendly interface for conversation and counselling.

### The pentad of Cs and Ps

Table lists the 5 components of culinary counseling, in a step wise manner. To make it self-explanatory, we have added a few do's and don'ts, with relevance to a population

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**Table:** Culinary counselling: the pentad of Ps and Cs.

Domain	Do's	Don'ts
Procurement (Collection)	<ul style="list-style-type: none"> <li>Buy fresh food</li> <li>Buy seasonal vegetables/fruits</li> </ul>	<ul style="list-style-type: none"> <li>Don't buy unnecessarily expensive food</li> <li>Don't buy foods in excessive quality</li> </ul>
Preparation (Cooking)	<ul style="list-style-type: none"> <li>Prefer steaming, braising, boiling</li> <li>Use energy-efficient utensils</li> </ul>	<ul style="list-style-type: none"> <li>Don't use excessive cooking oil/ghee</li> <li>Don't overcook or heat food</li> </ul>
Plating/ presentation (Curating)	<ul style="list-style-type: none"> <li>Do use limited portion sizes</li> <li>Display protein-rich food in the centre of the plate</li> </ul>	<ul style="list-style-type: none"> <li>Don't clutter the plate</li> <li>Don't present energy-dense foods (sweets, starch) before satiety-promoting foods (soups, salads)</li> </ul>
Preservation (Conservation)	<ul style="list-style-type: none"> <li>Preserve food only if necessary</li> <li>Ensure correct temperature for storage</li> </ul>	<ul style="list-style-type: none"> <li>Don't let the sun go down twice on cooked food</li> <li>Don't freeze and thaw repeatedly</li> </ul>
Purification (Cleaning up/ disposal)	<ul style="list-style-type: none"> <li>Keep the kitchen and dining area clean</li> <li>Dispose of left-overs as per local guidelines</li> </ul>	<ul style="list-style-type: none"> <li>Don't keep fresh and left-over food in the same utensil</li> <li>Don't mix clean and dirty utensils</li> </ul>

living with diabetes &/or obesity. This table is not expected to replace traditional diet prescriptions, but rather, to supplement them. The Pentad of Cs and Ps offers a pragmatic way of cooking and consuming health food, in a user-friendly manner. It facilitates involvement of the family in diabetes care, and encourages the concept of glycaemic happiness or glycaemic bliss, through culinary happiness.<sup>4</sup> by explaining how the process of MNT can make all involved persons happy.

### Summary

The culinary counseling pentad is a simple, yet useful tool to assist in delivery of MNT, in an effective person-friendly manner. While it is comprehensive, it can be used across different south Asian countries where home based cooking and food eating practices are very prevalent. We suggest that this be incorporated by all MNT providers in their counselling.

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