



## DIABETES

### For Lower Risk of Diabetes, Don't Eat So Fast

In the race to identify modifiable risk factors for type 2 diabetes, researchers from the Lithuanian University of Health Sciences in Kaunas, Lithuania, conducted a study that revealed a possible relationship between eating speed and the risk of developing this disease.

The study involved 234 patient cases with newly diagnosed type 2 diabetes and 468 control subjects without diabetes. Participants fasted for 12 hours and avoided both smoking and heavy physical activity for at least 2 hours before physical examinations. They were asked to report how fast they ate, compared with other people eating at the same table:

very slowly, relatively slower, the same as other subjects, relatively faster, or very fast. Those who answered "very slowly" and "relatively slower" were put in one group (60 cases and 191 controls); those who answered "relatively faster" and "very fast" were in a second group (130 cases and 174 controls); and those who answered "the same" were in a third group (44 cases and 103 controls). After adjusting for family history of diabetes, body mass index, waist circumference, educational level, morning exercise, cigarette smoking, and plasma triglycerides level, the researchers found that eating faster more than doubled the risk of type 2 diabetes.

Gorging and eating quickly have been associated with total energy intake, while eating quickly and binge eating have been associated with sa-

tiety and insulin resistance. Research has shown that eating a meal for longer than 30 minutes, vs 5 minutes, leads to higher concentrations of anorexigenic gut peptides and favors earlier satiety. When food is eaten too quickly, there may not be enough time for hormones that signal fullness to act. When people don't feel full, they eat more, taking in more calories, which leads to increased body weight and weight gain. And the researchers say, while the pathways from obesity to diabetes are complicated, obesity is a "key correlate" of a cluster of diabetogenic, atherogenic, prothrombotic, and inflammatory metabolic abnormalities that increase the risk of type 2 diabetes. ●

Source: Radzeviciene L, Ostrauskas R. *Clin Nutr*. 2013;32(2):232-235.  
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