Dietary Intake and Risk of Type 2 Diabetes

The data below has some big words associated with it, however, the graphs are fairly straightforward if you know a few things. The quintiles indicate the groupings of people in the study that engage in the behavior a little bit (1st quintile) to the people that engage in the behavior a lot (quintile 5). The data is showing eating behavior and risk of Type 2 Diabetes. So based upon what you see, please answer two of the following questions in your discussion post. Be sure to give the evidence you see that supports your answer.

- Is the risk for diabetes lower or higher for people that eat a lot or fiber?
- Is the risk of diabetes lower or higher for people that eat a lot of trans-fat (like butter or coconut oil on their popcorn)?
- Glycemic load is how much a particular food raises blood sugar. If a food has a high glycemic load, it raises blood sugar a lot. Do people that eat food with high glycemic load have a higher risk of Type 2 Diabetes?

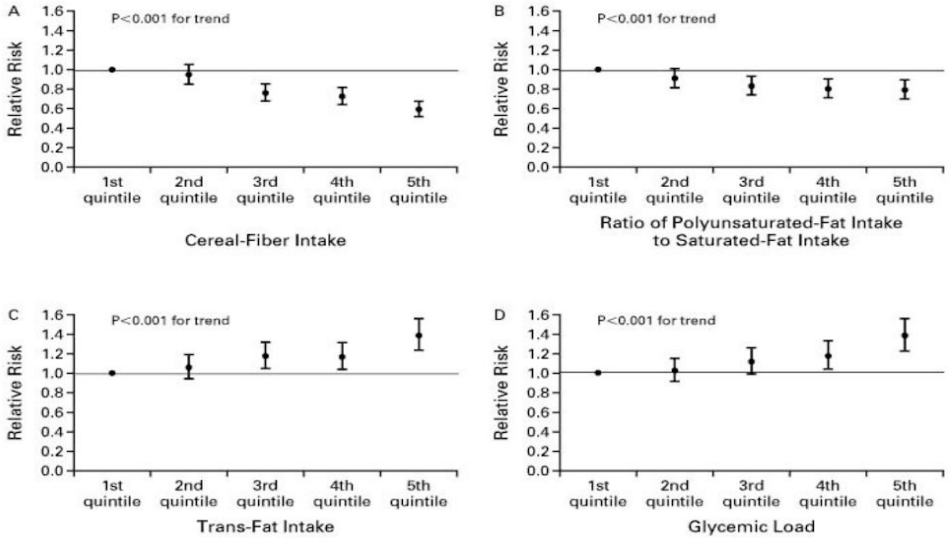

Figure 1. Multivariate Relative Risks (with 95 Percent Confidence Intervals) of Type 2 Diabetes Mellitus According to Ascending Quintiles of Intake of Cereal Fiber (Panel A), the Ratio of Polyunsaturated-Fat Intake to Saturated-Fat Intake (Panel B), Intake of Trans Fat (Panel C), and Glycemic Load (Panel D).

Each of the relative risks was adjusted for the other three dietary variables and for age (in five-year categories), time (eight periods), the presence or absence of a family history of diabetes, menopausal status and the use or nonuse of postmenopausal hormone therapy, smoking status (never smoked; former smoker; current smoker, 1 to 14 cigarettes per day; or current smoker, ≥15 cigarettes per day), body-mass index (<23.0, 23.0 to 24.9, 25.0 to 29.9, 30.0 to 34.9, or ≥35.0), weekly frequency of moderate-to-vigorous exercise (<0.5 hour, 0.5 to 1.9 hours, 2.0 to 3.9 hours, 4.0 to 6.9 hours, or ≥7.0 hours), and daily alcohol consumption (0 g, 0.1 to 5.0 g, 5.1 to 10.0 g, or >10.0 g).