

# NOMIN News

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Meet a members battle with prostate cancer. Also each page features your current Executive Committee member.

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Healthy holiday recipes to prevent the waistline hangover.

## FNCE: Food & Nutrition Conference & Expo

by Chris Taylor, PhD, RD

The 2009 Food & Nutrition Conference & Expo returned to the beautiful city of Denver for the first time since 2000. The weather was beautiful and the docket was full of many learning and networking opportunities from all aspects of dietetics. A predominant theme emerging from the last few FNCE meetings is

ADA's efforts to promote Evidence-Based Practice as a foundation for our professional practice. As a Presiding Officer, I moderated a session on Innovations in Practice and Education, which featured a panel of 7 speakers. During this session, the invited presenters summarized cutting-edge efforts in dietetics education and clinical practice that demonstrated the use of research and innovative approaches to take practice to the next level.

Another fascinating educational opportunity was the session on inflammation and metabolic syndrome in the aging population. Drs Mozaffarian and Sullivan discussed the pro-inflammatory process that occurs naturally during the aging process and how metabolic challenges such as anoxeria during acute bouts of illness can lead to sometimes, irreversible cascades of up-regulated inflammation and compromised nutritional status in otherwise healthy individuals. Even more concerning is the alterations in body weight from fluid shifting and albumin, which makes some of the hallmark nutritional status indicators less reliable. These data represent an exciting aspect for the profession to move beyond our basic screening methods and identify, implement and interpret functional indicators of nutritional status.



Speaker Soledad O'Brien at FNCE 2009

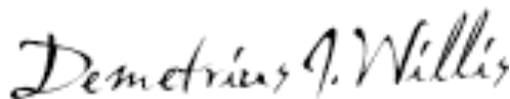
## Letter from the Chair

Your local gymnasium is literally salivating at this time of year. It has become an annual occurrence or perhaps human tradition to gain weight by eating larger portions of meals and increasing fat and sugar consumption starting around October 31st. On January 1st our past and present clients announce their New Year resolutions, which sadly may be the same resolution they have made prior year(s). Your local fitness center has been waiting for these same individuals to sign their contract establishing a permanent relationship for the 2010-2011 year and assuring a regular withdrawal of \$30-\$150 payment from their bank account. We as nutrition professionals know this story because we witness the same script with some of our clients and experience the frustration, failures and success with them on a short-term and long-term basis.

The National Organization of Men in Nutrition (NOMIN) is an organization that aims on enhancing you and your area of practice. We want to ensure success in your clients and break this pattern of "resolutions" to help you establish a lifetime change. In this newsletter we have updates from FNCE, featured a fellow RD who is also a cancer survivor, reviewed the latest medical journals to provide you with up-to-date interventions in Men's Health Issues, technical advances, healthy cooking recipes, NOMIN is adopting and will be showcasing each member of our Executive Board.

Many of you have contacted me and expressed your pride, excitement and expectations for this organization. We greatly appreciate your feedback. We have members in various specialties and with seemingly endless capabilities. We ask those more experienced male ADA members to wear that experience as a badge of honor and allow those less experienced nutrition professionals and students to learn and grow from your experiences. In an effort to maintain effective communication and a professionally nurturing environment, we continually upgrade our website, listserv and spotlight a member of NOMIN in our newsletter. We invite you to visit our website and maintain this cycle of communication that is imperative to every successful relationship. I hope you see NOMIN as an inspiration and motivator to embrace men's health and the diversity of ADA, and know that the National Organization of Men in Nutrition is here to support you as you grow as a professional.

Finally, I would like to wish you and your family a happy and safe holiday season!



Demetrius J. Willis MBA, MS, RD, LD, CPT

NOMIN Chair

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Demetrius J. Willis MBA, MS, RD, LD, CPT  
Chair

A graduate of Louisiana Tech University of Ruston, Louisiana, Demetrius holds a Bachelor of Science in Nutrition and Dietetics with a minor in fitness and wellness, and a Master of Science in Health and Physical Education. In addition, Demetrius has attained a Master of Business Administration from the University of Phoenix. He has successfully been a Certified Personal Trainer for over 4 years. Demetrius is active in both the local and national divisions of the American Dietetic Association. He has received various recommendations, awards, honors and a military commendation as a result of his personal and professional dedication to making a healthier lifestyle a reality for so many people.

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The four days were packed with sessions, exhibits and poster sessions, but the meeting also presents many networking opportunities for attendees. During the DPG/MIG Showcase, Demetrius Willis (NOMIN Chair) manned the NOMIN booth to share our MIG with the attendees. The conversations with program directors about male student enrollment and the potential for mentorship have spurred many agenda items to be tackled by the executive committee. This is an exciting time for the profession, with all of the changes occurring internally as well as in the public policy arena. It is time for us to take part in our future and there are many exciting and rewarding opportunities on the horizon to shape the future of our profession.

*Credits: Pictures taken by Demetrius Willis*



**Chris Taylor, PhD, RD**  
*Treasurer*

**Chris Taylor** earned his BS from Bowling Green State University and then completed an MS and AP4 Program at Arizona State university. He completed his Ph.D. in 2004 in Human Environmental Sciences with an emphasis in nutritional sciences. Dr Taylor is currently an educator and researcher in the Medical Dietetics Division in the School of Allied Medical Professions at The Ohio State University. His research at Ohio State focuses on promoting healthy lifestyles to help prevent chronic disease. In addition to NOMIN, Dr. Taylor is a member of the American Dietetic Association where he serves on the Research Dietetic Practice Group and the Dietetic Educators of Practitioners Dietetic Practice Group. In 2006, he was selected by the National Cancer Institute to participate in the Advanced Training Institute in Health Behavior Theory. In 2005, he was selected by the National Institutes of Health to participate in the Summer Institute on Randomized Clinical Trials Involving Behavioral Interventions and the Dannon Institute's Nutrition Leadership Institute.



## A Cancer Story of Courage and Bravery

Spotlight on:

Wesley Fankhauser, MS, RD, LD

VA Clinical Dietitian

Greenville/Anderson/Spartanburg, SC

Wesleyl.Fankhauser@va.gov

By

Steve J. Roch Jr., RD, LDN, CFT

### **NOMIN: At what age did you first learn that you had cancer and what type were you diagnosed with?**

**Wes:** I first learned I had cancer when I was 56. I was diagnosed with aggressive prostate cancer, which meant that my Prostate Specific Antigen (PSA) score had tripled in a short period of time (one year) and results from my score on the Gleason scale were in a high range.

### **NOMIN: How was it discovered?**

**Wes:** Like many men I was ignorant of the disease prior to being diagnosed. My PSA score was 3.31, but I was not alarmed. The policies at many hospitals do not usually refer patients to a urologist unless they have a PSA score above 4.0 nanograms. I was not referred to a urologist until my PSA score was 9.74 the following year. I felt fine and had no symptoms even then. As it turned out, my PSA had tripled both years. The results of my Gleason score were 8-9 on the scale of 10. An oncologist told me that I needed to undergo vigorous treatment because I had aggressive cancer, with extensive invasion of the seminal vesicles in addition to the prostate.

### **NOMIN: What type of treatment(s) did you undergo?**

**Wes:** At first I made a decision to not undergo the recommended chemotherapy. Instead, I placed a great

emphasis on my eating habits and increased physical activity to fight my battle. I commute to work on my bicycle (9 miles/day) and I use an elliptical machine for 30-60 minutes/day. I was able to delay chemotherapy for four and a half years with hormone therapy and diet and exercise. Inevitably, I did have to undergo a radical prostatectomy followed by maximum radiation had hormone therapy for two years. The surgery left me incontinent like most men, but I was fortunate enough that my surgeon was able to spare nerve endings, which has resulted in few problems with leakage.

### **NOMIN: What intervention did you use to avoid having to undergo chemotherapy for almost five years?**

**Wes:** I reviewed the literature and adjusted my interventions when I obtained more knowledge on the subject. I focus on getting nutrients from basic foods. I avoid heavily fortified cereals and shun heavily fortified soymilk (with 50% of vitamin B12 in 8 oz). I try to eat 4 oz of salmon two-three times/week. I use cruciferous vegetables, onions, and some tomato paste in cooking.

I take only the supplements that I cannot get in a balanced diet. As I get little sun, I now take 2000 IU of vitamin D3/day. I am using more spices and herbs. I sprinkle

about 2 Tbsp turmeric powder with a dash of black pepper on my entrées at all meals. In India, I read that many people there consume huge amounts of turmeric (2 Tbsp to over ½ cup/day). I was taking the turmeric pill with piperine (the major component of black pepper), but it was over fifty cents per pill. I thought it made sense to just add the turmeric to my food like they do in India. I drink 8 oz of pomegranate juice every day, two 8 oz glasses of soymilk/day, and take 100 mcg of vitamin K2 four times per week. I take a 325 mg aspirin/day also.

When I brought up nutrition with my oncologist at MD Anderson in Houston, Texas, she agreed that many nutrients could affect cancer. She told me that the three most promising dietary components for fighting prostate cancer are turmeric with black pepper, vitamin D3, and pomegranate juice. She also suggested modified citrus pectin to help prevent the cancer from spreading to other parts of my body.

### **NOMIN: Did you experience any side effects of your treatment?**

**Wes:** I had no side effects from the radiation, as I knew I had to follow a low residue, low fat diet. A couple of the nasty side effects of hormone therapy were that it prevented me from feelings of intimacy and caused hot flashes. And

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even after I completed the hormone treatment and my testosterone had returned to normal levels, I still experienced hot flashes.

**NOMIN: What advice can you give people who undergo the treatments that you have gone through?**

**Wes:** Read the literature and ask lots of questions of your healthcare team members. Physicians are very busy people. If they know you're spending lots of time researching topics, they will advise you. Unfortunately, many patients who undergo treatment don't go into a provider visit with questions--which results in less than adequate care.

**NOMIN: What was your lifestyle like that may have lead to the etiology of your cancer?**

**Wes:** The following are clues as to how I developed prostate cancer: I am of Swiss heritage. Swiss prostate cancer mortality rates are the highest in the world; I was eating some fortified cereals; I had heartburn, so I avoided spicy foods; I was eating generous amounts of yogurt without vitamin D and drinking skim milk and I was avoiding the sun (to avoid skin cancer).

**NOMIN: How did lifestyle change during your treatment?**

**Wes:** I took two weeks off from my job after surgery during which time I was not able to lift anything. In addition, I could not drive a car for six weeks. Thereafter, my work schedule did not really change from what it was previously. I worked about 50 hours/week during radiation treatment.

**NOMIN: Did you do anything differently during your treatments like changing your diet?**

**Wes:** During radiation, many patients suffer with diarrhea. I did not want to experience the same problems, so I chose to follow a low fat, low residue diet. I was told to avoid fiber rich foods and high fat foods. I did not have any problems because I followed this recommendation strictly.

**NOMIN: What is the status of your prognosis today?**

**Wes:** Because I have aggressive prostate cancer (with my high Gleason score), three oncologists have told me I had a 100% chance of re-occurrence of cancer. Just recently my PSA almost quadrupled in just two months. This skyrocketing PSA is a real danger, even though my PSA score is still below 2. I am now undergoing six months of hormone therapy again and my PSA is now decreasing. I am seeking a clinical trial to stop the cancer before it spreads. I feel lucky that I was able to delay chemotherapy, but I know that I must go forward with this method of treatment eventually. The agents used today are more effective and have fewer side effects that what was used five years ago.

**NOMIN: What do you believe helped you toward to a good prognosis?**

**Wes:** The support of my family and prayer through difficult times. I listen to radio programs such as "Running to Win" and read devotionals with titles such as 'For Courage Not to Give Up', which helped me. It helps to read the stories of other people who have overcome medical trials and other great problems.

**NOMIN: How has this experience changed you life?**

**Wes:** I realize that I cannot take life for granted. When life is good, we don't think about our health. When you are younger, you forget that unexpected problems can develop later.

**NOMIN: Did this experience change your relationship with your family?**

**Wes:** My wife appreciates me more. Going through my experiences allows me to know and appreciate what women are going through during menopause. Hot flashes are very uncomfortable.

**NOMIN: What advice do you have for people who are diagnosed with Prostate Cancer?**

**Wes:** Get involved with your own health care. Don't expect the nurse or doctor to do everything to keep you in good health.

**NOMIN: What advice can you give people to prevent the diagnosis of Prostate Cancer?**

**Wes:** Go for regular screenings to check for velocity in their PSA score, eat right, and exercise. Velocity of PSA is the critical factor, which is the rate of increase in a PSA score.

**NOMIN: What advise can you give RDs when counseling patients with cancer?**

**Wes:** Dietitians have a huge opportunity to make a difference in the lives of patients and help them avoid expensive cancer treatments. When I had radiation in 2005, it cost \$2500/treatment session! I wish someone had given me dietary advice about cancer. If so, I think I could have avoided cancer. Dietitians should be pro-active in promoting Medical Nutrition Therapy to prevent cancer. Dietitians do not charge \$2500 per session!

I would suggest getting acquainted with the following websites: [www.p4healthcare.com/go/Oncology](http://www.p4healthcare.com/go/Oncology) (This one was the most helpful); [www.prostatecancerfoundation.org](http://www.prostatecancerfoundation.org); [www.prostate-cancer.org](http://www.prostate-cancer.org); [www.psa-rising.com](http://www.psa-rising.com) and [www.ustoo.com](http://www.ustoo.com). A number of journals provided me with information during my research including: Anticancer research journal; International Journal of Cancer; Journal of the National Cancer Institute; Postgrad Medical Journal and the Cancer Causes Control Journal. There are over thirty clinical studies on curcumin listed on the Web site [www.clinicaltrails.gov](http://www.clinicaltrails.gov).



## Advances in Men's Health Research

By  
Demetrius J. Willis MBA, MS, RD, LD, CPT

### Nutrient Manipulation and Cortisol Levels

Cortisol, also called the “stress hormone” is involved in the body’s response to stress and anxiety. Cortisol has been shown to increase blood pressure and blood sugar as well as reduce immune responses. A form of Cortisol is used to treat rheumatoid arthritis in the form of Compound E. Applicable to the area of nutrition, Cortisol has been found to promote fat storage in the abdomen area. A study from the University of Edinburgh in Scotland explored the effects of diet composition on the body’s Cortisol levels. The study objective was to test the effects of dietary macronutrients on Cortisol metabolism in obese men. Seventeen obese men received 4wk ad libitum high fat (66%)/low carbohydrate (4%) or moderate fat (35%)/moderate carbohydrate (35%). The study found that the lower carbohydrate diet prohibited the metabolic breakdown of cortisol and as a result increased the levels of the hormone. Despite this increase in waist size increasing hormone the subjects lost more weight than those on the moderate nutrient diet. (*Journal Clinical Endocrinology Metabolism, in press; published online September 4, 2007*)

### “Andropause” symptoms and Premature Death

“Andropause” (or male menopause) is a term used to address the aging symptoms of men. These symptoms include the slow and steady reduction in the production of testosterone and dehydroepiandrosterone in middle-aged men. Low testosterone may promote heart disease, stroke, type 2 diabetes, abdominal obesity, reduced

muscle mass and bone mass, depression, erectile dysfunction and low sex drive. Scientists at the University of California, San Diego found low testosterone levels contribute to premature death in men. The death rates of men averaging the age of 72 years old at the beginning of the study were monitored for 20 years. Those men with the lowest testosterone at the beginning of the study were more likely to die the soonest. Results were independent of obesity and metabolic syndrome health risks. Natural ways to increase testosterone levels may include exercise, quality sleep, weight loss, a balanced diet and decreased alcohol consumption. (*Journal Clinical Endocrinology Metabolism, in press’ publish online October 2, 2007*)

### Disease Risk and Weight Loss on a Glycemic Index Diet

The Glycemic index diet is based on a system of ranking carbohydrates. This Carb ranking is based on the foods effect on blood glucose levels. High ranking Glycemic index (GI) foods are foods with simple sugars and white (or enriched) breads which enter the blood stream quickly. Low ranking Glycemic foods enter the blood stream more slowly and include more whole foods and whole grains. The diet is based on the belief that the consumption of foods that cause small fluctuations in blood sugar levels and insulin levels is a major determinant of long-term health and a reduction in the risk of heart disease and diabetes. The rapid release of sugar into the blood stream and corresponding insulin release promotes fat storage. Researchers at the

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Hammersmith Hospital compared the effects of two energy-restricted diets, one with a low GI and one with a high GI, on heart disease risk factors and weight loss in subjects at risk of heart disease. The 12 week study showed that both groups reduced their caloric intake by 300 calories. The low Glycemic index group had lower blood sugar levels, on average. There was no difference in the blood pressure, cholesterol, or waist circumference. A GI diet may lower heart disease risk factors in combination with weight loss, a healthy diet and physical activity. (*European Journal of Clinical Nutrition*, 62: 145-149, 2008)

### The French Paradox

Resveratrol is a chemical found in red grapes and is a component of red wine. In mice and rat experiments resveratrol has shown benefits in its use for anti-cancer, anti-inflammation, blood sugar and cardiovascular risk factor control. However, these results have not been proven through clinical studies replicable in human subjects. The French Paradox is an informal example of the possible benefits of resveratrol on humans. The French Paradox is an observation that despite a diet high in saturated fats, the French suffer a relatively low incidence of coronary heart disease. Theories point to the French's average consumption of red wine far exceeding the average Americans. Scientists from the University of Life Sciences in Poznan, Poland found that fat cells converted less glucose to fat in the presence of resveratrol. In addition, fat cells released an

increased amount of fat in the presence of resveratrol and adrenalin. Although the test was performed in laboratory cultures, the results suggest that increasing resveratrol intake and the body's adrenaline output through exercise could promote or increase weight loss. Red wine recommendations are controversial topics for obvious reasons but perhaps less obvious include the fact that a 5 oz. glass of wine contains almost 100 calories. (*Journal Steroid Biochemistry & Molecular Biology*, 113; 17-24, 2009)



**Steve Roch, Jr., RD, LDN, CFT**  
*NOMIN Immediate Past Chair*

Steve is the immediate past chair of NOMIN serving the group from 2005-2009. He was instrumental in helping NOMIN transition from an ADA networking group to a MIG in 2008. Steve owns and operates a private practice focusing on health and wellness called "BestRD Wellness, LLC" in New Orleans, Louisiana. He is a long time member of the ADA joining the association as an undergraduate student. He and has held many leadership positions throughout the ADA and its affiliates including: ADA Member Value Committee, ADA New Member Advisory Committee, ADA House of Delegates, Louisiana Dietetic Association and New Orleans Dietetic Association. Steve's motto to every member is "keep the passion – every member can lend a hand – we can accomplish great things together."



### Resveratrol Sources:

- Red Wine: 0.29-1.89/5oz
- Red Grape Juice: 0.17-1.3/5oz
- Red Grapes: 0.24-1.25/cup
- Peanuts (raw): 0.01-0.26/cup

Linus Pauling Institute at Oregon State University

## Technology Corner

Matthew R. Nulty, RD, CDN

The NOMIN web site ([www.nominmig.org](http://www.nominmig.org)) is up and running! Various features have been added including photographs from recent NOMIN events, brief biographies of Executive Committee members, as well as past newsletters. We are looking to expand the website to make as useful to members as possible. Please e-mail me with any ideas you may have for the web site ([matt.nulty@gmail.com](mailto:matt.nulty@gmail.com)).

### Technology Tip:

Weebly.com, our website's host, makes website creation simple for all Internet users. Sign-up for a free account and enhance your practice or business with a professional website.



*Website/Social Media Chair*

Matt is a Registered Dietitian specializing in Community Nutrition. He earned his undergraduate degree in Nutritional Sciences from Cornell University. Matt completed an urban public health-focused Dietetic Internship through Hunter College in New York City. During the internship, Matt served on the ADA's Commission on Accreditation for Dietetics Education (CADE) as the Student Representative and on the Student Council Advisory Committee as the CADE Representative. He was the recipient of the NYS Dietetic Association's Outstanding Dietetic Intern Award. He currently works for Cornell University Cooperative Extension of New York City as the Program Coordinator for a new SNAP-Ed nutrition education initiative targeting clients, volunteers, and staff of Bronx and Manhattan food pantries and soup kitchens.



# Holiday Recipes

## Mini Corn Bread Crab Cakes with Lemon-Caper Sauce

### Ingredients

#### SAUCE:

- 1/3 cup reduced-fat mayonnaise
- 1 1/2 Tbsp chopped fresh chives
- 1 Tbsp capers, drained and chopped
- 1/4 tsp grated lemon rind
- 2 tsp fresh lemon juice
- 1/4 tsp hot pepper sauce (such as Tabasco)
- 1/8 tsp minced garlic
- Dash of freshly ground black pepper

#### CRAB CAKES:

- 2 tsp olive oil
- 1/2 cup sliced green onions
- 1/3 cup finely diced red bell pepper
- 1/3 cup finely diced green bell pepper
- 1 garlic clove, minced
- 1/4 cup reduced-fat mayonnaise
- 2 Tbsp chopped fresh chives
- 2 Tbsp chopped fresh parsley
- 1/2 tsp grated lemon rind
- 1 tsp fresh lemon juice
- 1 Tbsp hot pepper sauce
- 1 tsp (30%-less-sodium) Old Bay seasoning
- 1 large egg, lightly beaten
- 2 cups crumbled Buttermilk Corn Bread
- 1 lb. lump crabmeat, shell pieces removed
- Cooking spray
- Fresh chives (optional)

### Preparation

To prepare sauce, combine first 8 ingredients; chill.  
Preheat oven to 400°.

To prepare crab cakes, heat oil in a small nonstick skillet

over medium-high heat. Add onions, bell peppers, and garlic to pan; sauté 3 minutes. Remove from heat; cool. Combine bell pepper mixture, 1/4 cup mayonnaise, and next 6 ingredients (through Old Bay); stir in egg. Fold in Buttermilk Corn Bread and crabmeat. Scoop mixture into 16 portions (about 1/4 cup each) onto 2 baking sheets coated with cooking spray. Lightly cover, and refrigerate 1 hour. Uncover and bake at 400° for 12 minutes or until lightly browned. Remove from baking sheet with a metal spatula. Serve with sauce. Garnish with chives, if desired.

Note: Bake the corn bread up to three days in advance, and keep in a zip-top plastic bag. Combine the sauce ingredients and assemble the crab cakes the night before; refrigerate separately. Any leftover crab cakes are terrific with a green salad.

Yield: 16 servings

### Nutritional Information (Per Serving)

Calories: 83 (35% from fat); Fat: 3.2g (sat 0.6g, mono 0.8g, poly 0.3g); Protein: 7.4g; Carbohydrates: 6.4g; Fiber: 0.5g; Cholesterol: 38mg; Iron: 0.6mg; Sodium: 317mg; Calcium: 54mg.

*Cooking Light, December 2007*

## Carrot-Parsnip Soup with Parsnip Chips

### Ingredients

- 2 Tbsp olive oil, divided
- 2 1/2 cups chopped yellow onion
- 3 cups coarsely chopped parsnip
- 3 cups water
- 2 1/2 cups coarsely chopped carrot (about 1 pound)
- 2 (14-ounce) cans fat-free, less-sodium chicken broth
- 1/4 tsp salt
- 1/4 tsp freshly ground black pepper

**(Holiday Recipes Continued)**

1/2 cup (1/8-inch-thick) slices parsnip  
1 Tbsp chopped fresh chives

**Preparation**

Heat 1 teaspoon of oil in a Dutch oven over medium heat. Add the onion, and cook 10 minutes or until tender, stirring occasionally. Add chopped parsnip, water, carrot, and broth; bring to a boil. Reduce heat, and simmer 50 minutes or until vegetables are tender. Remove from heat; let stand 5 minutes. Place half of carrot mixture in a blender; process until smooth. Pour pureed carrot mixture in a large bowl. Repeat procedure with remaining carrot mixture. Stir in salt and pepper.

Heat remaining 5 teaspoons oil in a small saucepan over medium-high heat. Add parsnip slices; cook 5 minutes or until lightly browned, turning occasionally. Drain on paper towels. Sprinkle parsnip chips and chives over soup.

Note: Winter root vegetables lend their complementary, slightly sweet flavors to this hearty bowl. Stir in more water or broth if you prefer a thinner consistency.

Yield: 6 servings

**Nutritional Information (Per Serving)**

Calories: 159 (28% from fat); Fat: 4.9g (sat 0.7g,mono 3.4g,poly 0.6g); Protein: 3.7g; Carbohydrates: 26.4g; Fiber: 6.4g; Cholesterol: 0.0mg; Iron: 0.8mg; Sodium: 388mg; Calcium: 61 mg.  
*Cooking Light, December 2004.*

**Escarole and Fennel Salad with Pears and Gruyère**

**Ingredients**

3 Tbsp sherry or cider vinegar  
1 Tbsp almond oil  
1/2 tsp salt  
1/8 tsp freshly ground black pepper  
6 cups torn escarole (about 1 head)  
4 cups thinly sliced fennel bulb (about 1 medium bulb)  
3 Bartlett or Anjou pears, cored and thinly sliced  
1/4 cup (1 ounce) finely shredded Gruyère cheese

**Preparation**

Combine first 4 ingredients, stirring with a whisk. Combine escarole and fennel in a large bowl. Add pears, and toss gently to combine. Drizzle dressing over salad; toss

gently to coat. Top with shredded cheese.

Note: Escarole has a pleasant bitterness and sturdy leaves that can withstand being tossed in dressing and still look appealing when passed around the table. If you can't find almond oil, try hazelnut or walnut oil. Sprinkle with black pepper, if desired.  
Yield: 6 servings

**Nutritional Information (Per Serving)**

Calories: 113 (33% from fat); Fat: 4.1g (sat 1.1g,mono 2.1g,poly 0.5g); Protein: 2.9g; Carbohydrates: 18.6g; Fiber: 5.3g; Cholesterol: 5mg; Iron: 0.9mg; Sodium: 247mg; Calcium: 103mg.  
*Cooking Light, December 2004.*

**Fire and Spice Ham**

**Ingredients**

1 (5 1/2- to 6-pound) 33%-less-sodium smoked, fully cooked ham half  
Cooking spray  
1/2 cup red pepper jelly  
1/2 cup pineapple preserves  
1/4 cup packed brown sugar  
1/4 tsp ground cloves

**Preparation**

Preheat oven to 425°.

Trim fat and rind from ham half. Score outside of ham in a diamond pattern. Place ham on a broiler pan coated with cooking spray. Combine jelly and remaining ingredients, stirring with a whisk until well blended. Brush about one-third of jelly mixture over ham.

Bake at 425° for 5 minutes. Reduce oven temperature to 325° (do not remove ham from oven); bake an additional 45 minutes, basting ham with jelly mixture every 15 minutes. Transfer ham to a serving platter; let stand 15 minutes before slicing.

Note: Sweet-hot pepper jelly and tangy pineapple preserves create an easy glaze for the ham.

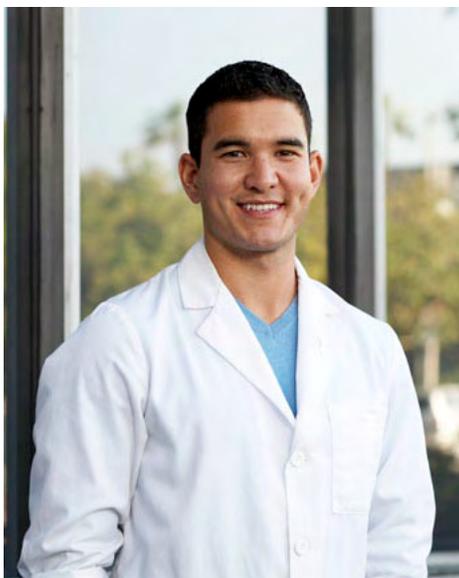
Yield: 18 servings (serving size: about 3 ounces)

**Nutritional Information (Per Serving)**

Calories: 188 (23% from fat); Fat: 4.9g (sat 1.6g,mono 2.3g,poly 0.5g); Protein: 18.4g; Carbohydrates: 16.8g; Fiber: 0.0g; Cholesterol: 47mg; Iron: 1.4mg; Sodium: 865mg; Calcium: 10mg.  
*Cooking Light, December 2002.*

**Vegetarian Entrée:  
Walnut-Stuffed Eggplant  
Ingredients**





**Keiy Murofushi, MS, RD**

*Newsletter Editor*

Keiy received his undergraduate degree in Nutritional Science and Sports Medicine from Pepperdine University and completed his Dietetic Internship and Masters of Science at California State University Northridge. Keiy currently works for the L.A. Gay and Lesbian Center's Jeffrey Goodman Special Cares Clinic as an HIV/AIDS Dietitian, serving over 2,300 patients. He is also a Clinical Dietitian for Kindred Hospital Los Angeles, focusing on TPN/EN Nutrition Support. Keiy serves as the Newsletter Editor for NOMIN as well as the Research and Education Committee Chair for the Infectious Diseases DPG. Keiy has been a featured guest lecturer for AIDS Project Los Angeles, BeingAlive, LifeWorks and Pepperdine University.

### (Holiday Recipes Continued)

3 medium eggplants (3 lb.)  
 2 Tbsp plus 4 tsp. olive oil, divided  
 2 medium onions, diced (3 cups)  
 1 1/2 pt grape tomatoes, halved (3 cups)  
 3/4 cup roughly chopped walnut pieces  
 2 1/4 tsp ground cinnamon  
 1 1/2 tsp dried oregano  
 1/4 cup whole-wheat breadcrumbs  
 2/3 cup crumbled reduced-fat feta cheese (3 oz.)  
 Lemon wedges, optional, for garnish

#### Preparation

Halve eggplants lengthwise, and scoop out flesh and seeds, leaving 1/2-inch-thick edges on eggplants' shells. Cut scooped-out flesh into 1/2-inch pieces, and set in colander. Sprinkle eggplant pieces and inside of eggplant shells with salt. Let stand 25 to 30 minutes, or until beaded with moisture. Rinse eggplant shells and pieces in cold water, and pat dry.

Bring large pot of salted water to a boil. Drop eggplant shells in water, and simmer 5 to 8 minutes, or until barely tender when pierced with fork. Drain in colander, cool, and pat dry.

Meanwhile, heat 1 Tbs. olive oil in large skillet over medium-high heat. Sauté onions 3 minutes, or until translucent. Add eggplant pieces, tomatoes, walnuts, cinnamon, oregano, and 1/4 cup water. Season with salt and pepper, if desired. Cook 8 minutes, or until vegetables are softened and browned, stirring occasionally.

Preheat oven to broil. Toss breadcrumbs with 4 tsp. olive oil in bowl. Brush each eggplant shell with 1/2 tsp. oil, and place cut-side up on baking sheet. Broil 5 minutes, or until tender and starting to brown. Reduce oven heat to 375°F.

Divide filling among eggplant shells. Sprinkle each stuffed eggplant with breadcrumb mixture, and top with feta cheese. Bake 35 minutes, or until heated

through and browned on top. Serve with lemon wedges, if using.  
 Note: These individual-serving entrées can be made ahead, then reheated just before serving. Salting the eggplant before cooking it eliminates any potential bitterness, but skip this step if you're watching your sodium.

Yield: Serves 6

#### Nutritional Information (Per Serving)

Calories: 302, Protein: 10g, Total fat: 19g, Saturated fat: 3g, Carbohydrates: 29g, Cholesterol: 5mg, Sodium: 316mg, Fiber: 12g, Sugars: 11g

*Vegetarian Times, September 1, 2009;p.52*

### Sugar Snap Peas with Lemon and Toasted Almonds

#### Ingredients

1 cup water  
 2 1/2 cups sugar snap peas, trimmed (about 8 ounces)  
 1 1/2 tsp butter, melted  
 1/2 tsp grated lemon rind  
 2 Tbsp sliced almonds, toasted  
 1/4 tsp salt  
 1/8 tsp freshly ground black pepper

#### Preparation

Bring water to a boil in a medium saucepan. Add peas; cook 2 minutes or until crisp-tender. Drain peas in a colander over a bowl, reserving 1 teaspoon cooking water. Combine peas, reserved cooking water, butter, and lemon rind, tossing gently to combine. Sprinkle with almonds, salt, and pepper; toss gently to combine.

Note: Sugar snap peas make this a crisper, sweeter version of green beans amandine.

Yield: 4 servings (serving size: 1/2 cup)

#### Nutritional Information (Per Serving)

Calories: 80 (36% from fat); Fat: 3.2g (sat 1.1g, mono 1.4g, poly 0.4g); Protein: 3.5g; Carbohydrates: 9.9g; Fiber: 0.0g; Cholesterol: 4mg; Iron: 1.5mg; Sodium: 173mg; Calcium:

**(Holiday Recipes Continued)**

77mg.  
*Cooking Light, December 2004.*

**Dessert:  
 Pumpkin-Orange Cake**

**Ingredients**

- 1/2 cup granulated sugar
- 1/2 cup butter, softened
- 1 (15-ounce) can pumpkin
- 1/4 cup egg substitute
- 1/2 tsp vanilla extract
- 2 3/4 cups sifted cake flour
- 1 tsp baking soda
- 1/2 tsp salt
- 1/2 tsp baking powder
- 1/2 tsp ground cinnamon
- 1/4 tsp ground ginger
- 1/4 tsp ground nutmeg
- 1 (12-ounce) can evaporated fat-free milk
- Cooking spray
- 3 cups sifted powdered sugar, divided
- 3/4 cup (6 ounces) 1/3-less-fat cream cheese, softened
- 1 tsp grated orange rind
- 2 cups mandarin oranges in light syrup, drained
- 1 cup pomegranate seeds (about 2)

**Preparation**

Preheat oven to 350°. Place granulated sugar and butter in a large bowl, and beat with a mixer at medium speed until well blended. Add pumpkin; beat well. Add egg substitute and vanilla; beat until well blended.

Lightly spoon flour into dry measuring cups; level with a knife. Combine flour and next 6 ingredients (through nutmeg), stirring with a whisk. Add flour mixture and milk alternately to butter mixture, beginning and ending with flour mixture. Pour batter into 2 (9-inch) round cake pans coated with cooking spray; sharply tap pans once on counter to remove air bubbles. Bake at 350° for 30 minutes or until wooden pick inserted in center comes out clean. Cool in pans 10 minutes on a wire rack; remove from pans. Cool completely on wire rack.

Place 1 cup powdered sugar and cream cheese in a large bowl; beat with a mixer at medium speed until well blended. Add remaining powdered sugar and rind; beat until fluffy.

Place 1 cake layer on a plate. Spread 2/3 cup cream cheese frosting evenly over top of cake. Top with remaining cake layer; spread remaining cream cheese frosting over top, but not sides, of cake. Arrange orange slices in a ring around outer edge of top cake layer. Sprinkle pomegranate seeds over center of top cake layer. Store cake loosely covered in refrigerator.

Note: You can also prepare this in a 13 x 9-inch pan (bake for 40 minutes, and cool in pan for 10 minutes) or a tube pan (bake for 55 minutes, and cool in pan for 20 minutes). For the variations, you'll need an extra pomegranate and can of oranges for the topping.

Yield: 14 servings (serving size: 1 slice)

**Nutritional Information (Per Serving)**

Calories: 338 (26% from fat); Fat: 9.6g (sat 5.9g, mono 2g, poly 0.4g); Protein: 5.9g; Carbohydrates: 58.5g; Fiber: 1.2g; Cholesterol: 28mg; Iron: 2.3mg; Sodium: 354mg; Calcium: 102mg.

Source: *Cooking Light*, October 2004 issue.

**Beverage:  
 Designated  
 Driver**

- 2 parts orange juice
- 4 parts pineapple juice
- 1 part Coco Lopez
- 1 part ginger ale

Pour all ingredients into shaker. Shake vigorously. Pour over crushed ice. Garnish with orange slice and cherry. This can be made as an individual drink or for the punch bowl.

*12 for the Road, WWL Channel 4 News station/Brenda Sinclair from Mothers Against Drunk Driving, New Orleans, LA.*

Credits: Microsoft Office Stock Images



## Executive Members (Continued)

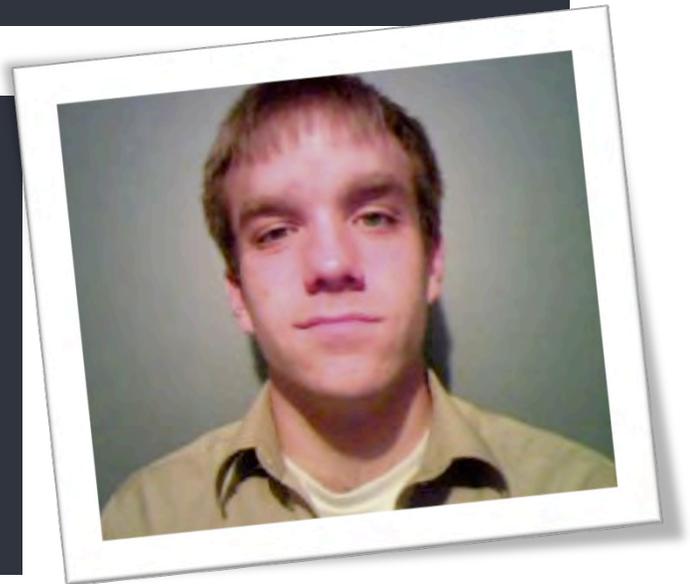


Kyle Shadix, RD  
*EC Resource*

Kyle Shadix is a culinary nutrition communications guru who works with major food companies on innovation and marketing research and strategy, research\brand positioning, and platform development/concepts recipe/menu development. [www.chefkyle.com](http://www.chefkyle.com)

Charles Williams, RD  
*Secretary*

Charles received his B.S. in Food and Nutrition and Dietetics from Plattsburgh State University in New York. For his Dietetic Internship he attended Stony Brook University on Long Island, New York. Charles works as a dietitian for the WIC program at the Greater Hudson Valley Family Health Center in Newburgh, New York. Through NOMIN Charles hopes to be an advocate for men in dietetics and work to recruit more men into the field. This is his first term as an executive committee member of the NOMIN MIG.



Susan DuPraw, MPH, RD

*Manager, DPG/MIG/Affiliate Relations*

Susan is a registered dietitian with American Dietetic Association. She manages activities with the dietetic practice groups, member interest groups, and affiliates. Her previous experience includes marketing/nutrition education for Dairy Council of Wisconsin and as a clinical dietitian.