Diet and Duchenne: Simple Nutrition Advice

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Nutrition Risks Early in Life

• Steroid
  – Increased weight

• Behavioral issues
  – “picky eating”

• Vitamin D deficiency

• Calcium
Nutrition Challenges With Age

- Decrease ambulation / energy needs
- Decreased oral Intake
- Swallowing issues
- Impaired gastric function
  (Gastroparesis)
Registered Dietician Nutritionist

• *Unsung Heroes*

• RDN evaluation every 6 months
  – Monitor weight/height
  – Caloric intake
  – Mineral/Vitamin intake
Typical Focus of Clinics

- Neurology
- Cardiology
- Pulmonology
- Physical Therapy
Nutrition Impacts Each Area

- Neurology
- Cardiology
- Pulmonology
- Physical Therapy
DMD Care Considerations Working Group

• Experts from a wide range of disciplines
  – U.S. Centers for Disease Control and Prevention
  – TREAT-NMD
  – Patient Advocacy Organizations

• GI/Nutrition Recommendations
  – 6 month
  – 12 month

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6 Month Evaluations

• RDN visit
• Screen for Swallowing/Dysphagia
• Screen for Reflux
• Screen for Gastroparesis
• Screen for Constipation
Yearly Evaluation

• Vitamin D levels

• Dietary intake of Calcium
Supplements

• Evidence and guidelines for calcium and vitamin D

• Multivitamin or mineral supplement if below daily recommendations

• No current evidence for or against MVI or herbal supplementation
Special Diets?

- Strong Evidence Based Research Lacking
- Healthy Diet for Entire Family
- Dietician guides individual plans
RED FLAGS

• Choking / Aspiration
• Problems chewing
• Decreased ability to feed self
• Taking long time to eat meal
• Weight loss

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G-tube
Benefits (Anecdotal)

• Improves Daily Function
• Improves Ability to Focus
• Improves Endurance / Energy Level
• Access for Fluids/Nutrition
Summary

- Meet regularly with Registered Dietitian
- Closely follow weights and caloric intake
- Consider G-tube
Thank you!