Given that diabetes is a serious health concern globally and in Singapore, many people are keen to know if there are alternative treatments. A study on mice that okara, a by-product of soya production, can help in the management of Type 2 diabetes.

EATING OKARA

The by-product of soya production, which researchers recently found to control the impact of blood glucose levels, is commonly consumed in fermented form.

The paper by senior lecturer Ken Chang, who was involved in the study, said although okara is rich in fibre and higher consumption of fibre can impact blood glucose levels, there is no evidence of okara residue being able to treat diabetes. However, he added that further research will be needed to explore the potential of okara residue in managing diabetes.

FOLLOWING A LIQUID DIET

In Britain, a low calorie liquid diet programme was used to help those with Type 2 diabetes who were resistant to medication. The study included a low calorie, nutrient-complete diet for at least 960 calories a day for three months, which then continued with a period of follow-up support. This approach follows recent research, most notably the Diabetes Remission Clinical Trial (DIRECT) study, which showed that it is not a must to manage Type 2 diabetes with medications.

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45kg/m² which puts them in the category of being overweight. They also had a high body-mass index of 27 to 30 kg/m², which puts them in the overweight to obese category. The programme included a low calorie, nutrient-complete diet programme for those three months, and there is a risk of electrolyte abnormalities (especially potassium loss by the kidneys) and dehydration.

The programme may be greater. Nevertheless, it is crucial to ensure that the diet is tailored to the individual's needs. Side effects that have been reported include abdominal pain, constipation, headaches, heart and liver problems. Long-term clinical trial data on whether very low calorie diet programmes can effectively prevent the onset and progression of vascular complications (eyes, kidneys, feet, nerves and heart, brain and lungs) are needed, said Prof Jafar.

"Such information would be particularly valuable for Asians who have type 2 diabetes. After all, research on diabetes is a highly complex process, and it takes time. However, the potential for a natural treatment like okara is promising," said Prof Jafar.

We want to push it out as a pre-meal snack. Based on our scientific study, we realise that when the mice eat fermented okara, 15 to 30 minutes before the actual meal, we don't see the usual blood glucose level spike after the meal.

We need to collaborate with the Health Promotion Board’s my healthy plate method, where a patient fills half of the half of his plate with protein and vegetables, a quarter with whole grains and the remaining quarter with low fat vegetables.

"Almost every culture will have some kind of fermented food or food groups would have a beneficial effect, but I don’t think anyone has conclusively shown that it will work in every situation with diabetes," he said.

"The impact varies depending on how long a person has had the disease, how severe it is, whether he takes other diets and so on. Singapore will have to start thinking about this. I think this is a very promising intervention," said Prof Jafar.

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