

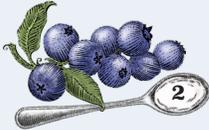
sweet expectations

an experiment for your patients & clients

As health professionals, you know that humans are hardwired to enjoy sweet tastes. There are sweet taste receptors on our tongues¹, and when sugar or sweeteners interact with the receptor, this sends signals to the brain which then sends signals to the central nervous system to respond favorably. Of course, this is an oversimplified description of a complicated chemical reaction to the body but helps begin to explain the science of sweet.

But how sweet is sweet enough to satisfy taste buds? While taste is subjective and very individual, think about what would happen if you conducted this taste test among your patients and clients.

test samples:

 <p>Option A 1/2 cup blueberries, mashed</p>	 <p>Option B 1/2 blueberries, mashed with 1 tsp. sugar</p>	 <p>Option C 1/2 cup blueberries, mashed with 2 tsp sugar</p>	 <p>Option D 1/2 cup blueberries, mashed with 3 drops of blue food coloring</p>
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questions to ask your patients or clients:

Which option represents what you think blueberries should taste like?
Which option do you prefer?

reading the results:

If your patient or client selects option B or C, their taste expectations could have evolved over time to prefer foods with higher levels of sugars and sweeteners. If they chose Option D, their visual expectations of certain foods may be influenced by frequent exposure to foods with color additives. It's important to understand your clients' current expectations when it comes to the sweetness and vibrancy of foods. Did you know that with time and less exposure to food additives, including sweeteners and coloring, it is possible to reset our palate preferences? Studies have shown that it's possible to retrain our taste buds to desire something different from current preferences, such as less sweetness².

¹ Lee AA, Owyang C. Sugars, Sweet Taste Receptors, and Brain Responses. *Nutrients*. 2017 Jun 24;9(7):653. doi: 10.3390/nu9070653. PMID: 28672790; PMCID: PMC5537773.

² Paul M Wise, Laura Nattress, Linda J Flammer, Gary K Beauchamp, Reduced dietary intake of simple sugars alters perceived sweet taste intensity but not perceived pleasantness, *The American Journal of Clinical Nutrition*, Volume 103, Issue 1, January 2016, Pages 50–60, <https://doi.org/10.3945/ajcn.115.112300>

6 ways to help your patients & clients reset their palates

- Educate on how to read the Nutrition Facts Panel and ingredient lists on packaged foods to help clients identify amounts and sources of sugars, as well as how to identify foods that contain color additives that enhance or change a food's color from its natural state
- Teach clients to regularly compare the labels of similar foods (such as different brands of yogurts) so they can note nutrition and ingredient differences among available choices
- Shift the focus to new natural flavoring agents, including aromatics (such as ginger and garlic) and spices (such as turmeric, rosemary, sage, and other herbs) that can boost the flavor of healthful whole foods, such as vegetables, lean proteins, and legumes, without adding artificial sweetness or colors
- Encourage clients to make eating a mindful activity by removing distractions and slowing down the pace of bites while paying attention to the food's color, texture, flavor, and mouth-feel, an activity that has been shown to increase recognition of fullness cues and decrease overeating³
- Remind clients that some foods are meant to taste really sweet, and those foods are not meant to be everyday meals and snacks. For example: Blueberries are a snack, while blueberry pie is a special dessert
- Help clients identify sources of added sweetness in their diets. Create a plan together for how to decrease choices that are counterproductive to their long-term health

By showing your clients how to retrain the palates, you could help them create a preference toward real, delicious food made with simple ingredients and not a lot of sugar.

³ Dalen J, Smith BW, Shelley BM, Sloan AL, Leahigh L, Begay D. Pilot study: Mindful Eating and Living (MEAL): weight, eating behavior, and psychological outcomes associated with a mindfulness-based intervention for people with obesity. *Complement Ther Med.* 2010 Dec;18(6):260-4. doi: 10.1016/j.ctim.2010.09.008. Epub 2010 Nov 11. PMID: 21130363.