EFFECTS OF PISTACHIO INTAKE ON POSTPRANDIAL GLYCEMIC RESPONSE IN PREGNANT WOMEN

A randomized, controlled, crossover study

Principal Investigator
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The goal of this research was to study the effects of pistachios on pregnant women who:

- have impaired glucose tolerance, but are otherwise normal* (n=30), or
- have been diagnosed with gestational diabetes* (n=30)

on blood glucose response, insulin response and hormones related to glucose metabolism and satiety.

*Note: Diagnosis to abnormal glucose tolerance is based on standards given in Standards of Medical Care in Diabetes—2014 formulated by the American Diabetes Association (ADA).

**TARGET POPULATION**

Pregnant women (age 25-35, at 24-28 gestational weeks)

**DESIGN**

This research was a self-comparison study divided into two phases. Subjects participated in the two phases in random order:

Phase A: Subjects consumed 100g of whole wheat bread (about 240 kcal) for breakfast in ten minutes. Venous blood was collected at 0, 30, 60, 90, and 120 minutes following the breakfast.

Phase B: Subjects consumed 42g of pistachios (about 234 kcal) for breakfast in ten minutes. Venous blood was collected at 0, 30, 60, 90, and 120 minutes following the breakfast.

**TEST MEALS**

1. Whole wheat bread
   (100g, 2 slices, about 240 kcal)
2. Pistachios (42g, about 234 kcal)

**MAIN OBSERVATION INDICATORS**

(1) Blood glucose
(2) Insulin, GLP-1, GIP

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In the two step approach, women were initially screened by measuring plasma glucose one hour after a 50g glucose load; women with glucose concentration ≥ 7.8 mmol/L undergo a 75g OGTT on a separate day. Gestational diabetes is made if the blood glucose ≥ 10.0 mmol/L at one hour or ≥ 8.5mmol/L at two hours.

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**Why was the study done:** Providing pregnant women with diabetes with appropriate nutrition is essential for the health of the mother and baby. Pistachios are a low Glycemic Index (GI) food with balanced nutrition. They are high in fiber, antioxidants and have a beneficial fatty acid profile. Studies in both healthy and pre-diabetic individuals have shown that nuts in general, and pistachios in particular, improve how cells use glucose and how insulin responds to a carbohydrate-containing meal. Investigators wanted to see if a 1.5 serving size of pistachios could also provide benefits to women with gestational diabetes.

**What is the objective of the study:** The goal of this research was to study the effects of pistachios on pregnant women with: a) impaired glucose tolerance, but otherwise healthy; and b) gestational diabetes on blood glucose response, insulin response and hormones related to glucose metabolism.

**Impaired glucose tolerance during gestation (GIGT)**

Sometimes during pregnancy the body is unable to regulate blood glucose (sugar) levels normally because of hormonal changes. This is called ‘gestational impaired glucose tolerance.’ Impaired glucose tolerance means that blood glucose levels raise beyond normal levels after a glucose challenge but not high enough to warrant a diabetes diagnosis. While this is resolved after the baby is born, women with either GDM or GIGT have a greater risk of developing diabetes.

**Study design:** Two groups of pregnant women with GDM or GIGT ate either 42 grams of pistachios or 100 grams of whole wheat bread after an overnight fast on two occasions, separated by 7 days. Blood measures were taken after each meal every 30 minutes, up to 120 minutes. The pistachios and whole wheat bread were matched for calories.

**What investigators found:**

**Blood Glucose:** Both groups of women (those with GDM and GIGT) had a significantly lower rise in blood sugar at every time point measured after the pistachio consumption than they did after eating the whole wheat bread. In fact, blood glucose barely increased above baseline levels after the pistachios. During the two hours following the consumption of pistachios, the total rise in blood sugar was much lower than after eating the whole wheat bread in both groups of women.

**Insulin Level:** The effect on insulin levels was even more dramatic. Blood insulin levels did not change during the 2 hours after eating the pistachios. Again, both groups of women had a significantly lower rise in blood insulin levels at every time point measured after eating the pistachios than they did after eating whole wheat bread.

**GIP (insulinoatropic polypeptide) and GLP-1 (glucagon like peptide-1)** – These metabolic hormones, also called incretins, stimulate a decrease in blood glucose levels and a release after eating. They work by modifying insulin release from the pancreas. They appear to slow down the rate of absorption of nutrients into the bloodstream and may reduce food intake. In both groups of women there was a higher rise in GLP-1 after eating the pistachios than after eating the whole wheat bread (at 60, 90 and 120 minutes for GIGT and at 90 and 120 minutes for GD). On the other hand, there was a greater rise in GIP levels after the whole wheat bread than the pistachios among GD women and the GIGT. This is probably because GIP secretion is stimulated by glucose in the intestinal tract.
What we learned from this study

A growing concern, gestational diabetes mellitus (GDM) prevalence is estimated at 9.8 – 25.5% worldwide. Elevated blood sugar during pregnancy not only impacts the mother’s health, but it may also increase the baby’s risk of developing diabetes. This study shows pistachios may help maintain postprandial blood glucose levels while providing essential nutrients to the mother and baby during pregnancy.

- There is a significantly lower rise in blood sugar at every time point measured after the pistachio consumption than after consuming whole wheat bread.
- Blood glucose increased minimally above baseline levels after the pistachios.
- Pistachios are a healthy snack for pregnant women with GIGT or GDM.
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Dr. Ge specializes in nutrition treatments for various diseases, including diabetes, kidney disease, and obesity. She is a Trustee of the Shanghai Nutrition Society; Council Member of the Chinese Nutrition Society; Vice-Chair, Nutrition Community, Chinese Medical Doctor Association; and Committee Member, Science Popularization Branch of Chinese Medical Association.

Zhaoping Li, MD, PhD

Professor of Medicine & Director of UCLA Center for Human Nutrition; Chief, Division of Clinical Nutrition, Department of Medicine, David Geffen School of Medicine at UCLA & VA Greater Los Angeles Health Care System.

Dr. Li’s primary areas of research are obesity treatment and prevention, the role of nutrition, phytochemicals, and botanical dietary supplements in the prevention and treatment of metabolic disease, common forms of cancer, and cardiovascular disease. She has published more than 150 peer-reviewed papers in respected journals.

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