INTRODUCING THE DIETARY INFLAMMATORY INDEX™
AN ESSENTIAL TOOL FOR MONITORING YOUR HEALTH

COLUMBIA, SC. – A large, persuasive, and ever-increasing body of evidence links chronic inflammation to virtually all of the chronic diseases that cause the majority of disability and death in the U.S., including diabetes, cardiovascular diseases and cancer. Combined, these conditions affect well over 50% of the adult population in the United States alone. The total cost to our healthcare system of these conditions combined is estimated to be over $500 billion per year. Disability and loss in productivity create additional drain on our economy. Research has shown, however, that many of these conditions are largely preventable or mitigated through adopting a less inflammatory diet (i.e., one with more anti-inflammatory foods and fewer pro-inflammatory foods).

Unfortunately, physicians and other healthcare providers do not currently have a tool, and typically not the specialized training required, to provide meaningful, evidence-based, and actionable dietary advice to patients on how to reduce the burden of chronic inflammation. Thus, the typical advice provided is to eat a diet that is “low-fat, rich in vegetables and healthy whole grains.” It is with this in mind that Dr. James Hébert, Director of the Cancer Prevention and Control Program, and his team based at the University of South Carolina in Columbia, South Carolina have spent considerable effort developing the Dietary Inflammatory Index (DII™) which has been established as an effective research tool to measure the inflammatory potential of people’s diet. As a research tool, the DII™ has been used in a variety of populations to predict a variety of chronic diseases like cancers, cardiovascular diseases, deaths etc.

According to Dr. Hébert, complicating the issue is the fact that Western diets make it difficult for many Americans to comprehend the concept of pro-inflammatory vs anti-inflammatory foods. For example, on the DII scale, many dairy products such as yogurt and milk are classified as “highly inflammatory” while chili peppers are “anti-inflammatory.” Says Hébert, “The confusion often arises from a disconnect between the taste of the foods and their physiological inflammatory or anti-inflammatory properties on the body.”

Connecting Health Innovations LLC (CHI) is hoping to change this by commercializing a variety of innovative products and services that help medical professionals screen for and manage patients at risk of diseases caused by chronic inflammation. Other products will be focused on helping to educate consumers and start to familiarize them with the DII scale.

Initially, CHI will focus on delivering two main types of products and services. First is an application for physicians and clinicians to use in screening patients – DII Screener™. If the DII Screener™ indicates that they have a pro-inflammatory diet, patients would be counseled by the attending physician. This would include guidance to promote appropriate changes designed to reduce the patient’s pro-inflammatory dietary intake. In addition, a follow-up intervention with a trained dietician would also be offered.

During the intervention, a second level of products and services will be provided. Services here will include a counseling system wherein patients will receive advice and insight on how to better monitor and manage their diet. The counseling system, known as IMAGINE™, (Inflammation Management Intervention) will provide patients with a formal program which includes practical tools and incentives to reduce chronic illness risks. To this end, CHI is also developing a mobile application designed to provide a self-monitoring tool for patients as they transition into more intensive dietician-led counseling sessions.

The DII™ scale and its associated products developed by CHI have garnered attention from other leading health care providers and organizations as well. BlueCross BlueShield of South Carolina, recognizing the potential cost-savings from a system that identifies patients before they manifest inflammation-related diseases and promotes diet modification to reduce inflammatory potential, is already committed as the company’s main commercialization partner.
Other potential commercialization partners and investors have expressed interest as well—both domestically and from around the World. For example, CHI is exploring developing medicinal foods as part of a CHI Subsidiary, CHI-INDIA. This represents an intriguing possibility because there are many people who are already suffering from inflammation-induced/caused conditions such as type II diabetes, heart disease, arthritis, and diverticulitis. CHI and their partners recognize that if they can intercept these conditions “upstream,” costlier and dramatic complications can be prevented later on. For example, by treating and ultimately reversing inflammatory bowel disease, then preventing colon cancer, which is known to be strongly associated, is a definite possibility.

CHI’s combination of leveraging their expertise and knowledge of the DII into a screening device, creating a counseling system to educate patients, and developing a commercially viable mobile application for patient self-monitoring is a winning strategy in the fight against inflammatory conditions that are now pandemic and threaten to overwhelm the healthcare delivery system both in terms of sheer numbers and severe consequences. Given that moving just 1% of the population towards a healthier anti-inflammatory diet could lead to an estimated $6 billion in healthcare savings, it is clear to see that CHI has the potential to make a huge impact on reducing healthcare costs.

ABOUT CHI

CHI (www.chi-llc.net) was founded on February 18, 2013 with a focus on leveraging the work spearheaded by Dr. James Hébert on the effects of inflammatory diets on health in the commercial markets. The first innovations of CHI are its patent-pending DII™ and IMAGINE™ counseling program, for which they have actively been recruiting partners among the healthcare, insurance, research and technology sectors to move the DII to the marketplace. The Affordable Care Act brings a unique opportunity to fund the promotion of healthier eating in the US population as a whole, and among medically underserved populations in particular.

CHI was incorporated in South Carolina in February 2013. As a relatively young company, CHI has the support of its partners such as BlueCross BlueShield, the University of South Carolina Specialty Clinics, the University of South Carolina Faber Entrepreneurship Center, Eau Claire Cooperative Health Centers, Office of Economic Engagement, and the Columbia/USC Incubator. CHI and its partners will leverage their resources to help fund and deliver this clinically-proven approach to reducing chronic illness in America.

ABOUT DR. JAMES R. HÉBERT

Since 1988, Dr. James R. Hébert has been the Principal Investigator (P.I.), co-P.I., or subcontract P.I. on 48 federal grants with budgets totaling ~$81 million. He has published over 330 peer-reviewed papers in high-impact medical journals, with most of these focusing on various aspects of diet on health including inflammation and methodological issues encountered in the measurement of diet.

Currently, Dr. Hébert’s main administrative role is as the Director of the CPCP, which is based at the University of South Carolina in Columbia. His primary academic appointment is in the Department of Epidemiology and Biostatistics in the Arnold School of Public Health of the University of South Carolina. He also holds adjunct appointments in the Department of Family and Preventive Medicine in the USC School of Medicine and in the Department of Medicine at the Medical University of South Carolina. Dr. Hébert has established strong collaborations around the world in the areas of public health, cancer prevention and control and epidemiology and biostatistics as a nutritional and cancer epidemiologist. Over the past seven years, Dr. Hébert has spent considerable effort developing the DII, which has now been established and is regarded as an effective research tool.

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