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To: dietandhealth
Subject: Comments on Draft Consultation Report

Importance: High

Please find my comments in the attached document. This is a late response,
but I could not access the document while in the filed

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Draft Report of the Consultation on Diet, Nutrition and the Prevention of Chronic Diseases Comments by H  l  ne Delisle PhD, Professor, Faculty Medicine, Universit   de Montr  al

General comments

This is a monumental document which will hopefully have much impact on policies, strategies and programs at the international and local level. This is a long awaited formal commitment of WHO/FAO regarding the prevention of nutrition-related chronic diseases. While I have no specific scientific comments concerning the population nutrient goals, I should like to briefly comment on what I see as strengths and weaknesses of the recommendations.

Strengths

This is a fantastic report, and several strong points deserve to be mentioned:

- Consideration of the type of evidence in support of recommendations
- Balanced emphasis on nutritional health, agriculture (quality of the food supply) and environmental measures for sustainability
- Consideration of gene-environment interactions, inter-generational aspects, and interactions between early and later risk factors
- The life course perspective
- Addressing the double burden of malnutrition and nutrition-related chronic disease
- Emphasis on balanced diets (nutritional quality)
- Suggested consideration of fiscal pricing policies on sugar and fat-rich, but micronutrient-poor food items.

Some weak points

- Age-specific recommendations would have been expected, considering that much emphasis is given to cumulative risk throughout the course of life. For instance, recommendations in support of breastfeeding, adequate nutrition during pregnancy and nutrition, diet for appropriate growth in infancy and childhood, specific needs of adolescents...would be welcome and in line with the cumulative risk perspective, and interactions between early and later risk factors
- Health and nutrition professional associations have a major role to play and are important partners in advocacy and leadership. It is surprising that they are not even mentioned
- Stressful life (mental/psychological stress) was not considered among risk factors, while it is a recognized risk factor even if little is known of how it is involved. Similarly, there is little on oxidative stress, free radicals, and the role of antioxidants in foods that are not nutrients in the narrow sense
- Dietary risk factors for obesity, diabetes, CVD, and some cancers are strikingly similar, so that recommendations for prevention need not be disease-specific. This convergence should be highlighted
- Regarding obesity, one would expect to find some mention of the critical role of evolving cultural perception of body size, and the body image concept
- It might be appropriate to consider providing more specific recommendations regarding research needs for more effective control and prevention of chronic diseases. Furthermore, it may be appropriate to recommend that bilateral agencies and research funding institutions support this type of research. It is so often contended that chronic diseases are not a research priority in developing countries...

- DOES THE WHOLE FOOD SUPPLY REALLY NEED REENGINEERING???
- It could be useful in the report to provide a clearer definition or description of some key elements or concepts, for instance:
 - o Distinction between bio-markers of risk and environmental/behavioural risk factors
 - o Countries in transition, epidemiologic transition, nutrition transition
 - o Healthy/unhealthy diet.