

Fédération  
Internationale  
des Industries  
des Aliments  
Diététiques

International  
Special  
Dietary  
Foods  
Industries



194, rue de Rivoli  
F - 75001 PARIS  
FRANCE

Tél. : 33/(0)1 53 45 87 87

Fax : 33/(0)1 53 45 87 80

E-mail : [andree.bronner@wanadoo.fr](mailto:andree.bronner@wanadoo.fr)

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17 June 2002

Dr Pekka Puska  
Director, Non communicable Disease  
Prevention and Health Promotion  
World Health Organisation  
CH – 1211 Genève 27-Suisse

**Re: ISDI comments on the report of WHO/FAO expert consultation on “Diet , nutrition and prevention of chronic diseases”**

Dear Dr Puska,

ISDI is the federation of international special dietary food industries. This organisation gathers the manufacturers of food products which are specifically designed for people with special dietary requirements, such as infants and young children.

ISDI welcomes the opportunity to comment on the above mentioned report and while it is in total agreement with the comments provided by the Confederation of the Food and drink industries of the European Union (CIAA), it would like to comment further, in the attached document, on specific items of the report:

- Diet, nutrition and chronic diseases in context of infancy and childhood (p. 15)
- Nutrient recommendations for the prevention of excess weight gain and obesity (p. 25)

Hoping that these comments will be taken into consideration when finalising the report,

Yours sincerely

Dr Andree Bronner  
Secretary General

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DIRECTOR, NPH



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**COMMENTS ON  
the Draft Report of the joint WHO/FAO expert consultation  
on diet, nutrition and the prevention of chronic diseases**

**INTRODUCTION**

ISDI is the International Special Dietary Foods Industry, with NGO status since 1987, and representing more than 30 National Dietetic Food Associations around the globe. ISDI very much appreciates the opportunity to input into this important global collaborative action and sincerely thanks Dr Puska for his kind invitation to do so.

Industry, from farm to fork, is key in the food/consumer nexus, and any changes in the world's food systems will certainly affect the food industry. It is of considerable importance then, that industry be fully participating in these discussions.

Industry thoroughly supports the intention of the report: to improve health, reduce human morbidity and suffering, to improve length and quality of life. These are goals of the highest value and importance.

Because ISDI members are producers of Special Dietary Foods, our comments are limited to points in the Draft Report and Scientific Annexes, which bear on these types of products. We would like to point out some omissions and misinterpretations in the Draft Expert Consultation Report.

**INFANT FORMULA**

- *Page 15 of the Expert Consultation Report*

On page 15 of the report the statement is made that the fact of not breastfeeding is a factor in later chronic disease risk and additionally that formula milk and/or not breastfeeding has an adverse effect on cardiovascular risk factors.

We believe that such a statement should be backed up by scientific references, ideally with a consideration of the available studies on the subject. However, in Annex 4 of the Expert Consultation Report "The scientific basis for diet, nutrition and the prevention of cardiovascular disease", there is strictly no mention of any related science at all.

On the other hand, we are aware of a body of evidence, which indicates the opposite relationship. Over a decade ago, an epidemiological study showed increased risk of death from ischemic heart disease in adult men who had been breast fed for one year (1). Another study, in infant baboons reared on baboon-adapted infant formula, showed over the long term, a less atherogenic lipoprotein profile after weaning than did the baboons reared on their mothers' milk (2). Additionally, there was strong evidence of less arterial fatty streaking in the formula fed animals. Arterial streaks are a sign of atherosclerosis, a serious risk factor for heart attack. More recently, the BMJ published a report showing decreased arterial distensibility in young adult men who had been breastfed for 4 months or longer (3). Decreased arterial distensibility is an adverse vascular change related to hypertension and cardiovascular disease.

**Babies who are breastfed accrue many benefits from breastfeeding: this is not disputed.** However when a statement is made, such as on page 15 of the Draft Expert Consultation Report that "the weight of current evidence indicates" something as important as "adverse effects on CVD risk factors", this evidence should be presented.

- *Page 25 of the Expert Consultation Report*

On page 25 of the report, the statement is made that breastfeeding at birth is protective for overweight and obesity, although the statement as formulated is not very clear whether it is the infant or the mother who is protected. In Annex 2, "The scientific basis for diet, nutrition and the prevention of excess weight gain and obesity" many studies relating breastfeeding to later obesity are discussed. Here it is clearly stated that the evidence for a protective effect is not strong, and this conclusion is reiterated in Annex 2, Table 2: Potential nutrition intervention strategies to reduce overweight/obesity prevalence (page 38).

The reduction of the risk of later obesity by breast feeding is not demonstrated, therefore other science-based and well-known reasons should be used.

## REFERENCES

1. Fall CH, Barker DJP, Osmond C, Winter PD, Clark PM, Hales CN. 1992. Relation of infant feeding to adult serum cholesterol concentration and death from ischemic heart disease . Br. Med. J. Vol. 304 pp801-805.
2. Mott GE, Jackson EM, McMahan CA, McGill HC. 1990. Cholesterol metabolism in adult baboons is influenced by infant diet. J. Nutr Vol 120, pp243-251.
3. Leeson CPM, Kattenhorn M, Deanfield, JE, and Lucas A. 2001. Duration of breast feeding and arterial distensibility in early life:population based study. Br. Med. J. Vol 322 pp 643-647.