

# Scientific Advisory Committee on Nutrition

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**Paper for discussion:           Diet, Nutrition And The Prevention of  
Chronic diseases  
Report of a Joint WHO/FAO Expert Consultation**

**Agenda item: 7**

The WHO report *Diet, Nutrition and the Prevention of Chronic Disease* was published March 2003. A summary of the key recommendations made in the report along with relevant UK recommendations is attached. The rationale behind the recommendations is given in section 5 of the WHO report.

Further information about the WHO report can be found at:  
[http://www.who.int/hpr/NPH/docs/who\\_fao\\_expert\\_report.pdf](http://www.who.int/hpr/NPH/docs/who_fao_expert_report.pdf)

**Members are requested to comment on the WHO Expert Consultation and note the population dietary goals.**

## **Background**

The WHO/ FAO Expert Consultation on Diet, Nutrition and the Prevention of Chronic Diseases met in Geneva from 28 January to 1 February 2002, to examine the science base of the relationship between diet and physical activity patterns, and the major nutrition-related chronic diseases. Recommendations were made to help prevent death and disability from major nutrition-related chronic diseases. It was envisaged that the recommended population nutrient intakes and physical activity goals contribute in the development of regional strategies and national guidelines to reduce the burden of disease related to obesity, diabetes, cardiovascular disease, several forms of cancer, osteoporosis and dental diseases. The recommendations are based on the examination and analyses of the best available evidence and the collective judgement of a groups of experts representing the global scope of WHO's and FAO's mandate.

### **The executive Summary of the WHO report states that:**

“Healthy diets and physical activity are key to good nutrition and necessary for a long and healthy life. Eating nutrient dense foods and balancing energy intake with the necessary physical activity to maintain a healthy weight is essential at all stages of life. Unbalanced consumption of foods high in energy (sugar, starch and/or fat) and low in essential nutrients contributes to energy excess, overweight and obesity. The amount of the energy consumed in relation to physical activity and the quality of food are key determinants of nutrition related chronic disease.

“Not all fats are the same, it pays to know the difference. The scientific complexities of these issues should not obscure the simple messages required to orient and guide consumers. People should eat less high calorie foods, especially foods high in saturated or trans fats and sugars, be physically active, prefer saturated fat and use less salt; enjoy fruits, vegetables and legumes; and select food of plant and marine origin. This consumption pattern is not only healthier but more favourable to the environment and sustainable development.

“To achieve best results in preventing nutrition-related chronic diseases, strategies and policies should fully recognise the essential role of both diet and physical activity in determining good nutrition and optimal health. Policies and programmes must address the need for change at the individual level as well as the modifications in society and the environment to make healthier choices accessible and preferable”.

The WHO recommendations shown on the following page were developed for consideration by national and regional bodies establishing dietary recommendations for the prevention of diet-related chronic diseases. The recommendations are expressed in numerical terms rather than increases or decreases in intake of specific nutrients, because the desirable range will depend upon existing intakes in the particular population, and could be in either direction. The recommendations are directed towards energy supplying macronutrients. The report states that “This must not be taken to imply a lack of concern for other nutrients. Rather, it is a recognition of the fact that previous reports issued by the FAO and WHO have provided limited guidance on the meaning of a “balanced diet” described in terms of the proportions of the various energy sources, and that there is an apparent consensus on this aspect of diet in relation to effects on the chronic non-deficiency diseases.

## Comparison of population dietary goals with current UK recommendations

The following table allows comparison with current UK recommendations (based on COMA 1991, 1994 and 1998). An indication of current UK intakes is also given, where available. The forthcoming National Diet and Nutrition Survey of adults will provide more detailed, up to date information on population intakes.

### Population dietary recommendations and intakes

	<b>WHO Expert Consultation (2003)</b>	<b>UK recommendations (COMA 1991, 1994, 1998)</b>	<b>UK intakes (NDNS 1990, 2002 &amp; NFS 2000)</b>
Total fat	15-30% total energy	No more than: 33% total energy 35% food energy	36.5% <sup>1</sup> 38.2% <sup>1</sup>
Saturated fatty acids	<10% energy	No more than: 10% total energy 11% food energy	14.5% <sup>1</sup> 15% <sup>1</sup>
Polyunsaturated fatty acids	6-10% energy	No more than 10% of food energy	
n-6 polyunsaturated fatty acids	5-8% total energy	No further increase from 6 % of total energy 6.5% of food energy	
n-3 polyunsaturated fatty acids	1-2% total energy	0.2 g/day (1.5g/week)	
<i>Trans</i> fatty acids	<1% total energy	No more than 2% energy	
Total Carbohydrate	55-75% total energy	Approximately 50% total energy	47.6% <sup>1</sup>
Free Sugars	<10% total energy	No more than 10% energy	
Protein	10-15% energy	Average intakes approx. 15% of energy, above RNI (COMA 1991)	
Cholesterol	<300mg / day	Average intakes should not rise	217mg <sup>1</sup>
Salt	<5g / day	no more than 6g salt per day	9g <sup>2</sup>
Fruits and vegetables	400g+ / day	Increase intakes of a wide variety of fruit and vegetable to at least 5 portions per day	2.8 portions per day <sup>3</sup>
Non starch polysaccharides	>20g/day	increase in non-starch polysaccharides to 18g per day	12.7g/person/day <sup>1</sup>

<sup>1</sup> National Food Survey 2000. Household consumption including alcoholic drinks and confectionery.

<sup>2</sup> National Diet and Nutrition Survey of adults, 1990.

<sup>3</sup> National Diet and Nutrition Survey of adults (volume 1), 2002.