



Can a New Diet-Exercise Paradigm Combat The Chronic-Disease Pandemic?

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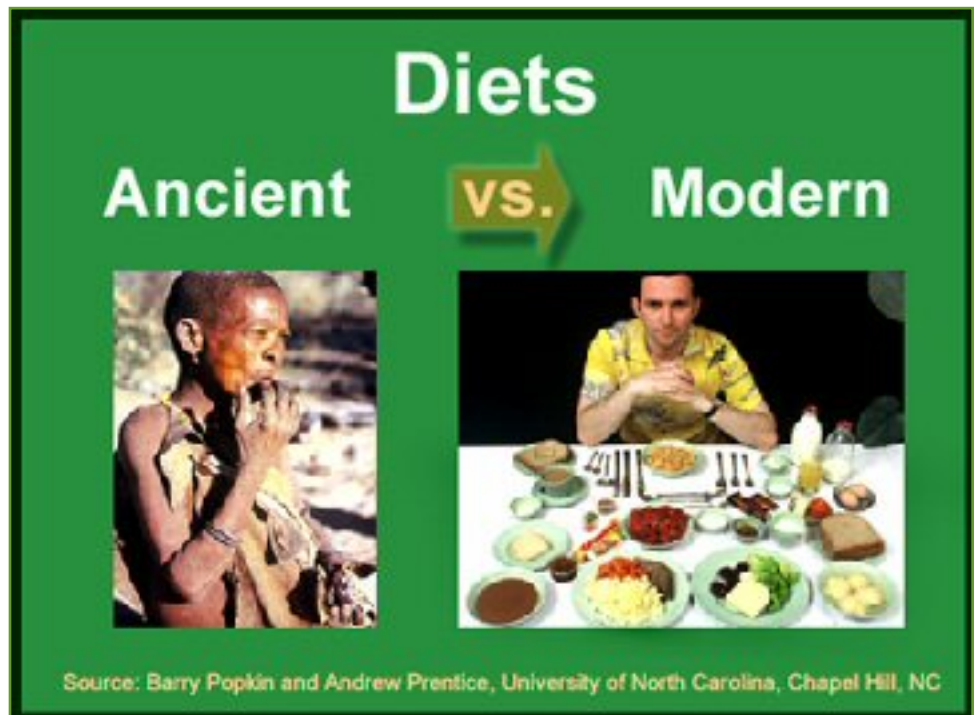
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WHO/FAO Tackle Diet-Disease Epidemic

by Dr. Derek Yach, Executive Director, Noncommunicable Diseases and Mental Health, and Dr. Pekka Puska, Director, Noncommunicable Disease Prevention & Health Promotion, World Health Organization, Geneva



Calorie- and fat-laden diets, as well as sedentarism, are major culprits in modern-day chronic-disease pandemic.

"Less saturated fats, sugar and salt, [and] more fruit, vegetables and physical exercise [are] needed to counter cardiovascular diseases, cancer, diabetes and obesity," concludes a joint expert consultation of the World Health Organization/Food and Agriculture Organization (WHO/FAO) in a report on diet, nutrition and the prevention of chronic diseases. Released March 3, 2003, these updated recommendations are based on analysis of the best available evidence and the collective judgment of 30 experts. They are aimed at alleviating the increasing global burden of chronic diseases that the experts attribute to rapid changes in diet and lifestyle accompanying urbanization, economic development and market globalization in recent decades, particularly in developing countries and countries in transition.

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Developing Nations Lead Chronic Disease Epidemic

In 2001, chronic diseases contributed 46 percent of the global disease burden. This proportion is expected to rise to 57 percent by 2020. Contrary to widely held beliefs, however, chronic diseases are already the leading killer in most of the developing world, according to the expert report. In fact, by 2020, developing countries are projected to account for almost three-quarters of all deaths from chronic diseases, and 71 percent of deaths from ischaemic heart disease, 75 percent of deaths from stroke and 70 percent of deaths from diabetes. Indeed, cardiovascular disease (CVD) prevalence in India and China already exceeds the prevalence of CVD in all economically developed countries combined, the experts reported. Similarly, the global epidemic of obesity is not limited to industrialized nations. In parts of Asia, Latin America and Africa, the prevalence of obesity has doubled or tripled over the past decade.

A few, largely preventable risk factors -- high cholesterol, high blood pressure, obesity, tobacco use and low physical activity levels -- account for most of the world's rising chronic-disease burden, according to the WHO/FAO expert consultation. Throughout the world, but more recently and swiftly in developing countries and countries in transition, traditional, largely plant-based diets have been replaced by high-fat, energy-dense diets; simultaneously, there has been a decline in energy expenditure associated with less active lifestyles. In São Paulo, Brazil, for example, between 70 and 80 percent of the population now leads a sedentary life.

Experts Recommend Nutrient and Physical Activity Goals

To reduce the risk of chronic diseases, the experts recommend population nutrient goals, pointing out that, for best results, national and international strategies and policies should recognize the critical role of both diet and physical activity in determining optimal health. Thus, in addition to dietary intake objectives, the experts espouse moderate-intensity physical activity for at least an hour a day.

They also stress that the balance of energy consumption and physical activity, as well as food quality, are key determinants of nutrition-related chronic diseases. Overall, they emphasize that not all fats or carbohydrates are the same and that people should consume less high-calorie foods, especially foods teaming with saturated fats and sugar. In addition to being physically active, they encourage individuals to use less salt; enjoy fruits, vegetables and legumes; and select foods of plant and marine origin.

Specifically, the experts recommend that total fat contribute 15 to 30 percent of daily energy intake, with saturated fats comprising less than 10 percent, n-6 polyunsaturated fatty acids (PUFAs) 5 to 8 percent, n-3 PUFAs 1 to 2 percent, trans fatty acids less than 1 percent and monounsaturated fatty acids making up the rest of the fat-derived energy. The experts further recommend that total carbohydrates make up 55 to 75 percent of total energy, with free sugars (i. e., added sugars) contributing less than 10 percent. In addition, they advise protein comprise 10 to 15 percent of energy intake; salt intake be restricted to less than 5 grams/day; and at least 400 grams of fruit and vegetables be consumed daily. They emphasize consumption of more than 25 grams/day of total dietary fiber, primarily from whole grains, fruits and vegetables.

"The Epidemic Can Be Halted"

According to the experts, countries that have actively intervened in the diets and behaviours of their populations via integrated approaches linking communities, governments, food producers and processing industries have seen dramatic decreases in risk factors and disease rates. In North Karelia, Finland, for example, age-adjusted CVD mortality rates dropped dramatically between the early 1970s and 1995, mostly due to dietary changes assisted by community action and consumer demand. The Republic of Korea, which despite industrialization has largely maintained its traditional high-vegetable, low-fat diet, reports lower rates of chronic diseases and obesity than other industrialized countries with similar economic development. These examples confirm

that "This epidemic can be halted [and] ...appreciable changes can occur rapidly," according to the convened experts.

WHO has stated that the expert report will serve as a critical science-based foundation for member states to prepare national health strategies and simple, food-based guidelines suited to local socio-economic conditions, both for individuals and populations. Meanwhile, it is a major step towards formulating WHO's "Global Strategy on Diet, Physical Activity and Health" for the World Health Assembly in 2004. [[back to front....](#)]

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