Conference report: Dietary guidelines for a new millennium

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Abstract
The US dietary guidelines are being updated, new dietary guidelines for older Australians were released last year, and Australia and New Zealand are jointly reviewing recommendations for nutrient intakes. Who needs them? Are they merely bureaucratic exercises or should we be taking them seriously? If so, how should they be managed for maximum benefit?

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The US dietary guidelines are being updated, new dietary guidelines for older Australians were released last year, and Australia and New Zealand are jointly reviewing recommendations for nutrient intakes. Who needs them? Are they merely bureaucratic exercises or should we be taking them seriously? If so, how should they be managed for maximum benefit? The United States has a process for regular, five yearly reviews of their guidelines, with rigorous scientific validation based on current NHANES survey data and wide iterative consultation. In Australia an adequate process is lacking; guidelines are updated infrequently and with no obvious link to the current nutritional status of the population. Issues such as these were underlying discussions at a conference on dietary guidelines which was jointly hosted by the Smart Foods Centre and ILSI Australasia at the University of Wollongong in February, with support from the Heart Foundation and the NSW Cancer Council.

Keynote speaker Dr Suzie Harris, Executive Director of ILSI's Human Nutrition Institute in Washington DC, discussed the rationale for changes being introduced in the new US dietary guidelines and their implications. Her paper appears in this issue of Food Australia (p212). Professor Colin Binns gave an outline of dietary guidelines in Australia with emphasis on the new guidelines for older Australians, describing their significance and the process for their establishment.

Dr Lynne Cobiac was joined by Dr Harris and Professor Paul Nestel in a discussion of recommendations for nutrient intakes and the need to shift the emphasis from preventing nutritional deficiency toward optimising health. Such an approach would require defining additional nutrients and possibly eventually non-nutrients as scientific evidence for their beneficial roles emerges. A review of the potential for extending nutrient recommendations into new areas such as antioxidants etc is currently being undertaken in the US. Importantly, substantiation of health claims will necessitate scientifically validated RDIs for an expanding range of nutrients.

Representatives of stakeholder groups were invited to comment on dietary guidelines and RDIs from their perspective. While Janine Lewis (ANZFA) confirmed their value in developing food standards, Dr Geoff Annison (Australian Food & Grocery Council) argued that the existing guidelines may actually impede appropriate diet selection and development of healthier products by the food industry. In relation to dietary counselling and consumer education, Assoc. Professor Sandra Capra (Dietitians Association of Australia), Susan Anderson (Heart Foundation), Jeannie McKenzie (NSW Cancer Council) and Matt O’Neill (Australian Consumers Association) emphasised the need for consistent messages and warned against over-simplification. Manuscripts of these presentations will be published in the September issue of Australian Journal of Nutrition and Dietetics.

Neville Owen, Dr David Sullivan, Dr Peter Williams, Professor Peter Howe, Dr Ivor Dreosti and Professor Paul Baumgartner summarised aspects of the scientific rationale behind the guidelines. Their papers will appear in the December issue of Australian Journal of Nutrition and Dietetics.

Several outcomes and recommendations were highlighted in discussions:

1. The potential users, applications and implications of dietary guidelines are very diverse. They represent far more than a simple nutrition guide for consumers or educational tool for dietitians and health promotion organisations. They serve as a national reference for policy setting by regulatory authorities and other government bodies. In their current form however, they may be seen as an impediment by food manufacturers. Hence the need for wider representation and consultation in the development of guidelines.

2. This need must be served by an agreed process for reviewing guidelines and nutrient intake recommendations on a regular basis, which is linked to a regular program for assessing the nutrient intakes and correlations with health status (ie National Nutrition and Health surveys) upon which they are based. A well-defined and well-publicised process would ensure adequate opportunities for all stakeholders to participate in the development of guidelines.

3. Australia cannot afford to develop guidelines in isolation. The knowledge to be gained from international sharing of information on trends in nutrition, eating behaviour, food product development and associated health, economic and ecological issues, together with experiences of policy development and implementation, would be invaluable.

4. Despite the existing ad hoc approach, Australia’s current status in nutrition policy and education is commendable, thanks largely to the far-sighted vision of a few leaders in the field. To maintain that position however, we need an established program of population survey, policy review and guideline setting, which is coordinated with similar activities in North America, Europe and elsewhere, with clearly delineated opportunities for all potential stakeholders to contribute. Such a process should be seen as an integral part of a more cost-effective approach to primary health care.

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