



The Importance of Nutrition

The world we live in is seeing a dramatic increase in newer forms of malnutrition that are being characterized by obesity and the long-term implications of unbalanced dietary and lifestyle practices that result in chronic diseases such as cardiovascular disease, cancer and diabetes.

Diabetes especially is said to be the fastest growing disease in developed countries. Nutritional advice, education on food choices, lifestyle choices, exercise and programs to lose weight all revolve around nutrition.

The World Health Organisation (WHO) states: "In people over 65, health expenditures are 7 times higher among the chronically disabled. With reduction in tobacco use, improved screening and early treatment of cancer, development of new genetic detection of risks, improved environments and nutrition and increased awareness in the population, we may be able to drastically reduce the need for treatment and care in people over 65."

Nutrition is the basis to life. If what we put into our bodies is of poor quality, then our bodies will suffer nutritional deficiency.

Nutrition must be seen as the foundation or core modality from which to build upon. Again, if the foundation is not structurally sound, then any stressors, deficiencies, pollution etc, will cause systemic problems.

Nutrition is not just about the food we eat and in the right quantities. It is about how our body absorbs and digests this food that is also crucial. Therefore if our digestive process is dysfunctional, we may be missing out on vital nutrients.

It is interesting to note that the biggest selling class of drugs in Australia are anti-reflux drugs (i.e. proton pump inhibitors). This highlights that there is a real problem in this area.

If the population could improve their food choices, reduce their intake of highly processed foods, alcohol, highly salted foods, excessive caffeine, and improve blood sugar regulation, they may not be so reliant on digestive medication and billions of dollars could be saved.

The following quote from the World Health Organisation Website sums up well the importance of nutrition:

Nutrition is an input to and foundation for health and development. Interaction of infection and malnutrition is well documented. Better nutrition means stronger immune systems, less illness and better health. Healthy children learn better. Healthy people are stronger, are more productive and more able to create opportunities to gradually break the cycles of both poverty and hunger in a sustainable way. Better nutrition is a prime entry point to ending poverty and a milestone to achieving better quality of life.

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Controlling the global obesity epidemic-The Nutrition Challenge

Obesity is one of today's most blatantly visible – yet most neglected public health problems. The escalating global epidemic of overweight and obesity – “globesity” – is taking over many parts of the world. If immediate action is not taken, it is estimated that millions will suffer from an array of serious health disorders.

Obesity is a complex condition, one with serious social and psychological dimensions, that affects virtually all age and socioeconomic groups and threatens to overwhelm both developed and developing countries.

In 1995, there were an estimated 200 million obese adults worldwide and another 18 million under-five children classified as overweight. As of 2000, the number of obese adults has increased to over 300 million. (WHO statistics)

Generally, although men may have higher rates of overweight, women have higher rates of obesity. For both, obesity poses a major risk for serious diet-related non-communicable diseases, including diabetes mellitus, cardiovascular disease, hypertension and stroke, and certain forms of cancer. Its health consequences range from increased risk of premature death to serious chronic conditions that reduce the overall quality of life.

Osteoporosis

Osteoporosis and associated fractures are a major cause of illness, disability and death,

and are a huge medical expense. It is estimated that the annual number of hip fractures worldwide will rise from 1.7 million in 1990 to around 6.3 million by 2050. Women suffer 80% of hip fractures; their lifetime risk for osteoporotic fractures is at least 30%, and probably closer to 40%. In contrast, the risk is only 13% for men. (WHO statistics)

Women are at greater risk because their bone loss accelerates after menopause. Prevention is possible with hormone therapy at menopause. Lifestyle factors – especially diet, but also physical activity and smoking – are also associated with osteoporosis, which opens the way for primary prevention. The main aim is to prevent fractures; this can be achieved by increasing bone mass at maturity, by preventing subsequent bone loss, or by restoring bone mineral. Particularly important are adequate calcium intake and physical activity, especially in adolescence and young adulthood.

Australia's aging population-The nutritional challenge

Older persons are particularly vulnerable to malnutrition. Attempts to provide them with adequate nutrition encounter many practical problems. First, their nutritional requirements are not well defined. Since both lean body mass and basal metabolic rate decline with age, an older person's energy requirement per kilogram of body weight is also reduced.

The process of ageing also affects other nutrient needs. For example, while

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requirements for some nutrients may be reduced, some data suggest that requirements for other essential nutrients may in fact rise in later life. There is thus an urgent need to review current recommended daily nutrient allowances for this group. There is also an increasing demand worldwide for WHO guidelines that competent national authorities can use to address the nutritional needs of their growing elderly populations.

Malnutrition and older persons

Many of the diseases suffered by older persons are the result of dietary factors, some of which have been operating since infancy. These factors are then compounded by changes that naturally occur with the ageing process.

The reduced absorption of B12 and folate has been linked to dementia and depression. The poor absorption of iron, zinc, calcium and other minerals and vitamins has been linked to many debilitating diseases such as anaemia, cancer, osteoporosis, and digestive disorders.

The incorrect type of dietary fat seems to be associated with cancer of the colon, pancreas and prostate. Atherogenic risk factors such as increased blood pressure, blood lipids and glucose intolerance, all of which are significantly affected by dietary factors, play a significant role in the development of coronary heart disease.

Degenerative diseases such as cardiovascular and cerebrovascular disease, diabetes, osteoporosis, cancer and macular degeneration, which are among the most

common diseases affecting older persons, are all diet-affected.

Increasingly in the diet/disease debate, the role that micronutrients play in promoting health and preventing non-communicable disease is receiving considerable attention.

Micronutrient deficiencies are often common in elderly people due to a number of factors such as their reduced food intake and a lack of variety in the foods they eat.

Another factor is the price of foods rich in micronutrients, which further discourages their consumption. Compounding this situation is the fact that the elderly often suffer from decreased immune function, which contributes to this group's increased morbidity and mortality. Other significant age-related changes include the loss of cognitive function and deteriorating vision, all of which hinder good health and dietary habits in old age.

Elevated serum cholesterol, a risk factor for coronary heart disease in both men and women, is common in older people and this relationship persists into very old age. As with younger people, drug therapy should be considered after serious attempts have been made to modify diet.

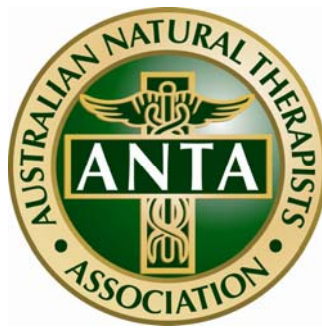
Intervention trials have shown that reduction of blood pressure by 6 mm Hg reduces the risk of stroke by 40% and of heart attack by 15%, and that a 10% reduction in blood cholesterol concentration will reduce the risk of coronary heart disease by 30%. (WHO statistics)

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Dietary changes seem to affect risk-factor levels throughout life and may have an even greater impact in older people. Relatively modest reductions in saturated fat and salt intake, which would reduce blood pressure and cholesterol concentrations, could have a substantial effect on reducing the burden of cardiovascular disease. Increasing consumption of fruit and vegetables by one to two servings daily could cut cardiovascular risk by 30%.

There is considerable scope for changes in our health system. The first and most important one is to invest in prevention and early detection.

Iron deficiency anaemia-It still exists in developed countries

Iron deficiency is the most common and widespread nutritional disorder in the world. As well as affecting a large number of children and women in developing countries, it is the only nutrient deficiency that is also significantly prevalent in industrialised countries.

The numbers are staggering: 2 billion people – over 30% of the world's population – are anaemic, many due to iron deficiency.

Iron deficiency affects more people than any other condition, constituting a public health condition of epidemic proportions. More subtle in its manifestations than, for example, protein-energy malnutrition, iron deficiency exacts its heaviest overall toll in terms of ill health, premature death and lost earnings.

This is a basic area that the modality of nutrition can address. But improving food choices, improving digestion and recommending a simple blood test, the health of thousands of Australians could be improved.

Educating patients and implementing nutritional services will save governments, health insurance companies and the public billions of dollars.

To find your nearest Naturopath or Nutritionist contact the Australian Natural Therapists Association (ANTA) on free call 1800 817 517 or visit www.anta.com.au

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