

AHA Seeks to Make Healthier Diet a Reality

BY MITCHEL L. ZOLER

The American Heart Association and several other health-advocacy groups have had healthy-diet recommendations on the table for several years while obesity raged on. Now the AHA has released a plan on how America can make better diets part of everyone's everyday life.

The AHA's Scientific Statement on Implementing American Heart Association Pediatric and Adult Nutrition Guidelines proposes "new approaches to implementing a healthful diet within the context of contemporary eating patterns."

"We're in the midst of an obesity epidemic and something needs to be done," said Dr. Samuel S. Gidding, chairman of the AHA's Nutrition Committee, the group that issued the new guidelines. "A lot of food that is not healthful is cheap and easily available in larger and larger portions. We try to get at how to interrupt this," he said in an interview.

The guidelines identify four levels of influence on eating behaviors, and make recommendations for intervening at each level: the individual (level 1); the family and environment (level 2); the local community, including schools, work sites, and restaurants (level 3); and the larger community, including government, industry, the media, and technology (level 4). Interactions between patients and health care providers are placed at levels 1 and 2 (Circulation 2009;119:1161-75).

Levels 1 and 2 include the recommendations that health care providers learn behavioral change and motivational-interviewing strategies, and that information on these steps be part of the education programs for physicians, nurses, and dietitians. Health care professionals are also asked to develop evaluation tools that increase sensitivity to patients' readiness to change eating behaviors, and also boost sensitivity to social elements that affect dietary patterns.

Acknowledging the time constraints that providers face in most office encounters, the guidelines recommend that health care providers "deliver simple positive messages directed at the major causes of poor nutrition." These messages could include eating breakfast; eating fruits, vegetables, and whole grains; limiting intake of sugar-containing beverages to less than 12 oz/day; limiting snacks to once a day; eating smaller portions; weighing regularly; and adjusting dietary intake based on weight.

The guidelines also call on health care providers to model healthy behaviors and recommend that health care providers "incorporate weight screening and body mass index calculation into all [visits] for adults and children."

The rationale behind routine weight screening at every visit is that "obesity is a major trigger of morbidity" that cuts across a wide range of diseases, including cardiovascular diseases, cancers, diabetes, respiratory disorders, and arthritis, said Dr. Gidding, director of pediatric cardiology at the Nemours Cardiac Cen-

ter of the Alfred I. duPont Hospital for Children in Wilmington, Del.

A BMI that reaches the definition of obesity (defined in adults as 30 kg/m² or greater, and in children as a BMI meeting the criterion in the age- and gender-adjusted pediatric tables) should trigger active intervention by a health care provider, he said.

At the local community level, the guidelines call for steps such as stronger nutri-

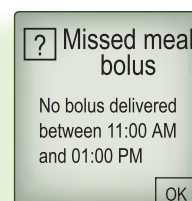
tion standards for school meal programs; work-based wellness programs and nutrition policies that lead to healthy foods in meetings, cafeterias, and vending machines; and improved community access to locally grown foods and supermarkets that offer more fresh and whole foods.

In the larger, national community, the guidelines recommend providing subsidies for good food choices through financial and other incentives, as well as

government subsidies and incentives to bring healthier foods to the national market; using the media to market nutrition by countering unhealthy food messages; and empowering consumers through more comprehensive food and portion-size labeling.

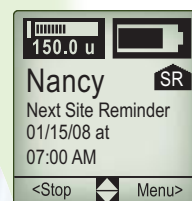
The new statement also says that "a strong advocacy agenda is being formulated around the country to implement these principles." ■

More Control Better Diabetes Management



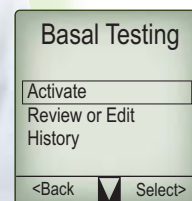
Bill, age 67

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Nancy, age 36

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Joe, age 12

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