Meeting Report

The WCRF Expert Panel Report as a model for advice and policy analysis for other (non-cancer) chronic disease, with specific note on WHO Technical Report 797 on diet, nutrition and prevention of chronic disease: Summary of Working Group 4

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Summary of Group 4
Working Group 4 consisted of 20 individuals from Cuba, USA, Spain, Argentina, Hong Kong, Thailand, UK, Australia, Switzerland, Malaysia, Guatemala, and Brazil. They came from universities, research councils, national nutrition associations and the World Health Organization (WHO).

The Working Group considered the World Cancer Research Fund (WCRF) expert panel process as a model for advice and policy analysis for other (non-cancer) chronic diseases. This process produced the publication *Food nutrition and the prevention of cancer: A global perspective* of the World Cancer Research Fund and the American Institute for Cancer Research. The group concluded that the WCRF process was very important and useful, and that it should be used in the development of future policy tools with similar objectives.

Participants of the Working Group also reported that the WHO publication *Diet, nutrition, and the prevention of chronic diseases* (WHO technical report 797) has been very important and has been used for teaching, advocacy, background and recommendations for action. However, they recognize that the book needs to be updated because the study group met in March 1989 and the book was published in 1990.

The World Health Organization has reported they are starting the process of updating the book. They expect to have a resolution about the importance of dealing with chronic diseases by the May 2002 WHO Assembly.

The World Health Organization is currently setting up a surveillance system to monitor chronic disease risk factors, and it is expected that in the next 3 years 50% of all of the countries will have this system in place.

The World Health Organization has reported that the update of the global burden of disease study that was published in 1996, but based on data from 1990, is underway. The new publication will be out in 2002 and will be another useful reference in the area of chronic disease.

The Group recommended that any update of WHO Technical Report 797 *Diet, nutrition, and the prevention of chronic diseases* be comprised of three major chapters: One chapter is devoted to evidence-based science, a second is devoted to case studies and a third to policy and programs. With this major framework, the life-cycle approach and the integrated food-based approach should be used throughout the entire report.

Specific recommendations for the chapter on evidence-based science included:
- systematic literature review on the status of the Barker programming hypothesis;
- systematic review of anthropometric indicators, in particular BMI;
- address the changing status of adolescents and children relative to changes in food patterns;
- address the role of functional foods on preventing chronic diseases;
- address the role of genetics as well as factors related to lifestyle and behaviour;
- take into account that an individual usually has more than one disease or pre-disease condition; looking at only one chronic disease at a time is unrealistic and not useful;
- consider evidence from basic science studies as well as epidemiological ones;
- emphasize the benefits of breast feeding and maternal nutrition.

Because the case studies reported in the second chapter will be useful in planning for action, the chapter containing case studies should include:
- case studies of both successful and unsuccessful programs.

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• case studies from many different levels, international, national, regional, local, and so on;
• case studies of many types of interventions: market interventions, government interventions, community interventions, and so on.

Where possible, case studies should be reported using a common format. It was also recognized that case studies from developed countries can be useful for workers in developing countries and vice versa because the populations being served are often similar (in the burden of chronic diseases) irrespective of the country in which they are located.

The vision of the policy and programs chapter could be summarized as ‘Dying healthy in old age’. This chapter should be based on the science-based evidence reported in the first chapter and should include a section on monitoring. It should have a section on targets related to prevention of chronic diseases. The group recognized the importance of setting quantitative population targets, but concluded that the report should set up the framework for setting these goals. However, each region should set its own targets.

The third chapter should address food-based guidelines. The group recommended that:

1. Using the WCRF (1997) report as an example, it is feasible to have general food guidelines that can be applied across cultures.
2. Food-based guidelines should address a group of nutrition-related chronic diseases rather than a single nutrient and/or a single disease.
3. Food-based guidelines should be made in the context of eco-nutrition; they should consider what is sustainable and available rather than what is ideal.

Finally, programs and policies relative to the prevention and treatment of chronic disease should not only consider foods, but also other lifestyle factors such as encouraging physical activity and cessation of smoking.