Concurrent Session 13

How to assess ‘food miles’ – a pilot study

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Background - The concept of ‘food miles’ has been developed to express the distance that food travels between primary producer and consumer, and recognises that transport is a major source of environmental cost in the food supply chain. An extension of this concept includes the distance that the consumer travels to obtain the food. In both cases, the form of transport is relevant to environmental cost, and the point of production of the food may be relevant to consumers who wish to support local primary producers. Typically, ‘food miles’ have been investigated for food commodity groups available to a population, however quantification of food miles for individual intake could lead to insight into the dynamics of food transport within a population.

Objective - To determine the barriers to assessment of the distance travelled and the transport modes used for food to arrive at a place of consumption for all of the food intake of an individual.

Design - Student subjects (n=8) from Melbourne and dietitians (n=3) from different cities in Australia were asked to keep food records and for each food provide details such as place of purchase, transport from place of purchase to place of consumption, brand, and place of production of primary food.

Outcomes - Educated consumers are unable to provide information on place of primary production of most foods such that a useful estimate of food miles can be made. Food packaging provides relatively non-specific information on the place of primary production (eg made in Australia, or imported), and information on where food was produced is most often not available from the point of purchase for ready-to-eat foods. It is not clear how to partition an estimate of food transport pre- or post-purchase when transport is undertaken for multiple purposes. Home primary production is uncommon.

Conclusions - Consumers are unaware of the place of primary production of their food. A low cost method of assessing ‘food miles’ of individual food intake is not practical at present.

Reported dietary habits and intentions of Australian primary care patients with diabetes, obesity, hypertension and hyperlipidaemia

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Background - The cvTRACplus program is a national general practitioner-based assessment of coronary heart disease (CHD) risk factors in ‘at risk’ patients which aims to facilitate a comprehensive and co-ordinated approach to CHD risk management in general practice.

Objective - To undertake an examination of dietary behaviours in patients considered to be ‘at risk’ of CHD.

Design - Statistical analysis of baseline data from the 55880 cvTRAC patients was performed using SPSS v12.

Outcomes - The mean age ± SD of the cohort was 60.1 ± 11.1 years, and the proportion of males to females was 48.7:51.3. The majority of patients with diabetes (n=18279) reported following a low-fat diet (70.6%), and a greater proportion of female than male diabetics indicated following a low-fat diet (74.4% versus 67.4% respectively, P<0.001). The prevalence of obesity (BMI ≥ 30 kg/m²) in the cohort was 40.7%. Females with obesity were more likely to report following a low-fat diet than males (63.6% in females and 53.3% in males, P <0.001). Similarly for hyperlipidaemia (n=35656), females were more likely than males to report consumption of a low-fat diet (68.7% versus 60.1% respectively, P <0.001). In hypertensive patients (n=42795), 54.9% reported following a low-salt diet compared with 53.9% in the whole cohort. Female hypertensive patients were more likely to report following a low-salt diet than were male hypertensive patients (58.4% versus 51.3% respectively, P <0.001).

Conclusions - Females at risk of cardiovascular disease were more likely to report the adoption of risk-reducing dietary behaviours than males. The message for those with diabetes to adopt a low-fat diet appears to be well implemented, whereas the adoption of a low-salt diet by those with hypertension is less well implemented.

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