# **NUTRITION UPDATES**

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### Introduction

The theme of this issue is on nutrition. In medical practice, many family physicians are called to give advice to their patients in many settings whether in illness or in health. The College of Family Physicians is pleased indeed to have the Health Promotion Board to sponsor this Family Practice Skills Course. We are also very pleased to have the support of a corps of our top dietitians and nutritionists from the Singapore Nutrition & Dietetics Association and also the Health Promotion Board to be speakers and to author the papers in this issue of the Singapore Family Physicians. The topics together cover what we will need to know on dietary matters.

### **Dietary guidelines**

An overview of dietary guidelines for various stages of life and recommended dietary allowances provide the necessary figures on which to give our recommendations.

#### **Fad diets**

There is a need to manage the dietary information explosion. Over the years, facts and myths as well as misinformation have crept into the popular literature. So have dietary fads that have been proposed for the prevention of disease or improvement of health, confusing both the general population and the medical profession. This plethora of information of varying correctness causes confusion in the minds of the patient and interferes with the ability of the physician to provide nutritional advice.

# **Health supplements**

Health supplements are a big industry as the public buys into the concept of wellness. About one third of all Singaporeans take health supplements. The types of supplements available and their uses need to be understood especially in the stages of life such as in pregnancy and in the elderly. As health supplements are not subject to the same level of testing as drugs, it is even more important that doctors should be aware of the evidence of their efficacy and safety, particularly as some health supplements interact with drugs.

# **Sports performance**

Nutrition for sports performance is a specialty area in itself and is especially important in the context of high performance athletes and those involved in extreme sports such as marathon and triathlons. In the overall strategies, pre-event eating needs to balance a number of factors such as palatability, portability, cost, intestinal tolerance, ease of preparation and overall nutritional value of the meal.

### Medical nutrition for chronic disease

Medical nutrition therapy remains the cornerstone in chronic disease management, apart from medication and regular physical activity. The effectiveness of dietary change on the lowering or reversing the disease burden of common diseases such as coronary heart disease, stroke and certain cancers are well known. The misconception by many people that a comprehensive plan of complete dietary change is necessary to achieved goals paralyses the patient. Some change is better than no change and a simple change in a dietary choice is a good first step. The balance of protective foods is just as important as avoiding foods that contain excessive calories, sugars, saturated and trans fats.

# **Nutrition in the elderly**

The prevalence of protein-energy malnutrition in the elderly at long term institutions ranges from 23-85%. This is an area of great concern as the subsequent unintentional weight loss can lead to reduced physical and cognitive functional status, increased risk of falls, infection and complication rates which in turn leads to higher utilization of health care resources and increased mortality. It is commonly assumed that nutritional deficiencies are an inevitable consequence of aging and disease and that intervention for these deficiencies has limited effect. This is not true and nutritional assessment and treatment should be routine part of care for all elderly persons.

We shall leave the reader to discover the details on each of the topics on nutrition in the pages of this issue.

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