中国营养学会
Chinese Nutrition Socicty

第三届亚洲营养领导人高峰论坛
聚焦：亚洲各地DRIs和膳食补充剂
3rd Asia Nutrition Leaders Summit
Focus: Asia DRIs and Dietary Supplements

会议手册
Program Book

中国营养学会
Chinese Nutrition Socicty

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Contents

Conference Information

Date& Venue

Dates: June 3-4, 2018
Venue: 浙江西子宾馆 Zhejiang Xizi Hotel
中国杭州南山路37号 37th Nanshan Road, Hangzhou, China
Hotel website: http://www.xizihotel.com/
Travel distance: the hotel neighbors National Art Museum of China, Underwater World and the pedestrian street of Qinghefang and it is very close to Xintiandi of West Lake and Famous Product Street beside the lake. It is three kilometers away from the downtown of Hangzhou, five kilometers away from Hangzhou Railway Station, 13 kilometers away from Hangzhou East Railway Station and 35 kilometers away from Xiaoshan International Airport.

Registration

The registration desk (near hotel front desk) is open at:
Sunday, June 3 10:00-18:00

Weather

The temperature in Hnagzhou in June can vary from 20℃ to 29℃, average humidity 68%. Conference venue is air-conditioned.

Name Badge

Each delegates will receive a name badge upon registration. For security reasons, all participants are requested to wear their badges during all conference activities.

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浙江西子湖宾馆方位图
ZHEJIANG XIZI HOTEL SITE MAP

Message from President of CNS

Welcome to the 3rd Asia Nutrition Leaders Summit (ANLS). One of the objectives of Chinese Nutrition Society(CNS) is to encourage exchange of information and experiences in nutrition research, action programmes and cooperation through the Asia Nutrition Leaders Summit. Founded in 1945, CNS has made significant advancements in the field of nutrition science. CNS set up the Chinese Dietary Guidelines in 1989 and revise it every ten years, released the Chinese Dietary Reference Intakes since 1938, organize the biennial China Nutrition Science Congress with over 2000 professionals, as well as set up scientific grants (5 million Yuan) and awards for excellent researchers since 2003.In order to improve the dissemination and application of nutrition knowledge, CNS launched the National Nutrition Week which benefits more than 50 million people since 2015, developed new media platforms with over 150,000 followers and established a system for Chinese Registered Dietitian since 2014.

In this summit, we hope to share DRIs information from different Asian countries and prepare for the next round of DRIs revision. What's more, dietary supplements is a hot topic and there is huge potential for DRIs to be implemented in this area and also to foster collaboration between academics and industry.

Hangzhou is one of the most renowned and prosperous cities in China. The city's West Lake, a UNESCO World Heritage Site, located at the immediate west of the city, is amongst its best-known attractions. Our conference hotel is located very close to the West Lake and surrounded by beautiful sceneries. I hope this conference will provide a platform for exchange of nutrition updates and help promote cooperation among Asian countries. Last but not least, I would like to thank all delegates for supporting CNS and our conference.We hope everyone meet old friends and make new friends, promote our friendship and together push the progress of nutrition science forward.

Prof. Yuexin Yang
President of the Chinese Nutrition Society (CNS)

About the Asia Nutrition Leaders Summit

The Aisa Nutrition Leaders Summit (ANLS) is a high-level biennial academic event organized by the Chinese Nutrition Society. It's mission to provide a platform for nutrition leaders of Asian countries to address the multiple challenges of ending all forms of malnutrition and exploring opportunities for cooperation among Asian nutrition societies and nutritionists.

The 1st ANLS was successfully held in 2014 in Shanghai. Representatives of WHO, UNICEF, EFSA and nutrition leaders from Asia countries were invited to share and discuss the dietary guidelines in different Asian countries. The theme of the 2nd ANLS in Beijing in 2016 was to advocate nutrition policy and actions in China. In response to the call of ending all forms of malnutrition by 2030 under the 2015 sustainable development goals (SDGs) set by the United Nation, we drafted the Beijing Declaration on Nutrition along with 10 Asian countries and areas to commit to: (A) Advocate for the governments' commitment to implement the national/regional nutrition strategies, policies and programmes, supported by data and research initiatives; (B) Improve the multi-stakeholder collaboration in nutrition programmes that require collective actions between governments, international organizations, private sector, civil society and communities; (C) Work together to establish the Nutrition Network in Asia amongst the Asian nutritionists. Eradicate hunger and prevent all forms of malnutrition in Asian region, particularly stunting, wasting and overweight in children under five years of age; and anaemia in women and children among other micronutrient deficiencies; as well as reverse the rising trends in overweight and obesity and reduce the burden of diet-related Non-Communicable Diseases in all age groups; D) Promote nutrition research to generate more evidences, strong databases and solutions for tackling the multiple burden of malnutrition in the Asian region; to develop and maintain an ongoing relationship between all stakeholders, which will provide opportunities for all involved (academia, R&D, industry and policy makers) as well as students and consumers to participate actively in the education, communication, research and implementation programmes in Asia, and make it as a model for global policies of nutrition for all organizations and countries.

3rd ANLS Agenda
Development and Challenges of Asia DRIs

Morning, 4th June, 2018 Yun Ying Hall 云影厅

Moderator: Guansheng Ma， Anura Kurpad		
Time	Title	Speaker
08:50	Welcome Speech	Yuexin Yang
09:00	The origin and evolution of Dietary Reference Values across the lifespan	David Richardson Professor, DR Nutrition
09:20	DRI's in India – nutritional issues driving new updates	Anura Kurpad Professor, St John's Medical College
09:35	Current status of development and implication of DRI in Bangladesh	S.K.Roy President, Nutrition Society of Bangladesh
09:50	Taiwan's DRIs	Guoo-Shyng Wang Hsu President, Nutrition Society of Taiwan
10:05	Dietary Reference Intakes for Japanese 2015	Kiyoshi Tanaka Professor, Kobe Gakuin University
10:20	Dietary Reference Intakes for Korean (KDRIs); Development and Implementation	Youn-Soo Cha President, Korean Nutrition Society
10:35	Photo	
10:40	Tea Break	
Moderator: Duo Li， S.K.Roy		
10:55	DRIs in China	Yuexin Yang President, Chinese Nutrition Society
11:05	Recommended nutrient intakes for Hong Kong population – a Metropolitan of the Southern part of China	Gordon Cheung President, Hong Kong Nutrition Society
11:20	The current RDA in Mongolia	Enkhtaivan Gombosuren President,Mongolia Nutrition Society
11:35	DRIs in Thailand	Chulaporn Roongpisuthipong Honorary Advisor, Nutrition Association of Thailand
11:50	Perspectives and challenges on the development of the revised Recommended Nutrient Intakes in Malaysia (RNI 2017)	Leng Huat Foo Associate Professor, University Science Malaysia
12:05	Discussion & Summary	
12:30	Lunch (Yao Yuan Café 瑶园咖啡厅)	

3rd ANLS Agenda
Global Supplements Symposium

Afternoon, 4th June, 2018 Yun Ying Hall 云影厅

Moderator: Wenhua Ling, Hisanori Kato		
Time	Title	Speaker
14:30	Opening	
14:40	Healthful food components and DRIs: an Asian perspective	Mark L Wahlqvist Professor, Monash University
15:00	Nutrition labeling and health claims of food in Japan	Hisanori Kato Professor, The University of Tokyo
15:20	Food as Medicine: dietary supplements for healthy longevity in Japan	Shaw Watanabe President, Asia Pacific Clinical Nutrition Society
15:40	Tea Break	
16:00	The regulation of health supplements: the emerging global landscape.	Ric Hobby Chairman, International Alliance of Dietary/Food Supplement Associations
16:20	Dietary supplements in Taiwan: regulation, usage and health relevance	Meei-Shyuan Lee Professor, National Defense Medical Center, Taiwan, China
16:40	Analysis of knowledge, attitude and practice about nutrition supplement among residents in China	Guiju Sun Professor, Southeast University, China
17:00	Q&A	
17:20	Summary	

Speaker Bio& Abstract

Yuexin Yang

President, Chinese Nutrition Society
Professor, National Institute for Nutrition and Health

Prof. Yang is currently serving as the president of CNS, and Professor in the National Institute for Nutrition and Health of the Chinese Center for Disease Control and Prevention. Prof. Yang is generally recognized as an active academic leader in nutrition science. She is responsible for hosting a series of important national research projects and standard establishment, national development plan and policy advocacy in the field of nutrition in China.

Prof.Yangis the coordinator director of FAO—NEASIAFOODS since 2002,vice president of Global Phytonutrients Society,council memberof the Federation of Asian Nutrition Societies (2015-2019) and fellow of the International Union of Nutrition Societies.She is the director of the Committee for the Chinese Dietary Guideline (2014-2016), council member of the National Food and Nutrition Committee (2015-2020), director of the Working Group on National Food Nutrition Labeling(2002-2012, 2017-2019),member of the National Food Safety Standards Committee since 2010, vice director of the Committee for Chinese DRIs (2009-2013), and council member of the Health Food Evaluation Committee of CFDA since 2000.

Prof. Yang's research interest is primarily on the study of maternal and child nutrition (1988-1995), food and nutrition (since 1996).Prof. Yang wrote more than 20 major scientific books and published more than 200 papers. Prof. Yang obtained more than 25 national patents and technological awards, mainly on the field of food nutrition and diabetes study. Prof. Yang awarded the title of National Advanced Science and Technology Expert with Remarkable Contributions.

Guansheng Ma

Vice–President, Chinese Nutrition Society
Professor, Peking University

Dr. Guansheng Ma Professor, Chief, Department of Nutrition and Food Safety, School of Public Health, Peking University.

Dr. Ma studied medicine in Shandong Medical University during 1981-1986, obtained master degree in Shanghai Medical University during 1986-1989, and obtained Ph.D at the Division of Human Nutrition, Wageningen University, Netherlands in 2007.

Dr. Ma worked for United Nations Office for Humanitarian Co-ordination in Iraq in 1998, worked as the governor assistant in A-baZang and Qiang Autonomous Prefecture, Sichuan, China during 2003-2004, and worked in the Department of Food Safety and Zoonoses, WHO in 2009-2010. He was the Deputy Director of the National Institute for Nutrition and Health, Chinese Center for Disease Control and Prevention during 2002-2015.

Dr. Ma 's scientific interests are in the areas of food and nutrition policy, nutrition and health, NCDs control and prevention, particularly in the childhood obesity intervention. He has more than 350 publications including 90 publications in the international peer-reviewed journals.

Anura Kurpad

Professor
St John's Medical College, Head of Physiology and Nutrition

Professor Kurpad is the Head of the Department of Physiology at St John's Medical College, Bangalore, India. He is a Fellow of the National Academy of Medical Sciences and the International Union of Nutrition Sciences. He has primarily worked on accurately measuring human amino acid requirements and protein digestibility. He set up a definitive, accurate stable isotope balance method to measure amino acid homeostasis in humans, that resulted in the best evidence for the (he was the rapporteur of that committee) to completely revise the protein and amino acid requirements of man. He was rapporteur of the 2007 WHO/-FAO/UNU Expert Committee He is a member of the 2011 and 2013 FAO Expert Committee on Protein Quality. In 2010, the IAEA created its first and only Collaborating Centre in Nutrition at St John's, under his leadership. In 2002, he was appointed the Founding Dean of an interdisciplinary Biomedical Research Institute at St John's. He is the immediate past-President of the Nutrition Society of India (NSI) and chairs several national and international committees related to nutrition. Among these are the Scientific Advisory Group of the Nutrition Division of the Indian Council of Medical Research, the Protein Quality Group of the Nevin Scrimshaw International Nutrition Foundation, and the Scientific Advisory Committee of the National Institute of Nutrition, India. He has written over 350 papers, and is the co-Editor of the Asia Pacific Journal of Clinical Nutrition, Member of Editorial Board of J Nutrition, and is co-author of Asian Edition of Guyton's Textbook of Physiology.

DRI' s in India – nutritional issues driving new updates

AnuraKurpad, St John' s Medical College,Bengaluru, India

ABSTRACT

The first recommendations of the Indian Recommended Dietary allowances (RDA) were made in 1944, based on the recommendations of the Health Committee of the League of Nations in 1937. Six revisions were made over the next decades, culminating in the 2010 Indian RDA recommendations. In these, the overriding concern was poverty and food insecurity, where the important index of food requirement was the RDA. It is recognized that there are several important parameters of the nutrient requirements in populations, such as the Average Nutrient requirement (ANR), the safe requirement or the RDA, and the Tolerable Upper Limit of Intake. These have become very relevant now, as new technologies permit the fortification of food, and one needs to use these parameters to determine the risk-benefit of such public health nutrition interventions.

At present, the 7th revision is underway, with a specific mandate to harmonize recommendations across nutrients in a common framework. Specific attention will be paid to the physiology of nutrients that is relevant to the Indian population, whether in requirements due to genetics, altered body composition, the special needs of catch up growth, or absorption in Indian diet matrixes. New data for specific nutrients such as Vitamin D will be considered. Further, these requirements need to be very carefully considered since they form the basis for national activities, such as food labelling, planning for food production or import, allowances for subsidy programs, and importantly, fixing of minimum wages and poverty determination.

David Richardson

Professor
DR Nutrition, Managing Director

David Richardson is a specialist consultant in nutrition and food science. He is Visiting Professor at Reading University, School of Chemistry, Food and Pharmacy. He began his career in teaching and research at the University of London and at the Massachusetts Institute of Technology. He then embarked on a 20-year career with Nestlé UK Ltd, ultimately becoming Group Chief Scientist.

Professor Richardson is a Fellow of the Royal Society of Medicine, London, and of the Royal Swedish Academy of Agriculture and Forestry. Dr Richardson was formerly a member of the UK Committee on Medical Aspects of Food Policy. He chaired a section of a European Union Concerted Action Programme (PASSCLAIM) to develop a process for the scientific substantiation of health claims. He was Chairman of the International Life Sciences Institute (ILSI) Europe Consumer Science Expert Group on Consumer Understanding of Health Claims and author in another ILSI Europe project, PROCLAIM, which has developed further guidance on substantiating health claims. Professor Richardson has authored several reports on the scientific substantiation of health claims, nutritional benefit/risk analysis and food innovation for improved nutrition. Professor Richardson has been directly involved in several successful applications for health claims in the European Union.

The origin and evolution of Dietary Reference Values across the lifespan

Professor David Richardson,DR Nutrition; Visiting Professor
School of Chemistry, Food & Pharmacy,University of Reading, UK

ABSTRACT

Probably the first formal action to establish dietary standards was the British Merchant Seaman's Act of 1835, which made provision of lime or lemon juice compulsory to sailors to prevent scurvy. The purposes of dietary standards, however, have changed over time, namely to prevent diseases associated with starvation, then to feed an army and the nation during wartimes, then to maintain health and working capacity, and now to maintain and enhance the health of the population.

The evolution of dietary standards continues today with the establishment of Dietary Reference Values for nutrients (DRVs) based on the best consensus of nutrition science, not only for the avoidance of nutrient deficiency states, but also to include the concept of reducing risk of chronic disease. Over time, standards based on observational information about the usual pattern of food consumption and protective foods for health have been superseded by the establishment of DRVs based on scientific knowledge of human needs for the essential nutrients and bioactive components.

The methods to establish DRVs have evolved to incorporate a number of points on the micronutrient dose-response curve, including a diversity of terms such as Reference Nutrient Intake (RNI), Average Requirement (AR), Reference Intake (RI) and Safe Upper Level (SUL). Codex Alimentarius now defines Nutrient Reference Values-Requirements (NRVs-R), based on levels of nutrients associated with nutrient requirements, and NRVs-NCD for nutrients associated with the promotion of health and reduction of risk of diet-related non-communicable diseases, not including deficiency diseases. DRVs are typically applicable to the general population or to a segment of the population, such as for a specified age range or for different physiological states. Today DRVs are used widely by health professionals, regulators, policymakers and the general public for food labelling (e.g. nutrition and health claims); for the composition of diets (e.g. for schools, hospitals, nursing homes and prisons); for the food and food supplements industries to develop innovative products, and for public health and education professionals.

The presentation will include examples of the evolution of DRVs for vitamin D, folic acid, vitamin C and the omega-3 fatty acids.

S.K.Roy

Professor
President of Nutrition Society of Bangladesh
Chairperson of Bangladesh Breastfeeding Foundation

Dr. S. K. Roy is the President of Nutrition Society of Bangladesh (NSB); the Executive Director and Chairperson of BOT, Bangladesh Breastfeeding Foundation (BBF). He was International Senior Scientist from 1976-2012 at icddr'b. His various scientific work and publications on tackling malnutrition, persistent diarrhoea management with local diet and a dietary algorithm of management, supplementation of zinc in diarrhoeal disease, vitamin A supplementation to mothers increased Breast milk retinol concentration up 6 month postpartum etc. have been adapted and implemented nationally and internationally. He has been also contributing since 40 years in policy development related to IYCF and nutrition.

Current status of development and implication of DRI in Bangladesh

S. K. Roy, QuamrunNahar, S. Chowdhury, M. O. Faruque, S. S. S. Sultana, MA Siddique, M. A. Mannan and L. Bhattacharjee

ABSTRACT

The dietary recommended intake (DRI) in Bangladesh was developed in 2013 using HIES data of 2010. Energy requirements for the Bangladeshi population were calculated using the FAO/WHO recommendations. Mean PAL values of sedentary, moderate and heavy worker groups were estimated at 1.5, 1.88 and 2.46, respectively. The current energy consumption is 240kcal deficient compared to the energy requirements of the average adult Bangladeshi population.

Weighted per capita/day mean (±SD) carbohydrate, protein and fat intake for Bangladeshi population were 413±106g, 57.2±15.6g and 29.3±14.0g, respectively. About 66.5% of the population take more than 50g of protein but largely from plant sources. Weighted mean intake of vitamin A (µg/-day), calcium (mg/day), iron (mg/day) and thiamine (mg/day) for Bangladeshi population according to the HIES 2010 data were 388±291, 439±227, 10.96±3.82 and 1.0±0.6, respectively. More than 70% of the population are consuming less than the requirements of vitamin A, calcium and iron. Mean pulse intake was 14.68g/person/day and it was mostly lentil (masur), though different kinds of pulses were also used. Mean fish and meat intake were 50.3 and 19g/person/day, respectively. Mean vegetable (167g) and fruit (45g) intake amounts to about half of the recommended dietary allowances. Mean oil intake was 20.4g/person/day in the Bangladeshi population.

The DRI proposes a total of 400g of cereals along with 50g pulses, 130g animal products (fish, meat, eggs), 100g leafy vegetables, 200g non-leafy vegetables, 100g seasonal fruits and 130ml of milk or milk products. Thirty key foods were identified and various menu options were proposed to meet required nutrients. The national level food availability, the intake of energy and other essential nutrients is still below the requirements and DRI. The dietary guidelines of Bangladesh are being disseminated throughout the country for wider use. Implications of the DRI and challenges for implementation will be presented.

Guoo–Shyng Wang Hsu

Professor
Nutrition Society of Taiwan, President
Department of Nutritional Science, Fu–Jen University

I got my Ph.D. degree from Department of Food and Nutrition, Purdue University, USA in 1986, followed by working as a Clinical Dietitian & RD at Wishard Memorial Hospital, Indianapolis, Indiana, USA for 15 months before I got back to Taiwan. From 1987 till now, I have been working as the Associate Professor and Professor at Fu-Jen University, Taiwan. My administrative experience includes: Chair of Department of Nutrition and Food Science, Fu-Jen University, 2001 ~2006, Dean of College of Human Ecology, Fu-Jen University, 2006 ~2012, and President of Nutrition Society of Taiwan, 2012 ~ 2018. In addition, I was a Visiting Scholar in OB/GYN, Southwestern Medical Center, UT Dallas, USA, 1997~1998.I have been the major advisor of three Ph.D. graduates and over 50 Master graduates in Nutrition. The involvement of revision of the 5th, 6th and 7th editions of DRIs and the National Examination of Dietitian in Taiwan were two of my academic focus for last 30 years. My research interests are (1) Aluminum toxicity related to brain development, bone health, anemia and Heme-oxygenase activity as well as immunity. (2) Nutrition education in dietetics, dietary guideline and DRIs in Taiwan. (3) Application of electrolyzed water on food sanitation and safety.

Taiwan's DRIs

Guoo-Shyng Wang Hsu, Ph.D, Professor
President, Nutrition Society of Taiwan

ABSTRACT

The first edition of Taiwan's DRIs - "Daily Nutrient Needs" - was issued 62 years ago. In 1972 and 1980, the 2nd and 3rd editions were published as "Daily Nutrient Intake". The 4thand 5th editions entitled "Recommended Daily Nutrient Allowance" (RDNAs) were published in 1987 and 1993, respectively. The 6th and 7th editions of DRIs were revised in 2003 and 2012, including RDA, AI, EAR and UL for each nutrient accordingly. In recent years, we have focused on bone health and sarcopenia- related nutrients, such as vitamin D, Ca, Mg, protein for revisions. From the National Nutrition Survey (NNS), certain nutrients such as iodine, Mg, vitamin D, became the target nutrients for DRIs revisions because they have been found to be marginal and/or deficient in certain age groups and/or areas. Even though there is little information about the food composition of vitamin D, Taiwan's sufficient exposure to sunlight due to its subtropical region has meant that vitamin D deficiency is generally unexpected. However, if a level of blood 25(OH)D <20 ng/mL is considered deficient, and 20 ng/mL as adequate, 10.2% and 27.0% of Taiwanese males and females over 13 years old, have vitamin D deficiency from the 2013-2016 NNS, with the highest deficiency rate occurred in younger population (<30 years old). However, recommendation of increase sunlight exposure frequency and duration, as well as fish intake would decrease the risk of vitamin D deficiency. The median urinary iodine levels were 97.7 μg/L and 102.5 μg/L in women and men (from 2005 – 2008 NNS). A negative correlation existed between urinary iodine level and age. Older women are especially susceptible to inadequate iodine nutrition status using urinary iodine <100 μg/L. Therefore, the proposed RDA amendments on iodine for age 10-12 and over 13 are 120 and 150 μg/d respectively. The future RDAs revision will focus on: (1) To strengthen the food composition data bank. (2) To promote basic research on nutrient requirements, metabolism and biomarkers, particularly within different age groups. (3) To conduct domestic research to understand the relationship between diseases and nutrient needs. (4) To strengthen public nutrition education programs.

Kiyoshi Tanaka

Professor
Faculty of Nutrition, Kobe Gakuin University

Kiyoshi Tanaka is currently a professor, Faculty of Nutrition, Kobe Gakuin University. He is an M.D., and has graduated from Faculty of Medicine, Kyoto University in 1977. He is an endocrinologist and nutritionist. His main clinical research field has been the clinical studies on osteoporosis, and he has published such articles as the effect of nutritional status on the post-fracture outcomes and compromised QOL in osteoporotic patients. With regard to nutrients, his major research interest has been the clinical significance of vitamin insufficiency. He has published papers on the vitamin D and K status in osteoporotic patients, elderly subjects, and Crohn's disease, and he is recently engaged in the clinical studies on B vitamins also. He has been arguing that vitamin insufficiency, which is milder than vitamin deficiency, is an important risk for various diseases, and the prevalence of vitamin insufficiency is quite high. He has been proposing that the requirement of vitamins must be determined on the avoidance of vitamin insufficiency and the risk of chronic diseases. He has served as a member of committee for DRIs for Japanese 2010, and 2015. He is an awardee of Japan Vitamin Society Award 2018.

Dietary Reference Intakes for Japanese 2015

Kiyoshi Tanaka, M.D.
Faculty of Nutrition, Kobe Gakuin University, Kobe 651-2180 Japan

ABSTRACT

Dietary Reference Intakes (DRIs) are revised every five years in Japan, and the current version is DRIs for Japanese 2015. Emphasis is put on life-style related diseases (LRDs). It aims the prevention of both development and progression of LRDs. It is intended to be applicable to healthy individuals and also those who have not developed LRDs but is at increased risk for them.

Although it is difficult to precisely evaluate energy intake and consumption individually, its balance can be easily monitored by body weight. Therefore, optimal energy intake was defined as the energy which allows the maintenance of optimal body mass index (BMI). For nutrients, various indices are defined for three purposes. Estimated Average Requirement (EAR), Recommended Dietary Allowance (RDA) and Adequate Intake (AI) are for avoiding inadequacy. Tolerable Upper Intake Level (UL) is for the avoidance of adverse health effects due to excessive intake. DRIs for Japanese has additional index; Tentative Dietary Goal for preventing LRDs (DG). It is intended for the prevention of LRDs, focusing on diabetes, dyslipidemia, hypertension, and chronic kidney disease (CKD).

For protein, EAR and RDA are defined. Regarding fats, DG is determined for fats (total) and saturated fat for avoiding cardiovascular diseases (CVDs), and AI is defined for n-6 and n-3 polyunsaturated fat. Balance of energy-providing nutrients is also included. Although only percentage of energy is defined as DG for carbohydrate as a whole, dietary fiber is separately given DG for the avoidance of CVDs.

Excessive sodium intake is well known to be associated with hypertension. Although salt intake less than 5g/day is recommended, it is too low to be achieved in Japan where salt intake is still approximately 10g/day. Then DG for sodium was determined as the midpoint of ideal and current intake. Similar consideration was made regarding DG for potassium.

For vitamins (4 fat-soluble and 9 water-soluble), basis for determination greatly differs for each vitamin, and currently DG is not defined for any vitamins.

Working group for the determination of DRIs for Japanese is expected to start in June 2018, and no information is available at present with regard to the next DRIs.

Youn-Soo Cha

Professor
The Korean Nutrition Society, President
Chonbuk National University

Youn-Soo Cha is a professor in the Department of Food Science and Human Nutrition at Chonbuk National University in Jeonju, Korea. She received her B.S in Food Science and Technology from Chonbuk National University, M.S. degree in Food Science and Nutrition from Sookmyung Women's University and Ph.D. degree from the University of Tennessee in Knoxville, U.S.A. Her research area includes analysing functional efficacy of bioactive compounds in Korean traditional foods using cell lines, animals and clinical trials. Currently Dr. Cha is focusing on a scientific research to establish Korean paradox, based on an epidemiological observation that Korean people have low incidence of hypertension, CHD etc.,even though they mainly consume Korean traditional fermented foods that contains high amount of salt. She has published over 170 peer reviewed journal articles, reviews and book chapters. Dr. Cha is a member of the Korean Academy of Science and Technology, American Society of Nutrition, and the Korean Society of Food Science &Nutrition. Also, she is now the president of the Korean Nutrition Society and the AgroBioFood R&D Center of Chonbuk National University.

Dietary Reference Intakes for Korean (KDRIs): Development and Implementation

Youn-Soo Cha Ph.D.

Professor,Chonbuk National University ; President, The Korean Nutrition Society

ABSTRACT

Live healthy, Live longer is in demand now days. Good dietary habits are an important part of a leading healthy life style. As a food nutritionist, guiding the people with sound nutrition and food advice is the most important.

The Korean Nutrition Society (KNS) trying to overcome the nutritional deficiencies in RDA established at 1962 for first time as the standard proper nutrition at the institutional level. RDA have been revised every five years intervals, there are 7 editions published till 2000.

Since 21st century, Korea has entered an era where over nutrition and nutritional imbalances are more problematic than nutritional deficiencies. Under the influence of the DRIs established in the United States and Canada in 1997, Korea established the first edition of KDRIs in 2005. Unlike RDA, which provides only a single value of nutrients, KDRIs was revised in 2010, with each nutrient requirement given in 4 values (EAR, RNI, AI, UL). The article 14 of the National Nutrition Management Act which was enacted in 2011, states that KDRIs should be revised and published by the Ministry of Health and Welfare (MOHW) every 5 years. Therefore, from 2015, the MOHW organized the KDRIs at the national level in cooperation with the KNS, and now revised version of the KDRIs in 2020 is under preparation. A total of 36 nutrients are given in KDRIs-2015, which are used by governments, professional groups and industries as the basis for diet plan and diet evaluation. However, there are many demands for the improvement so that individuals can easily use KDRIs.

KDRIs-2020, which will be revised in coming year, will mainly focus on the change in the paradigm of chronic disease prevention from the existing nutritional balance, and review the priority of nutrients to be newly included, such as omega-3 fatty acids, choline and phytonutrients. The KDRIs is also based on the outcome of multi-disciplinary research teams, such as collection and evaluation of large amounts of scientific evidences. Therefore researchers should make continuous effort to effectively utilize KDRIs in education of general public and in the government nutrition policies.

Gordon Cheung

President
Hong Kong Nutrition Association

Gordon Cheung is the President of the Hong Kong Nutrition Association. He is currently working as private practice dietitian, adjunct lecturer in the School of Professional and Continuing Education of the University of Hong Kong and the part-time project fellow in the Hong Kong Polytechnic University. He is also the member of several consultative committees of Hong Kong SAR government. Previously He served for Hong Kong SAR government as research officer from 2003 to 2006, and worked as clinical dietitian in Hospital Authority from 2006 to 2013.

He received his first degree in Food and Nutritional Science in the University of Hong Kong. He completed the postgraduate training in Hong Kong and obtained the Master of Philosophy together with the Postgraduate Diploma in Dietetics in 2003, as well as the Certificate in Chinese Medicine in 2009. He has also started the postgraduate study in Paediatric Dietetics in UK, and completed a short clinical attachment in the GOS Hospital for Children in London.

Enkhtaivan Gombosuren

Professor
Mongolian Nutrition Society, President
Nutrition and Biotechnology Department, Mongolian University of Science and Technology

Enkhtaivan Gombosuren is a Professor of Mongolian University of Science and Technology (MUST) and Ph.D. in Technical Science. She obtained her BS and MS from National University of Mongolia, Doctoral degree from MUST and working for the Mongolian University of Science and Technology since 1977 in various positions such as a lecturer, head of the department and the leading professor of the Nutrition and Food Services, professor of Nutrition and Biotechnology Department and has 38 years working experiences in university and research. Her research is focusing on Nutrition for Preschool and School age children and Women, Clinical Nutrition, Food Composition Data.

Since 2002 she is working as a representative of Mongolia to the NEASIAFOODS of FAO and participated in 3 Regional Meetings and FCD Meetings. She worked and now working in more than 10 national and international projects as a supervisor, consultant such as: Project on “Analysis of Traditional and Consumer Food Composition Data” financing by Science and Technology Fund of Mongolia(2016-2018); and so on. She has published more than forty research papers and articles in international and national academic journals and proceedings of international and national conferences.

Dr.Enkhtaivan Gombosuren established Mongolian Nutrition Society (MNS) and since then she is working as a President. By her initiatives and supports of her foreign colleagues the MNS became one of the Adhering bodies of the International Union of Nutritional Sciences and the Federation of Asian Nutrition Societies.

Chulaporn Roongpisuthipong

Professor
Honorary Advisor of Nutrition Association of Thailand under the Patronage of HRH Princess Maha Chakri Sirindhorn.
Director of Clinical Nutrition of Bumrungrad International Hospital

Dr. Roongpisuthipong received her MD from Siriraj Hospital, Mahidol University. She serves as Honorary Advisor of Nutrition Association of Thailand (NAT), and as one leadership positions at the Commission for the Improvement of Nutrition Requirements for Thai People. She serves as the committee of National Working Group on Drug and Nutrition Selection Prior to joining NAT, she served as the chief of Division of Nutrition and Biochemistry of Medicine,Department of Medicine, Ramathibodi Hospital. She has been an assistant Dean for the Quality Development Department of Ramathibodi Hospital, Faculty of Medicine (2002-6). Dr. Roongpisuthipong was President of the Society of Parenteral and Enteral Nutrition of Thailand and President of the Nutrition Society of Thailand under the Patronage of HRH Princess.MahaChakriSirindhorn.She is Director of Clinical Nutrition of Bumrungrad International Hospital (BIH) since 2013.

DRIs in Thailand.

Prof. Chulaporn Roongpisuthipong, MD
Honorary Advisor of Nutrition Association of Thailand under the Patronage of HRH Princess MahaChakriSirindhorn.
Director of Clinical Nutrition of Bumrungrad International Hospital

ABSTRACT

Dietary Reference Intakes (DRIs) are nutrient reference standards developed for use in a variety of settings, replacing and expanding on the past 40 years of periodic updates and revisions of the Recommended Dietary Allowances (RDAs of apparently healthy Thais. The Ministry of Public Health and the Nutrition Bureau have appointed committees and working groups to improve nutritional needs for Thai peopleIt consists of 8 faculties..1 Working Group Energy, Carbohydrates, Fats and Proteins.2 Working Groups: Calcium, Vitamin D, Vitamin K, Phosphorus, Magnesium and Fluoride..3 Working Groups: Iron, Zinc, Iodine, Manganese, Molybdenum, Copper and Chromium.4 Working group Vitamin C, vitamin E, selenium, beta carotene and vitamin A..5 Working Group on Folate and Vitamin B.6 Working Groups: Sodium, Potassium Chloride and Water.7 Working Group Other nutrients: dietary fiber and phytochemicals..8 Working group, weight group and reference height of Thai population

The committee shall have the following powers and duties:to research and gather knowledge related to nutrients both in and outside the country, to analyze and synthesize nutritional knowledge to determine nutrient content to suit the problem of nutrition, living, culture, food consumption of Thai people.and alsoto make a detailed description of the nutrients according to the topic.They include estimates of requirements (Estimated Average Requirement, EAR), recommended intakes (Recommended Dietary Allowance, RDA; Adequate Intake, AI), and thresholds above which adverse effects of excessive intake may occur (Tolerable Upper Intake Level, UL). In addition macronutrients have an Acceptable Macronutrient Distribution Range (AMDR), and an Estimated Energy Requirement (EER) will be in the new version Thai DRIs 2019.

Leng Huat Foo

Associate Professor
University Science Malaysia

Dr. Leng Huat Foo is currently Associate Professor at the School of Health Sciences, UniversitiSains Malaysia, Malaysia. His research interests are in the areas of nutritional assessment, public health nutrition, nutritional epidemiology and nutritional interventions in the different populations throughout the lifespan, particularly on the role of dietary and lifestyle factors on obesity, musculoskeletal health, and cardio-metabolic health. He has published over 80 peer-reviewed papers in reputed international scientific journals, conference proceedings, including coauthors for several recent Lancet's paper on Global NCD risk assessment papers. He has also been invited as speakers in numerous international and national scientific conferences.

He is also served as several academic editors for several international journals such as Plos One, Journal of Anthropometry Physiology and recently appointed as Co-editor for the Asia Pacific Journal of Clinical Nutrition. He is a member of various national technical working committees of the Ministry of Health Malaysia, including the National Plan for Action on Nutrition Malaysia (2016-2025), New Revision of Recommended Nutrients intake for Malaysian (2016- 2017)and the National Dietary Guidelines for Vegetarians (2015-Present). Apart from his outstanding record on his academic and scientific works, he has recently awarded as a Fellow of the Nutrition Society of Malaysia (2017).

Perspectives and Challenges on the Development of the Revised Recommended Nutrient Intakes for Malaysia (RNI 2017)

Leng Huat Foo, PhD

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ABSTRACT

It is well established that unhealthy dietary practices are one of the most significant implication risk factor for NCDs. Hence, the establishment of healthy and balanced dietary practices across the lifespan is an important public health strategy to promote optimal general health and well-being and reduce the risk of NCDs. Recommended Nutrient Intakes (RNI) have been formulated to address several important issues pertaining to malnutrition and other diet-related NCDs amongst the populations across the lifespan. The Ministry of Health Malaysia through the National Coordinating Committee on Food and Nutrition (NCCFN) has initiated and revised the Recommended Nutrient Intakes for Malaysia in 2017 (RNI 2017). This involved commendable efforts from experts of various ministries, universities, agencies, institutions and health and medical professional organizations. The main purpose of the revised RNI is to provide current updated scientific knowledge and practice on the recommended nutrient intake for Malaysians. This takes into account the differences in age, gender and a whole of life approach encompassing stages from infancy, childhood, adolescence, and adulthood as well as special life stages such as pregnancy and lactation due to unique physiological demands. The revised RNIs were generated with input from three technical sub-committees namely, i) energy and macronutrients, ii) vitamins and iii) minerals and trace minerals. A total of 30 nutrients have been included in this revised RNI 2017 as compared to the 17 nutrients in the RNI 2005. For the RNI 2017, the addition of new nutrients and/or revision of existing nutrients from the RNI 2005 were based on the scientific merits of more recent scientific literature on these nutrients, including health-related outcomes. Several important evidence-based international reports including the WHO/FAO (2004), the Institute of Medicine (IOM) and the European Food Safety Authority (EFSA) were used in this update. Several ongoing initiatives have been formulated and agreed to following the revision of RNI 2017 such as revising the national food-based dietary guidelines to improve the food consumption patterns, plus general and nutritional wellbeing of individuals and population and consequently preventing and reducing the risk of NCDs among populations across the lifespan in Malaysia.

Duo Li

Executive Council Member, Chinese Nutrition Society
Professor, Qingdao University

Prof.Li is the chief professor of nutrition in the Institute of Nutrition & Health, Qingdao University, professor emeritus of nutrition in the Department of Food Science & Nutrition at Zhejiang University, China, and adjunct professor in the Department of Nutrition & Dietetics at Monash University, Australia. He gained PhD in Nutrition (RMIT University, Melbourne) in Australia. He was also a research fellow at Deakin University, and a senior research fellow at RMIT University.

As an expert consultant, Duo has participated the Joint FAO/WHO Expert Consultation on Fats and Fatty Acids in Human Nutrition in 2008. As a member of WHO Expert Advisory Panel on Nutrition and WHO Nutrition Guidance Expert Advisory Group (NUGAG) Subgroup on Diet and Health, Duo has been involved in the development of WHO Dietary Guideline (2010-).

Duo is the Editor-in-Chief of the Asia Pacific Journal of Clinical Nutrition (2017-), associate editor of the Food & Function (2015-), statistic editor of the British Journal of Nutrition (2016), and has also served on numerous editorial boards. He is an immediate past-president of Asia Pacific Clinical Nutrition Society, and past-president of Asia Pacific Vegetarian Union. Duo has published more than 530 scientific publications (more than 230 papers with impact factors), 14 books or book chapters and 25 inventive patents. Duo has integrated research themes on nutrition in some four areas. 1. Dietary intake and non-communicable diseases. 2. Nutrigenetics/nutrigenomics. 3. Metabolism of lipids and fatty acids. 4. Bioactivity and safety evaluation of novel food and potential natural nutrient resources.

Wenhua Ling

Executive Council Member, Chinese Nutrition Society
Professor, Sun Yat-sen University

Prof.Ling has obtained PhD degree from University of Eastern Finland, Finland in 1993. Then he worked as post-doctoral fellow in University of McGill, University of British Columbia, Canada. He has been working as a professor at Sun Yat-sen University from 1997.

His research direction focus on nutrition and prevention of cardiometabolic diseases. He preside over more than 30 national and provincial research projects: the National Natural Science Fund Key Project (3 items), National Outstanding Youth Fund (1 item), The 11th National Science and Technology Support Plan (1 item), project 973 (2 items) and other national and provincial research projects (26 items) .

His research team successfully obtained the first prize of science and technology award in Guangdong province (2009), first prize of the natural science award of the ministry of education (2009) and second prize of the Chinese medical association science and technology progress awards (2009, 2016)

He published more than 190 SCI articles, including the articles inHepatology, Circ Res, Diabetes Care, ClinChem, ATVB, AJCN, J ThrombHaemost, J Lipid Res, JBC, ClinChem, Atherosclerosis, JNutr as the correspondent or the first author.

Hisanori Kato

Project Professor
Graduate School of Agricultural and Life Sciences,
The University of Tokyo

Dr. Hisanori Kato is a Project Professor at Graduate School of Agricultural and Life Sciences, The University of Toyo. Dr. Kato graduated from The University of Tokyo and was appointed Assistant of The University of Tokyo in 1988 and received his PhD from the University of Tokyo in 1990. He served as a guest researcher at Diabetes Branch, National Institutes of Health, USA (1991-1993). He then became Associate Professor at Utsunomiya University in 1993 and at The University of Tokyo in 1999. He has been at the current position since 2009.

Dr. Kato's recent research focus is evaluation of the effects of food components by making use of various omics technologies. He has received several awards including "Japan Society of Nutrition and Food Science Award for Excellence in Research" of 2015.

Dr. Kato is the Secretary General of Federation of Asian Nutrition Societies (FANS) and is the Chair of the Organizing Committee of the 22nd International Congress of Nutrition (ICN2021). He is also the President-Elect of Asia-Pacific Nutrigenomics and Nutrigenetics Organization. He is the president of the Japanese Society for Amino Acid Sciences and a member of Science Council of Japan.

Nutrition labeling and health claims of food in Japan

Hisanori Kato, Professor
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ABSTRACT

In 2015, the Consumer Affairs Agency (CAA) of Japan enacted the Food Labeling Standard, which requires mandatory nutritional labeling on pre-packaged processed foods for macronutrients: energy, protein, fat, carbohydrate, and sodium (indicate as salt equivalent). Nutrition labeling for saturated fat and dietary fiber is recommended but not mandatory, and that for other nutrients, such as minerals and vitamins, is voluntary. Tolerance range is set for each nutrient, e.g. +/- 20 % of declared values for macronutrients mentioned above. The accuracy of nutrition labeling is confirmed by a CAA compliance test based on a laboratory analysis. Only when nutrition valuesare clearly shown to be rough indications, estimated values, such as calculated values using the Standard Tables of Food Composition in Japan, are accepted.

In Japan, foods are categorized into three types: Foods for Special Dietary Uses (FSDU), foods with health claims, and foods in general. Among them, foods with health claims are allowed to indicate their effects if qualified to CAA's regulation as Foods for Specified Health Uses (FOSHU), Foods with Nutrient Function Claims (FNFC), or Foods with Function Claims (FFC).
FOSHU are foods officially approved to claim their physiological effects on the human body. The government reviews the labeled effect and safety, and CAA gives approval to each food product. FNFC are foods that are labeled with the functions of nutritional ingredients (vitamins and minerals). FNFC can be freely manufactured and distributed without submitting a notification to CAA, provided that it meets the established standards and specifications. Function claim for FNFC is fully fixed with respect to each nutrient. FFC is a new category for foods with health claims effective since 2015. FFC application are submitted to CAA with necessary information including scientific evidence on safety and effectiveness before marketing the product. Unlike FOSHU, the government does not evaluate the safety and effectiveness of each product.

It should be noted that any official foods with health claims in Japan must display the sentence "Balance your diet with staple foods, main dishes, and side dishes." to strengthen the importance of a balanced diet.

Mark Wahlqvist

Professor
Monash Asia Institute, Monash University

Mark Wahlqvist has most recently been the Foundation director of the Fuli Institute and Professor in Food and Nutrition Science, Zhejiang University, Hangzhou, China, and a Visiting Professor, National Health Research Institutes in Taiwan. He is Emeritus Professor and Head of Medicine at Monash University, Melbourne, Australia. He also has professorial appointments at the Monash Asia Institute and in the Department of Epidemiology and Preventive Medicine at Monash University. He was the Foundation Professor of Human Nutrition at Deakin University in Australia. He has played a major role in nutrition education, science, practice and policy for almost five decades. Mark has chaired the Australian Academy of Science National Nutrition Committee, Nutrition Australia (the Australian Nutrition Foundation) and the Food Safety Council of Victoria, has been a board member of the Australia New Zealand Food Authority (now FSANZ) was President of the International Union of Nutrition Sciences (IUNS) and chaired the Sciences for Health and Wellbeing initiative of the International Science Council. He chaired the Food and Agriculture Organisation Centre of Excellence at Monash University, was for many years on the World Health Organization's Nutrition Advisory Panel. Among others, his scientific advisory roles have been to Harvest Plus at IFPRI and the Riddet Institute in New Zealand. He is now Emeritus Editor but was Foundation Editor-in-Chief of the Asia Pacific Journal of Clinical Nutrition from 1992-2016 He has been honoured by the Nutrition Societies of Australia, Indonesia, China, the USA, Britain and the Asia-Pacific, and by the Emigrants Research Institute in Sweden. He is an Officer of the Order of Australia. In 2017 he was made a Living Legend of the IUNS.

Healthful food components and DRIs: an Asian perspective

Mark L WahlqvistBMedSc, MB, BS, MD FRACP, FAFPHM, FAIFST, FACN, FTSE

ABSTRACT

DRIs (Dietary Reference Intakes) as in China or NRVs (Nutrient Reference Values) as in Australia are a collection of tools to evaluate the nutritional value of diets by way of their nutrient composition, both macronutrients being protein, carbohydrates, including dietary fibre and fats and micronutrients being vitamins and minerals. With a greater understanding of diet-health relationships, the range of food components and characteristics of interest grows. Phytonutrients, food structure and bioavailability, which contribute health-protective properties to food are generally missing, but efforts to redress this are emerging (Wahlqvist,2016). The first purpose to establish DRIs or their proxy was to have measurable indicators of the nutritional value of diets, usually at the population level. When the nutrients came from foods and meals, a few essential nutrients could profile dietary quality. As food became more processed and formulated for nutrition support, more nutritionally complete nutrient indices were required. Now meal replacement with formula foods can be evaluated against an extensive profile of NRVs. Even so, optimal nutrition in the medium to long-term cannot be achieved with our present spectrum of NRVs. For example, people with feeding gastrostomies progressively become phytonutrient deficient. Optimal nutrition depends on food -based approaches as recommended by WHO and FAO in the FBDGs (Food based dietary guidelines) and, for food security according to FAO household and health system clinical evidence, food biodiversity. The FDBGs are predicated on DRIs or their equivalents and the need to be customised locally, regionally and culturally. Food component chemistry alone cannot capture the health associations of food which are not only compositional, but also complexity, ecologically and socially driven. Several nutrient DRIs in the Asian region are heavily food culturally dependent; these include all of the fat-soluble vitamins and essential fatty acids(Wahlqvist,2013). There is a case to be made and challenge to achieve food system RVs (FSRVs). In this sense, dietary guidelines and NRVs come together at the point of practice and policy. If this can be achieved, then the most pressing nutritional indicator need, that of resilience in the face of food system degradation with over-population and climate change may be accommodated.

Shaw Watanabe

President
Lifescience Promoting Association,
Asia Pacific Clinical Nutrition Society

Shaw Watanabe graduated from Keio University School of Medicine in 1965. As a distinguished human pathologist at the National Cancer Institute (U.S.A.) and the Pathology Division, National Cancer Center (Japan). He was then appointed Director of the Epidemiology Division, National Cancer Center, where he established a population based cohort study (JPHC). After being diagnosed with diabetes at the age of 50, he moved to Tokyo University of Agriculture to promote diabetic control through diet and physical activity without drug. He was promoted Director General, National Institute of Health and Nutrition, and he commissioned by the Cabinet Office to develop a national policy on Shoku-iku (Eating education). He became the President of the Life Science Promoting Association (2009–present). He is currently the editor-in-chief of the 'Diabetes Research Open Journal'. He is now the president of the Asia Pacific Clinical Nutrition Society. For his accomplishments, he received many Awards. He has 847 publications and 14,245 citations.

Food as Medicine: dietary supplements for healthy longevity in Japan

Shaw Watanabe

President, Asia Pacific Clinical Nutrition Society, Life Science Promoting Association

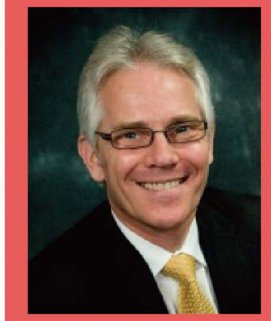
ABSTRACT

Soy isoflavones, flavonoids, various polyphenols, terpenoids, sulfur compounds, amino acids and peptides, and many other ingredients are developed for supplements as food. The regulation system of food for specified health uses (FOSHU) approved 1053 supplements with functional ingredients. Major targets of FOSHU are gastrointestinal condition, bone health, dental health, hypertension, blood glucose level, blood cholesterol and triglyceride level, and mental health. Antioxidant activity is hopeful candidate for cancer prevention, but it is not approved yet.

FOSHU requires a strict randomized clinical trial for application. So, Food for Nutrient Function Claim (FNFC) was implemented in 2001, if the food contains one of nutrients from 13 kinds of vitamins, 6 kinds of minerals, or n-3 fatty acids.

In 2015 more simple functional food claim system was launched, and the companies could write a health claim if they could approve the health effects by themselves. Metaanalysis or scientifically proved papers are accepted, and organic foods are involved this year.

Recent study of intestinal microbiota opens a wide area of functional foods, and effects of dietary fibers are reevaluated. We are proposing "medical rice" if it has any function beyond nutrients. Low protein rice is good example to make low protein diet for prevention of CKD or DKD progression. The brown rice diet can improve or prevent obesity compared with a polished white rice. The good bowel environment could lead to avoid obesity and keep immunity. Dietary habits with brown rice, rich vegetables, avoiding meat, should support the healthy life in aging society.



Ric Hobby

Chairman
International Alliance of Dietary/Food Supplement Associations

Ric Hobby is the Chairman of the International Alliance of Dietary/Food Supplement Associations. Former Vice Chair and Treasurer for IADSA and a non-executive Board member of several companies, Ric is also Senior Vice President, Global Government Affairs at Herbalife International, directing and assisting the company in government affairs and public policy in its more than 90 international markets.

Ric's role for IADSA has involved working with governments and their scientific advisers across the world on change in regulation and policy. This has involved him particularly in work on the harmonization of health supplement regulation in ASEAN, the development of the Food Supplement Directive in the European Union, multiple activities across Latin America and work to support the harmonization of regulation in Russia and the Eurasian Union. Most recently Ric has supported the creation of a new Resource Centre for Health Supplements and Nutraceuticals in New Delhi, which is a partnership with the Food Safety Science Authority of India.

Ric has presented at many international events across the world on areas related to nutrition and supplementation.

The Regulation of Health Supplements:The Emerging Global Landscape

Ric Hobby, Chairman, IADSA

ABSTRACT

There are three questions which are most commonly asked about regulation and food supplements: Are they regulated? Are they sufficiently regulated? And what is the future of policy and regulation in this area?
Over the past 25 years the global supplement market has developed substantially and with that growth has come new regulation across the world. This regulation has in some cases responded to the market, in other cases defined the market. However, despite it often being developed along national or regional lines, the commonalities of this regulation across the world significantly outweigh the elements that are not common.

When looking at the question of whether supplement products are sufficiently regulated, it is important to first look at the origins of legislation in this area and where it is today. It is then important to look at this in a national or regional context of the efficacy of the systems in place for control and enforcement of products and manufacturing. It is the total management system for supplements that defines whether the regulation is sufficient.

There are globally a number of major trends in regulation:
Harmonisation: Increasingly we see regulatory bodies wanting to build legislation together, to share resources and solutions, and enhance trade. Registration to notification: From Brazil to China, regulatory bodies are realising that it is not necessary to place significant barriers to market entry, at least not for all products.

Partnership with the private sector: Exciting examples are now being seen of how regulatory bodies and associations are working together to help both build a better system of regulation and policy and help implement the rules.

Search for the right approach to claims: It is essential that products carry information that allows the consumer to make the right choices. But product claims must be substantiated. When establishing the level of data and the approach that should be taken for supplements it is increasingly being recognised that this must preserve traditional knowledge and also innovation.

Greater acceptance of botanicals from other regions: We are increasingly seeing botanical products from different traditions in international trade. Governments are working together to find ways to build confidence in these products.

Ensuring the confidence of the regulatory, scientific and consumer communities in regulation and investing in data on the value of supplements for consumers and in nutrition and health policy will be a key requirement of the next decade.

Meei–Shyuan Lee

Professor
School of Public Health, National Defense Medical Center, Taiwan, China

Prof. Meei-Shyuan Lee has been on the faculty of the School of Public Health, National Defense Medical Center (NDMC), Taiwan for nearly 30 years.She was a Nutrition major at Fu-Jen University and has a Master's degree in Public Health Nutrition from NDMC. Before becoming a faculty member at NDMC, she worked as a dietitian for 3 years in clinical nutrition and food service management.At the Harvard School of Public Health, she was awarded the Doctor of Public Health degree in Nutritional Epidemiology. She teaches Nutritional Epidemiology, Biostatistics, and Public Health Nutrition for which she has received many awards. Her research interests focus on dietary factors, especially dietary quality, in relation to health, aging and nutrition economics as well as the development of measurement tools in Nutritional Epidemiology. She has been involved in the revision of the last three versions of the Taiwanese DRIs. She has published more than 170 peer reviewed articles. ProfLee has been the Manuscript Editor for the Asia Pacific Journal of Clinical Nutrition since 2006, and Co-Editor since 2018.

Dietary supplements in Taiwan: regulation, usage and health relevance

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ABSTRACT

"Dietary supplements (DSs)" is not a well-defined term in Taiwan. It could signify vitamins, minerals, "Health food" or "Special dietary supplements (infant and follow-up formula, formula for certain disease or other formula approved by governmental authorities to be consumed by people with special nutrient requirements)". Nevertheless,DSs are commonly used by Taiwanese. According to the Nutrition and Health Surveys in Taiwan (NAHSITs) since 1993, at least 20% of the population,from school children to elderly, uses DS. The usage rate has increased over time and more so in women than in men. For older women, the usage rates were 22.3% in 1993-1996 and 52.2% in 2005-2008. The most commonly used DSs were multivitamins and minerals, calcium alone, fish oil, vitamins B, E and C.

In Taiwan, there are several DS relevant regulations: an "Act Governing Food Safety and Sanitation", a "Health Food Control Act" and a permit requirement for "Special Dietary Foods". In order to protect the health of citizens and safeguard the safety, rights and interests of consumers, the "Health Food Control Act" was passed in 1999. This Act has 31 Articles which provide definitions, requirements for manufacture and management, rules for labeling and advertisement, and penalties.

Though many people use DS for health purposes, the ability of these supplements to prevent disease or premature death hasusuallynot been proven. The relationship between DS and chronic disease incidence as well as mortality has been assessed with data from the 1993-1996 and 1999-2000 NAHSITs. DSs were defined as supplements containing vitamins, minerals or fish oil, but not herbs, hormones, or drugs. For people ≥30yr, there were significant differences in supplement use by locality, education, smoking and drinking status. Elders who used DS more frequently had higher personal incomes, undertook more physical activity and ate more diverse diets.After adjustment for potential confounders, there were no significant associations between most DSs use and riskfor chronic disease incidence (cardiovascular disease, hypertension, diabetes and total cancer). However, vitamin E supplementation was associated with a decreased risk for total mortality (HR: 0.54, 95%CI: 0.31-0.92). Thus, in general, dietary supplements did not improve health outcomes.

Guiju Sun

Executive Council Member, Chinese Nutrition Society
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Prof. Sun is the Director of the Department of Nutrition and Food Hygiene,School of Public Health, Southeast University, China

She obtained Ph.D in 2001 inSchool of Public Health, FudanUniversity, Shanghai, China. She was as a visiting scholar in Institute of Environment and Human Health, Texas Tech University, USA (2007.2-2007.4), Institute for Physiology and Biochemistry of Nutrition, the Federal Research Centre for Nutrition and Food, Germany (2006.10-2006.12), Dept. of Environmental Science and Health, School of Public Health and Hygiene, Johns Hopkins University, Baltimore, MD, USA (1999.2-2000.3). Now she is the Executive Member of Chinese Nutrition Society, Vice President of Jiangsu Nutrition Society, Vice Chairman of the of Nutrition and Functional Food Committee of Chinese Nutrition Society, Vice Chairman of the Basic Nutrition Committee of Chinese Nutrition Society, Functional Foods Review Experts of State food and Drug Administration, and New Food Ingredient Review Experts of Committee on Health and Family Planning, China.

Her research interests include nutrition and chronic diseases, phytochemicals and food efficacy, nutrition and cancer. In recent years, she has completed many national and provincial research projects and published more than 150 academic papers.

Analysis of knowledge, attitude and practice about nutrition supplement among residents in China

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ABSTRACT

In order to explore the knowledge, attitude and practice of nutritional supplement in Chinese residents, 30,535 residents in different regions of China were investigated with the questionnaires using face-to-face and network investigation. The results showed that 30.50% (5971/19575) of residents over 18 years purchased nutritional supplements over the past year, of which 29% (4970/17134) of 18-55 years old purchased, and 41% (1001/2441) aged over 55 years purchased in the past year. In addition, 54.85% (11990/21861) residents consumed nutritional supplements. Among them, 55.9% (9495/16983) 18-55 years old residents consumed nutritional supplements, the top three of the most popular categories were vitamin C (19.2%), calcium (18.4%), and vitamin B (12.1%). 45.6% (924/2026) of the elderly population consumed nutritional supplement, calcium (18.7%), vitamin C (14.9%) and B vitamins (13.1%) accounted for the largest proportion. And 55.1% (1571/2852) children also consumed nutritional supplement, and the three most popular categories were calcium (19.2%), vitamin D (14.1%) and mixed vitamins (8.1%). Besides, 51.9% of the 18-55 years old residents considered that nutritional supplements were necessary, and 42.4% of the elderly respondents considered that supplements were necessary. Moreover, gender, age, education level and annual income can affect residents' attitude, knowledge and behavior towards nutritional supplements.

Main Participants List

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Representative from Pfizer Consumer Healthcare		
Representative from Nongfu Spring		

Introduction of the Chinese Nutrition Society

The Chinese Nutrition Society (CNS), founded in 1945, is a national-wide, non-profit academic organization dedicated to bring together nutrition experts and professionals to advance nutrition science and support the dissemination and application of nutrition to improve public health in China and the world. Currently, CNS has over 25,000 members in 31 provincial branches across China including academics, nutritionists, clinicians and dietitians, health workers, educators and students. CNS is composed of the Board of Directors, the Executive Council and the Council, in which CNS also supervises 11 Working Committees and 13 Academic Committees. The secretariat of CNS is located in Beijing and be responsible for academic events, international communication, training and education for professionals, members services, research grants and awards management, industry technical consultation and public education.

Mission:

- To bring researchers and scientific workers together in the advances of educational and nutritional sciences

- To further develop in nutrition science and technology with the food industry and dietary practices

- To support the dissemination and application of nutrition knowledge to improve public health and clinical practices

- To promote nutritional policies and increase national professionalism

Theme: Nutritional research to clinical practice

Date: 19th – 22nd September 2019

Venue: China National Convention Center, Beijing, China.

Webite: www.apccn2019.org

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