



ABSTRACTS

BEHAVIORAL HEALTH

Utilization of away-from-home food establishments, dietary approaches to stop hypertension dietary pattern, and obesity.

Penney T, Jones N, Adams J, et al. *Am J Prev Med.* 2017;53(5):e155-e163.

The authors employ a prospective assessment of energy intake from away-from-home food establishments to examine independent associations regarding diet and obesity. A cross-sectional analysis was used and a sample of 2,083 was obtained. The sample was 42% male, 89.6% white, with a mean age of 48 years; 42% had a professional occupation and 30.9% had a normal body mass index between 18 and 25. The sample was drawn from participants in the United Kingdom National Diet and Nutrition Survey with data reported between 2008 and 2012. A multi-stage, stratified random sampling procedure was designed to select households throughout the United Kingdom with up to one adult and one child. All participants were visited by trained researchers, and a nurse and completed a 4-day food diary. Height and body weight for all participants was taken at baseline, as well as sociodemographic information. After the interview, participants recorded all food and beverage consumption both in- and out-of-home over 3 to 4 consecutive days. Outcomes were in accordance with the Dietary Approaches to Stop Hypertension (DASH) diet and obesity status. Portion sizes were estimated using household measures and weights from food package labels obtained online. Each day was divided into seven timeslots and the food items consumed were recorded into each timeslot. Pre-existing categories for three away-from-home food establishment were used: restaurants, pubs and night clubs; fast-food takeaway; and cafes and sandwich shops. Descriptive statistics were used to summarize socioeconomic, behavioral, diet, health, and eating occasion variables across food exposures. Binary logistic regressions evaluated DASH accordance with obesity status by tertile of proportion of energy intake consumed away from home. All statistical analyses were conducted using Stata version 14 (StataCorp, 2015) in 2016. The authors report that people consuming a higher portion of energy from any away-from-home food establishment had lower odds of DASH accordance.

BUSINESS & INDUSTRY

Meeting UK dietary recommendations is associated with higher estimated consumer food costs: An analysis using the National Diet and Nutrition Survey and consumer expenditure data, 2008-2012.

Jones N, Tong T, Monsivais P. *Pub Health Nutr.* 2017; <https://doi.org/10.1017/S1368980017003275>.

Investigators examine diet cost in relation to the Scientific Advisory Committee on Nutrition (SACN) recommendations and Dietary Approaches to Stop Hypertension (DASH) diet. A cross-sectional study was designed using a sample of 2,045 adults. The sample was taken from Years 1-4 of the United Kingdom's National Diet and Nutrition Survey (NDNS) years 2008-2012. The sample was 43.5% male. Inclusionary criteria were being over age 18 years and having complete diet and cost data surveyed. Participants completed the NDNS using a computer-assisted interview supplemented by a nurse visit and food diary. The diary covered 4 consecutive days. Participants recorded the date and time for each item and described sizes and brands. The diaries were encoded using a database of foods. The interview included sociodemographic information as well as height and weight. Food prices were collected using Kantar WorldPanel (KWP). Researchers matched dietary inputs from the NDNS with food prices from KWP to create a data set. The diets were categorized into whether or not they met the SACN guidelines per the 2008 report *The Nutritional Wellbeing of the British Population*. Recommendations were tabbed as an SACN accordance score. The matched diet set was then examined in terms of DASH. Following the linkage of cost data, the diet was calculated for each by multiplying the mass in grams of each

item by the food's cost per gram. The cost for each item was then added for each person and divided by the diet diary days completed, producing and average daily diet cost. The relationship between diet cost and quality was assessed by comparing the mean dietary cost against DASH accordance, calculated using survey-weighted linear regression. All analyses were conducted using the statistical software package Stata SE 13.1 (StataCorp, 2013). The authors report that diets meeting the recommendations for fruit and vegetables, oily fish, non-milk extrinsic sugars, fat, saturated fat, and salt were 3% to 17% more expensive.

CLINICAL NUTRITION

Nutritional screening and clinical outcome in hospitalized patients with Crohn's disease.

Takaoka A, Sasaki M, Nakanishi N, et al. *Ann Nutr. Metab.* 2017; <https://doi.org/10.1159/000485637>.

The authors investigate the relationship between nutritional screening results and prognosis of hospitalized patients with Crohn's disease (CD). A cross-sectional study was designed to address this issue. A sample of 40 participants was utilized. The sample comprised patients with CD admitted to the Gastroenterology Unit of Shiga University of Medical Science Hospital between June 2011 and July 2016. Diagnoses for CD were established using radiological, endoscopic, histological, and clinical criteria. The sample was 75% male, with a median age of 32.4 years and median bodyweight of 55.2 kg. At admission, participants were measured for the following: height; weight; body mass index; nutritional screening tools used (Subjective Global Assessment [SGA], Malnutrition Universal Screening Tool [MUST], Nutritional Risk Screening [NRS],

IN THIS ISSUE

ABSTRACTSpage 519
PERIODICALSpage 523

Order Abstracted Articles at a Discount

Did you know you can order the articles listed in New in Review through the Academy? You can for a nominal charge of \$10. Simply e-mail a citation from New in Review (eg, Stensland SH, Sobal J. Dietary practices of ballet, jazz, and modern dancers. *J Am Diet Assoc.* 1992;92(3):319-324) to library@eatright.org. You will then be sent a link to pay for your article using a credit card. Articles are sent via e-mail and generally arrive within 3 business days.

Ondera's Prognostic Nutritional Index [O-PNI], and Controlling Nutritional Status [CONUT]; routine laboratory tests; and Crohn's Disease Activity Index (CDAI). The validity of the screening tools was evaluated separately in relation to intestinal resection and length of hospital stay. Statistical analyses were performed using the χ^2 test when appropriate. Correlation was investigated using Spearman rank correlation tests. Receiver operating characteristic curves were plotted to compare the capability of each clinical variable to predict prolonged length of stay. Statistical analyses were performed using SPSS version 22 (IBM Corp, 2013). The authors report prolonged length of stay was correlated with the following screening parameters: SGA, NRS 2002, O-PNI, CONUT, serum albumin level, and weight loss.

COMMUNITY NUTRITION

Supporting obesity prevention in state-wide quality rating and improvement systems: A review of state standards.

Geary N, Dooyema C, Reynolds M. *Prev Chronic Dis*. 2017; <https://doi.org/10.5888/pcd14.160518>. The authors describe the extent to which states' Quality Rating and Improvement System (QRIS) in early care and education infrastructures include obesity prevention content. A qualitative review was used to

analyze the literature on the issue. The sample studied contained 38 states within the United States. Inclusion criteria were that the state have a statewide QRIS operating during 2015 with standards available for review. Of the 50 states and District of Columbia, 12 states and the District of Columbia were excluded from the study for lacking an observable QRIS. States excluded were: Wyoming, South Dakota, Missouri, California, Florida, Alaska, Connecticut, Hawaii, Kansas, Louisiana, Virginia, and West Virginia, as well as the District of Columbia. Each state's QRIS standards were read by two researchers in their entirety and compared with the 47 high-impact obesity prevention components described in *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Program, 3rd Edition*. Those components were identified as high impact through an expert review process and categorized into: infant feeding (n=11), nutrition (n=21), physical activity (n=11), and screen time (n=4). Researchers also reviewed each state's QRIS standards for six additional topics: participation in the Child and Adult Care Food Program; facility-level self-assessment specific to nutrition, physical activity, screen time, breastfeeding or obesity prevention; action planning tools for obesity prevention-related areas; professional development training for obesity prevention-related topics;

technical assistance from professionals with subject matter expertise relevant to obesity prevention; and family-engagement resources or activities related to obesity prevention. The authors report that 11 of the 38 states had no standards related to obesity prevention. Of the 27 that did, 20 had at least one standard that aligned with a component and 21 had at least one standard that aligned with at least one of the six topics.

DIABETES CARE

Five-year effectiveness of the multi-disciplinary Risk Assessment and Management Programme – Diabetes Mellitus (RAMP-DM) on diabetes-related complications and health services uses – A population-based and propensity-matched cohort study.

Wan E, Fun C, Jiao F, et al. *Diabetes Care*. 2017;41(1):49-59.

The authors evaluate the long-term effectiveness of the Risk Assessment and Management Programme-Diabetes Mellitus (RAMP-DM) regarding all diabetes-related complications and health service uses over 5 years so as to determine the characteristics of patients receiving the greatest benefits. A prospective cohort study was designed to address this issue. The sample studied contained 121,584

Download English Version:

<https://daneshyari.com/en/article/8571973>

Download Persian Version:

<https://daneshyari.com/article/8571973>

[Daneshyari.com](https://daneshyari.com)