The third Asian Congress of Dietetics built on the successes of those previously held in Jakarta (1994) and Manila (1998). There were 588 delegates from over 25 countries (including 17 from Australia), providing 100 oral presentations and even more posters. The theme, Harmonisation of Asian Dietetics, was expressed through an excellent program focussing on the health profile of the Asian region and developments in dietetics practice and education. The range of topics was broad, covering all main areas of practice. Workshops focussed on strategies for eliminating malnutrition in the Asian region, clinical nutrition assessment and collaboration in education.

Nutrition challenges in the Asian region: dealing with extremes

In his opening speech, the Honourable Minister for Health Malaysia, YB Dato’ Chua Jui Meng summarised the nutrition issues facing health workers in the region today: an increasing prevalence of overweight and obesity, with iron and iodine deficiency remaining a problem, although undernutrition rates had been significantly reduced. These issues were expanded upon during a plenary session provided by Dr E-Siong Tee, President of the Nutrition Society of Malaysia, who emphasised that Asia needs to address both extremes of the nutrition spectrum. On the one hand, the increasing availability of nutrients has improved morbidity and mortality statistics in the region, reducing the proportion of nutrient deficiencies, but because the population is so large (two thirds of the world’s population resides in Asia), the number of people suffering malnutrition is still very large. For example, Dr Tee E-Siong reported the number of growth-stunted children is still estimated to be around 128 million in 2005 (down from 174 million in 1980). Iron deficiency anaemia still effects some 60% of preschool children in Central South Asia, and nine countries in the region still present with large numbers of people with goitre. On the other hand, the rate of childhood obesity is increasing in many locations, and as with deficiencies, the numbers are large. The trends, however, are somewhat checkered, highlighting a need for more comprehensive data, monitoring and research so that priorities may be established. Interestingly, the most affluent societies are apparently not necessarily the most obese. Thus, Dr Tee E-Siong made the comment that countries don’t have to pay the obesity price for development.

Obesity and Type 2 diabetes mellitus

Obesity and Type 2 diabetes were the topics of a number of sessions in the conference. Dr Mohd Ismail Noor from Malaysia raised the issue of the appropriateness of the Caucasian predictive equations for obesity in the Asian population, bearing in mind that lower BMI cut-off values for Asian men and women may be more reflective of body fat. Dr Farideh Ismail reported that visceral fat correlates well with cardiovascular disease risk, so waist circumference may also be better.

Osteoporosis

Osteoporosis was also presented as an emerging concern in Asia, with Lee Joon Kiong reporting from 1990 data that 31% of worldwide hip fractures occurred in Asia. Risk factors included low dietary calcium (< 500 mg/day), and lack of both regular load-bearing and past sporting activities.

Food and nutrition

In positioning her argument on the challenges the region faces, Dr Chwang Lei Chii from Taiwan referred to the globalisation of food, the unprecedented growth in the food trade, the governance of the food supply by international systems and the concentration of wealth in a very limited number of major food companies. This combined with the aging population and changes to traditional dietary culture meant that dietetics would need to ensure continuous innovation in practice. Reform in education should address relevant competency and lifelong learning. Finally, Dr Chwang referred to a need for extensive collaboration of resources, an issue taken up in the harmonisation (education) workshop.

The conference also heard on a number of aspects of functional foods, including presentations on FOSHU (Foods for Specific Health Use) in Japan, functional ingredients in Malaysian foods, flavonols and prebiotics. Dietary fat formulations were addressed by a Norwegian group reporting on the use of predictive equations in the development of cholesterol-lowering margarines (1), and by a Malaysian group on oil mixtures to minimise trans fatty acids.

Professional practice

Professional practice was very well covered in the program. Associate Professor Sandra Capra, immediate past president of DAA, provided a thought provoking plenary lecture on quality in dietetic practice; auditing and outcomes. The current ADA president, Dr Julie O’Sullivan Maillet, noted that the opportunities for dietetics were endless as practice drew on so many different disciplines. Her presentation was well supported by that of her colleague Dr Esther Myers, Director Scientific Affairs and Research, who spoke on evidence-based practice (2,3). Recent changes in the UK training system, involving three short integrated placements spread across the degree program were presented by Pam Judd. The placements were outcomes focussed and enabled students to gain insights into their careers much earlier in the academic program.
In the wide-ranging symposia, delegates heard from many experienced practitioners and researchers, and the vast amount of content cannot be reported here, but all of it attested to a very successful and productive event for the region and for the profession of dietetics.

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References

