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## "Let food be thy medicine"

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By Samanthi Bandara

"Let food be thy medicine and medicine be thy food", said Hippocrates, who is considered the 'Father of Modern Medicine', over 2000 years ago. He recognized the impact good food has on good health, as the food we consume not only sustain our lives, it also prolongs the quality of life

With globalization and rapid urbanization over the years, people's food habits have substantially changed along withtheir lifestyles. This has shifted the traditional healthy meal that consists of whole grains, fruits, and vegetables (high fibre, lowfat, and low calorie food), towards

calorie-dense foods that are high in saturated fats, trans-fats, sugar and salt.

This is causing significant health problems around the world, particularly giving rise to Non Communicable Diseases (NCDs), also known as chronic diseases. While NCDs cannot be transmitted from person to person, the diseases last over a long period and progress slowly. According to the World Health Organization (WHO) 38 million people (68%)die due to NCDs each year. Of which, the main types of NCDs including cardiovascular diseases (e.g., heart attacks and strokes), cancer, respiratory diseases (e.g.,asthma) and diabetesaccount for 82% of all NCD deaths globally. NCDs are the leading cause of deaths globally and three quarters of the deaths (8 million deaths) now occur in low and middle income countries.

Unhealthy food can be defined as food high in saturatedfats, trans-fats, free sugar or salt. According to the WHO, an unhealthy diet is one of the four modifiable behavioural risk factors that increase NCDs. Other risk factors include: tobacco use, physical inactivity, and harmful use of alcohol.

Frequent unhealthy diets increases obesity/weight gain, which is a risk factor of chronic NCDs such as cardiovascular disease, diabetes and cancer. Globally, more than 1.9 billion people are overweight while more than 600 million are obese. According to the WHO, annually, 3.4 million adult deaths occur worldwidedue to overweight/obesity. While, this problem is prevalent in higher socio-economic settings, it isalso on the rise in low and middle income countries.In Sri Lanka, prevalence of obesity in persons aged 18+ years was3.5% and 10% amongst males and females, respectively (Figure 1). Statisticson overweight were much higher. Obesity and overweight have become an acute problem among children due to overindulgence in high calorie food and indoor leisure activities (e.g.,television, internet, computer games, etc.). Moreover, children are increasingly subjected to advertisements that promote fast/processed food, which have a detrimental impact on their diets and health.

People from Sri Lanka as well as many countries across Asiaare displayingunhealthy diets and consumption patternsreflected by a low intake of fruits and vegetables, high consumption saltand sugar, and extensive use of trans-fatsin the food industry. Half a million deaths in the Southeast Asian region are attributed tolow intake of fruits and vegetables. While this is common among both males and females in Sri Lanka, among women 100out of 83 do not consume an adequateamount of fruits and vegetables a day (less than five servings).

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In addition, the consumption of salt and sugar in today's diets are high.Current estimates suggest that the global mean daily intake of salt is around 10g (4g of sodium a day). This is substantially higher than the recommended limit of the WHO (5a ofsalt or 2g of sodium a day). A Sri Lankan adult is estimated to consume over 12.5g of salt per day. The high consumption of salt is associated with hypertension (high blood pressure) and cardiovascular problems. Hypertension is found to be more prevalent among people with an average salt intake of 13.8 g per day, compared to salt intake of 4.9 g per day. According to WHO, excess salt intake is the key contributor of 1.7 million annual deaths from cardiovascular causes in 2010. In Sri Lanka, the

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	Raised Blood Pressure	21.7	21.9	21.5
	Obesity	4.9	3.5	10
	Overweight	22.4	16.2	28.4
	Raised Blood Glucose	8.4	7.7	9.1

prevalence of high blood pressure was around 21.9% and 21.5% for males and females, respectivelyin 2014.

The high consumption of sugar is directly associated with obesity/weight gain and dental caries. Similar to salt consumption recommendation, the WHO recently introduced anew guideline to reduce sugar intake. As per the recommendation, adults and children, particularly non-diabetic people, are strongly advised to reduce the daily intake of sugar to 5-10% of their total energy intake. This is roughly about 25 grams or 6 teaspoons of sugar per day. At present, individual sugar consumption in Sri Lanka is about three times higher than the recommended amount. Prevalence of raised blood glucose/diabetes in Sri Lanka among persons aged 18+ years was 7.7% and 9.1 % for males and females, respectively.

In Sri Lanka, 75% of the deaths are estimated to be caused by cardiovascular diseases, cancer, chronic respiratory diseases, diabetes and other NCDs. The number of NCD related deaths in 2014 was 60,300 and 43,500 among males and females respectively. Although it is said that NCDs are often associated with older age groups, almost half of the male deaths and more than one-third of female deaths were under the age group of 70 years. Figure 2,provides a break down profile of deaths by diseases in Sri Lanka. 40 % of the deaths can be attributed to cardiovascular disease, followed by cancerand other NCDs such as obesity/overweight, respiratory diseases and diabetes.

Not only are NCDs the main cause of deaths in Sri Lanka but the number of hospitalization due to NCDs appears to be increasing. In fact,NCD prevalence in Sri Lanka is substantiallyhigher compared to some Asian countries. In terms of NCD mortality, Sri Lanka is placed third (66%) in the ranking, behind Maldives (79%), and Thailand (71%).

Towards a Healthy Food Culture

Chronic diseases create financial burdensnot only on individuals, and the health system, but also adversely affect the country's productivity and national income.

Towards combating NCDs, there is a need to strengthenthe existing policy/legal enforcement governing food value chain from production to advertisement in the country. According to Liyanage (2009 & 2010), 60% of Sri Lankan consumers are not satisfied with the quality of food, and thetypes of food available in the market that are considered to be 'not as healthy as expected'. In particular, many food products have additives such as artificial colours and preservatives that exceed permitted levels.

Consumers also need to be made aware of the quality of food products they consume. Towards promoting a healthy lifestyle and prevent cardiovascular diseases, the College of Community Physicians of Sri Lanka in 2012 launched the 'Super 8' initiative in partnership with the National Nutrition Secretariat, the Ministry of Health and the Department of Agriculture. The Super Eight includes: 1) developing a healthy Body Mass Index (BMI) of 18.5 - 24.9;2) avoiding excessive consumption of salt and 3) sugar; 4) engaging in moderate exercise; 5) eating five servings of fresh fruit and vegetables every day; 6) avoiding food that contains trans-fat; 7) giving up smoking and alcohol consumption; and 8) maintaining blood pressure below 140/90.

Evidently, being conscious about the food we consume is vital; as a healthy diet is an integral part of a healthy lifestyle. Therefore, as the father of medicine once said "Let food be thy medicine".

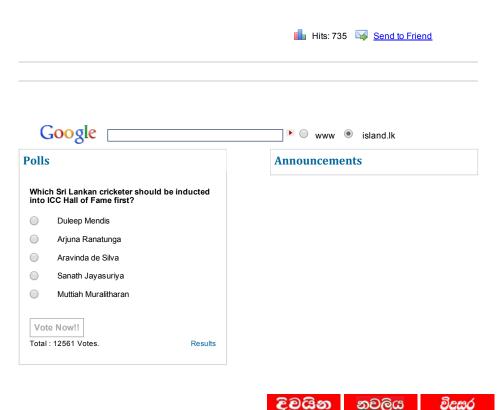
(Samanthi Bandara is a Research Officer at the Institute of Policy Studies of Sri Lanka (IPS). To view this article online and to comment, visit the IPS Blog 'Talking Economics' -

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