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# Human Nutrition <sup>13e</sup>

Edited by Catherine Geissler and Hilary Powers



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# Human Nutrition

THIRTEENTH EDITION

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# **Human Nutrition**

# Preface

This 13<sup>th</sup> edition of Human Nutrition covers a wide range of topics in the science of nutrition from the chemistry of food components and physiology of digestion, through nutrient requirements and effects of deficiencies and excesses, specific needs and food habits in differing age groups and physiological conditions, nutrition related diseases and their epidemiology, to clinical and public health measures designed to confront nutritional problems. It is intended as a textbook for undergraduate and graduate nutrition students and as a reference text for practitioners and researchers.

In the 7 years since publication of the 12<sup>th</sup> edition of this work, the world has experienced significant changes in the extent of malnutrition, both under-nutrition and over-nutrition, and also in the science of nutrition. Whilst the format of our previous editions remains largely unchanged, the authors have extensively updated the content, and several new chapters have been added to give more prominence to the topics of food safety, the relationship between nutrition and the nervous system, and diet and epigenetics.

Some of the significant changes in nutrition that have occurred over the intervening period include an increase in the prevalence of obesity and associated health conditions, as well as world-wide documentation of measures used to prevent or improve these conditions. Various bodies encourage healthy eating and some governments work with industry to explore ways of reducing fat, sugar and salt intake, others have imposed taxation or other legislation to curb excessive consumption of those food constituents. There is now a much greater awareness globally of the adverse effects of overconsumption, but more needs to be done to reduce the burden of obesity. Nutritionists are

working much more closely with scientists from other professions, to broaden our understanding of the metabolic, socio-economic and environmental causes. Never before have nutritional issues been so prominent in the media.

On the other hand, undernutrition remains a stark reality for many low and middle income countries, for refugees, and for the poorest in high income countries. Many countries now have a 'double burden' of under and over-nutrition, which complicates the development of relevant policies and actions. Much has been done, but more needs to be done, to elucidate the causes and impact of chronic low intakes of energy or micronutrients, and how best to address dietary inadequacies worldwide. New methods of collaboration are being developed between the various contributors to the international nutrition system, including academics, international agencies, governments, civil society, donors, food industry and others, in an attempt to speed up improvements in the wide prevalence of malnutrition.

This new edition of Human Nutrition is intended to keep the reader abreast of developments in our understanding of food and nutrition, from molecular mechanisms to nutrition policies designed to address under-nutrition as well as over-consumption. We are most grateful to our many authors for sharing so lucidly their expertise and insight in contributing to this new edition. We are also grateful to authors of chapters in the previous edition who have not contributed directly to the new edition.

Catherine Geissler  
Hilary Powers

July 2016

# New to this edition

- Three new chapters explore food safety, nutrition and the nervous system, and diet and epigenetics.
- A completely new and enhanced design and layout ensures that information is easy to navigate.



For extended coverage on the topics included in this textbook, in addition to further reading and weblinks for each chapter, visit the dedicated Online Resource Centre at **[www.oxfordtextbooks.co.uk/orc/geissler13e/](http://www.oxfordtextbooks.co.uk/orc/geissler13e/)**.

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# Abbreviations

AA	arachidonic acid	cAMP	cyclic adenosine monophosphate
ACE	angiotensin-converting enzyme	CAC	Codex Alimentarius Commission
ACH	arm–chest–hip index	CAGE	Cut, Annoyed, Guilty, Eye-Opener
AD	Alzheimer's disease	CAT	computer-assisted tomography
ADH	alcohol dehydrogenase	CBT	cognitive behavioural therapy
ADHD	attention deficit hyperactivity disorder	CCK	cholecystokinin
ADI	acceptable daily intake	CD	Crohn's disease, cluster of differentiation
ADP	adenosine diphosphate	CDC	Centers for Disease Control and Prevention (USA)
AIDS	acquired immune deficiency syndrome	cDNA	complementary DNA
ALD	alcoholic liver disease	cds	coding sequence
ALDH	aldehyde dehydrogenase	CED	chronic energy deficiency
ALP	atherogenic lipoprotein phenotype	CEL	carboxyl ester lipase
AMC	arm muscle circumference	CETP	cholesterol ester transfer protein
AMDR	acceptable macronutrient distribution range	CGI	comparative gene identification
AMP	adenosine monophosphate	CHD	coronary heart disease
AN	anorexia nervosa	CI	confidence interval
ANGPLT	angiopoietin-like proteins	CMAM	Community Management of Acute Malnutrition
ANLS	astrocyte–neuron lactate shuttle	CMPI	cow's milk protein intolerance
APT	atopy patch test	CMV	cytomegalovirus
AR	attributable risk	CNS	central nervous system
ARBD	alcohol-related birth defect	CoA	coenzyme A
ARFID	avoidant/restrictive food intake disorder	COMA	Committee On Medical Aspects of Food Policy
ART	anti-retroviral therapy, assisted reproductive technology	COPD	chronic obstructive pulmonary disease
ASP	animal source protein	COUP	chicken ovalbumin upstream promoter
ATP	adenosine triphosphate	COX	cyclo-oxygenase
AUDIT	Alcohol Use Disorder Identification Test	CRP	C-reactive protein
BAPEN	British Association for Parental and Enteral Nutrition	CRD	component-resolved diagnostics
BAT	brown adipose tissue	CSF	cerebrospinal fluid
BCAA	branched-chain amino acids (leucine, isoleucine, valine)	CUG	catch-up growth
BED	binge eating disorder	CVA	cerebrovascular accident
BER	base excision repair	CVD	cardiovascular disease
BF	body fat	CYP	cytochrome P450 mono-oxygenase
BFH	baby-friendly hospital	DA	dopamine
BIA	bio-impedance analyser	DALY	disability-adjusted life years
BIE	bioelectrical impedance	DAS	diallyl sulfide
BMC	bone mineral content	DADS	diallyl disulfide
BMD	bone mineral density	DBPCFC	double-blind placebo-controlled food challenge
BMI	body mass index	DCCT	Diabetes Control and Complications Trial
BMR	basal metabolic rate	DEFRA	Department of the Environment, Food and Rural Affairs (UK)
BN	bulimia nervosa	DES	dietary energy supply
bp	base pair	DEXA	dual-energy X-ray absorptiometry
BSE	bovine spongiform encephalopathy	DFE	dietary folate equivalents
BSID	Bayley Scores of Infant Development	DHA	docosahexaenoic acid, dehydroascorbic acid
BSF	biceps skinfold thickness		
BV	biological value		

DPA	docosapentaeonic acid	FAS	fetal alcohol syndrome
DHSS	Department of Health and Social Security (UK)	FAT	fatty acid translocase
DIAAS	digestible indispensable amino acid score	FATP	fatty acid transport protein
DIT	diet-induced thermogenesis, di-iodotyrosine	FBS	food balance sheet
DMFT	index of decayed, missing, and filled teeth (permanent)	FDA	US Food and Drug Administration
Dmft	index of decayed, missing, and filled teeth (deciduous)	FDG-PET	fluorodeoxyglucose positron emission tomography
DNA	deoxyribonucleic acid	Fe	iron
DNL	de novo lipogenesis	FES	Family Expenditure Survey
DNMT1	DNA methyltransferase 1	FFA	free fatty acid
DNSBA	Diet and Nutrition Survey of British Adults	FFM	fat-free mass
DoH	Department of Health (UK)	FFQ	food frequency questionnaire
DRI	dietary reference intake (USA)	FH	familial hypercholesterolaemia
DRV	dietary reference value (UK)	FIGLU	formiminoglutamic acid
dUMP	deoxyuridine monophosphate	FODMAP	fermentable oligosaccharides, disaccharides, monosaccharides, and polyols
EAA index	essential amino acid index	FOSHU	foods for specified health use
EAR	estimated average daily requirements (UK)	FPG	fasting plasma glucose
ECF	extracellular fluid	FSA	Food Standards Agency
ED	elemental diet, eating disorder	FSIS	Food Safety and Inspection Service (USA)
EDD	estimated date of delivery	FTT	failure to thrive
EDI	estimated daily intake	FXr	farnesyl X receptor
EDTA	ethylene diamine tetra-acetic acid	GAIN	Global Alliance for Improved Nutrition
EFA	essential fatty acid	GALT	gut-associated lymphatic tissue
EFS	Expenditure and Food Survey	GATT	General Agreement on Tariffs and Trade
EFSA	European Food Safety Authority	GAVI	Global Vaccine Alliance
EGF	epidermal growth factor	GDP	guanosine diphosphate
EGRAC	erythrocyte glutathione reductase activation coefficient	GI	gastrointestinal, glycaemic index
eLENA	eLibrary of Evidence for Nutrition Actions – WHO	GINA	Global Database on the Implementation of Nutrition Action
ELISA	enzyme-linked immunosorbent assay	GIP	gastric inhibitory peptide
ENS	enteric nervous system	GLP	Good Laboratory Practice
EoE	eosinophilic oesophagitis	GLP-1	glucagon-like peptide 1
EPA	eicosapentaenoic acid, Environmental Protection Agency (USA)	GM	genetically modified
ER	endoplasmic reticulum, oestrogen receptor	GPx	glutathione peroxidase
ERP	event-related potential	GRAS	generally regarded as safe
ESPEN	European Society for Parenteral and Enteral Nutrition	GWAS	genome-wide association studies
EU	European Union	GTF	glucose tolerance factor
FA	fatty acid	GTP	guanosine triphosphate
FABP	fatty acid binding protein	H <sup>+</sup>	hydrogen ions
FACS	fluorescence activated cell sorter	HACCP	Hazard Analysis Critical Control Point
FAD	flavin adenine dinucleotide, fatty acid desaturase	Hb	haemoglobin
FAEE	fatty acid ethyl ester	HBV	hepatitis B virus
FAO	Food and Agriculture Organization of the United Nations	HCG	human chorionic gonadotrophin
		HDL	high density lipoproteins
		HEP	high energy phosphate
		HFA	height for age
		HFCS	high-fructose corn syrup
		HIV	human immunodeficiency virus
		HL	hepatic lipase
		HLA	human leucocyte antigen



HPLC	high-performance or high-pressure liquid chromatography	LOX	lipoxygenase
HPV	human papillomavirus	LPL	lipoprotein lipase
HSL	hormone-sensitive lipase	LPS	lipopolysaccharide
IAA	indispensable amino acid	LRNI	lower reference nutrient intake
IAP	intracisternal A particle	LTI	lower threshold intake
IARC	International Agency for Research on Cancer	MAC	mid-arm circumference
IBS	irritable bowel syndrome	MAFF	Ministry of Agriculture, Fisheries and Food (UK)
ICC	interstitial cells of Cajal	MAM	moderate acute malnutrition
ICF	intracellular fluid	MAST	Michigan Alcohol Screening Tool
IDA	iron-deficiency anaemia	MCT	medium-chain triglycerides
IDD	iodine deficiency disorder	MDG	Millennium Development Goal
IDDM	insulin-dependent diabetes mellitus	ME	metastable epiallele
IDL	intermediate density lipoproteins	Mg	magnesium
IF	intestinal failure	MHC	major histocompatibility complex
IFG	impaired fasting glucose	MIT	mono-iodotyrosine
IFN- $\gamma$	interferon-gamma	MJ	megajoule
IFPRI	International Food Policy Research Institute	MMA	methylmalonic acid
Ig	immunoglobulin	MMC	migrating motor complex
IGF-1	insulin-like growth factor 1	MNA	Mini Nutritional Assessment
IGT	impaired glucose tolerance	MODY	maturity-onset diabetes of the young
IHD	ischaemic heart disease	MPR	minimum protein requirement
IHS	Integrated Household Survey	MRI	magnetic resonance imaging
IL	interleukin	mRNA	messenger RNA
ILSI	International Life Sciences Institute	miRNA	microRNA
IMTG	intramyocellular triacylglycerol	MRS	magnetic resonance spectroscopy
IOC	International Olympic Committee	MSI	minimum safe intake
IOM	Institute of Medicine	MTCT	mother-to-child transmission
IOTF	International Obesity Task Force	MUAC	mid-upper arm circumference
IP <sub>3</sub>	inositol-1,4,5-triphosphate	MUFA	mono-unsaturated fatty acid
IPM	integrated pest management	MUST	Malnutrition Universal Screening Tool
IU	international unit	MZ	monozygotic
IUGR	intra-uterine growth retardation	N4G	nutrition for growth
JECFA	Joint Expert Committees on Food Additives	Nac	nucleus accumbens
JEMRA	Joint Expert Meeting on Microbial Risk Assessment	NAD	nicotinamide adenine dinucleotide
JMPR	Joint Meetings on Pesticide Residues	NAADP	nicotinic acid adenine dinucleotide phosphate
K	potassium	NADP	nicotinamide adenine dinucleotide phosphate
LA	linoleic acid	NAFLD	non-alcoholic fatty liver disease
LBM	lean body mass	NaHCO <sub>3</sub>	sodium bicarbonate
LBW	low birthweight	NCD	non-communicable disease
LCAT	lecithin-cholesterol acyltransferase	NCGS	non-coeliac gluten sensitivity
LCD	low calorie diet	ncRNA	non-coding RNA
LCPUFA	long-chain polyunsaturated fatty acid	NDNS	National Diet and Nutrition Survey
LCTG	long-chain triglyceride	NEAT	non-exercise activity thermogenesis
LDL	low density lipoproteins	NEC	necrotizing enterocolitis
LLNA	large neutral amino acid	NEFA	non-esterified fatty acids
LMICs	low and middle income countries	NFS	National Food Survey
LMP	last menstrual period	NHANES	National Health and Nutrition Examination Survey
LNS	lipid-based nutritional supplement	NK	natural killer
LOFFLEX	low-fat fibre-limited exclusion diet	NMN	N-methyl nicotinamide
		NMR	nuclear magnetic resonance

NOAEL	no adverse effect level	RAR	retinoic acid receptor
NR-NCD	nutrition-related non-communicable disease	RAST	radio-allergosorbent test (food allergy)
NSP	non-starch polysaccharide	RBC	red blood cell
NSAID	non-steroidal anti-inflammatory drug	RBP	retinol binding protein
NTD	neural tube defect	RCT	randomized controlled trial
ODA	official development assistance	RDA	recommended daily allowance
ODS	Office of Dietary Supplements	RDI	recommended daily intake
OGTT	oral glucose tolerance test	rDNA	recombinant DNA
ONL	obligatory nitrogen loss	RDR	relative dose response
ONS	oral nutritional supplements, Office of National Statistics	RE	retinol equivalence
OR	odds ratio	REACH	Resource for Advancing Children's Health
OSFED	other specified feeding and eating disorders	REE	resting energy expenditure
Pi	inorganic phosphate	RfD	reference dose
PAH	polycyclic aromatic hydrocarbon	RISK	RNA-induced silencing complex
PAL	physical activity level	RMR	resting metabolic rate
PAT	Paddington Alcohol Test	RNA	ribonucleic acid
PBM	peak bone mass	RNI	reference nutrient intake (UK)
PBB	polybrominated biphenyl	ROS	reactive oxygen species
PCB	polychlorinated biphenyl	RQ	respiratory quotient
PCI	protein C inhibitor	RR	relative risk
PCOS	polycystic ovary syndrome	RS	resistant starch
PDCAAS	protein digestibility corrected amino acid score	RTF	ready to feed (infant formula)
PEM	protein–energy malnutrition	RUTF	ready to use therapeutic foods
PER	protein efficiency ratio	RXR	retinoic X receptor
PEU	protein–energy undernutrition	SAA	sulfur amino acids
PFK	phosphofructokinase	SAC	S-allylcysteine
PGC	primordial germ cell	SACN	Scientific Advisory Committee on Nutrition
PHE	Public Health England	SADQ	Severity of Alcohol Dependence Questionnaire
PHV	peak height velocity	SAM	S-adenosylmethionine, severe acute malnutrition
PIVKA	protein induced by vitamin K absence or antagonism	SAMC	S-allylmercaptocysteine
PLRP	pancreatic lipase-related protein	SCF	Scientific Committee on Food (EU)
PPAR	peroxisome proliferation activated receptor	SCFA	short-chain fatty acid
PPU	postprandial protein utilization	SCID	severe combined primary immunodeficiencies
PRI	population reference intake (of nutrients)	SD	standard deviation
PRSL	potential renal solute load	SENECA	Survey in Europe on Nutrition and the Elderly
P/S ratio	polyunsaturated/saturated fatty acid ratio	SFA	saturated fatty acid
PSD	psychosocial deprivation	SGA	small for gestational age, subjective global assessment
PSP	plant source protein	SGLT	sodium glucose-linked transporter
PT	preterm	SIBO	small intestinal bacterial overgrowth
PTH	parathyroid hormone	SMR	standardized mortality ratio
PTL	pancreatic triacylglycerol lipase	SNP	single nucleotide polymorphism
PUFA	polyunsaturated fatty acids	SOD	superoxide dismutase
PVC	polyvinyl chloride	SPA	spontaneous physical activity
PWS	Prader–Willi syndrome	SR	sarcoplasmic reticulum (complex)
PYY	peptide YY	T <sub>3</sub>	tri-iodothyronine
RAE	retinoid activity equivalent	T <sub>4</sub>	tetra-iodothyronine
		TAG	triacylglycerol

TBW	total body water	USRDA	United States Recommended Daily Allowance
TCA cycle	tricarboxylic acid cycle	UTP	uridine triphosphate
TDI	tolerable daily intake	UTR	untranslated region
TEE	total energy expenditure	VAD	vitamin A deficiency
tHcy	total homocysteine	VAS	visual analogue scale
TIBC	total iron-binding capacity	vCJD	new variant Creutzfeldt-Jakob disease
TMAO	trimethylamine oxide	VDR	vitamin D receptor
TMP	thymidine monophosphate	VKDB	vitamin K deficiency bleeding
TNF	tumour necrosis factor	VLBW	very low birthweight
TNF- $\alpha$	tumour necrosis factor alpha	VLCD	very low calorie diet
TPN	total parenteral nutrition	VLDL	very low density lipoproteins
TRL	triacylglycerol-rich lipoprotein	Vo <sub>2</sub> max	maximal oxygen uptake
tRNA	transfer RNA	WBC	white blood cell
TSF	triceps skinfold thickness	WCRF	World Cancer Research Fund
TSH	thyroid-stimulating hormone	WFA	weight for age
TUL	tolerable upper limit	WFH	weight for height
UC	ulcerative colitis	WFP	World Food Programme
UCP-1	uncoupling protein 1	WFS	World Food Summit
UDP	uridine diphosphate	WHO	World Health Organization
UF	uncertainty factor	WIC	Women, Infants and Children – Food and Nutrition Service, USA
UL	upper tolerable intake level	WIN	Weight Control Information Network
UNICEF	United Nations Children's Fund	WOF	World Obesity Federation (formerly IOTF)
UNSCN	United Nations Standing Committee on Nutrition (also SCN)	WTO	World Trade Organization
UNU	United Nations University	Zn	zinc
USDA	United States Department of Agriculture		

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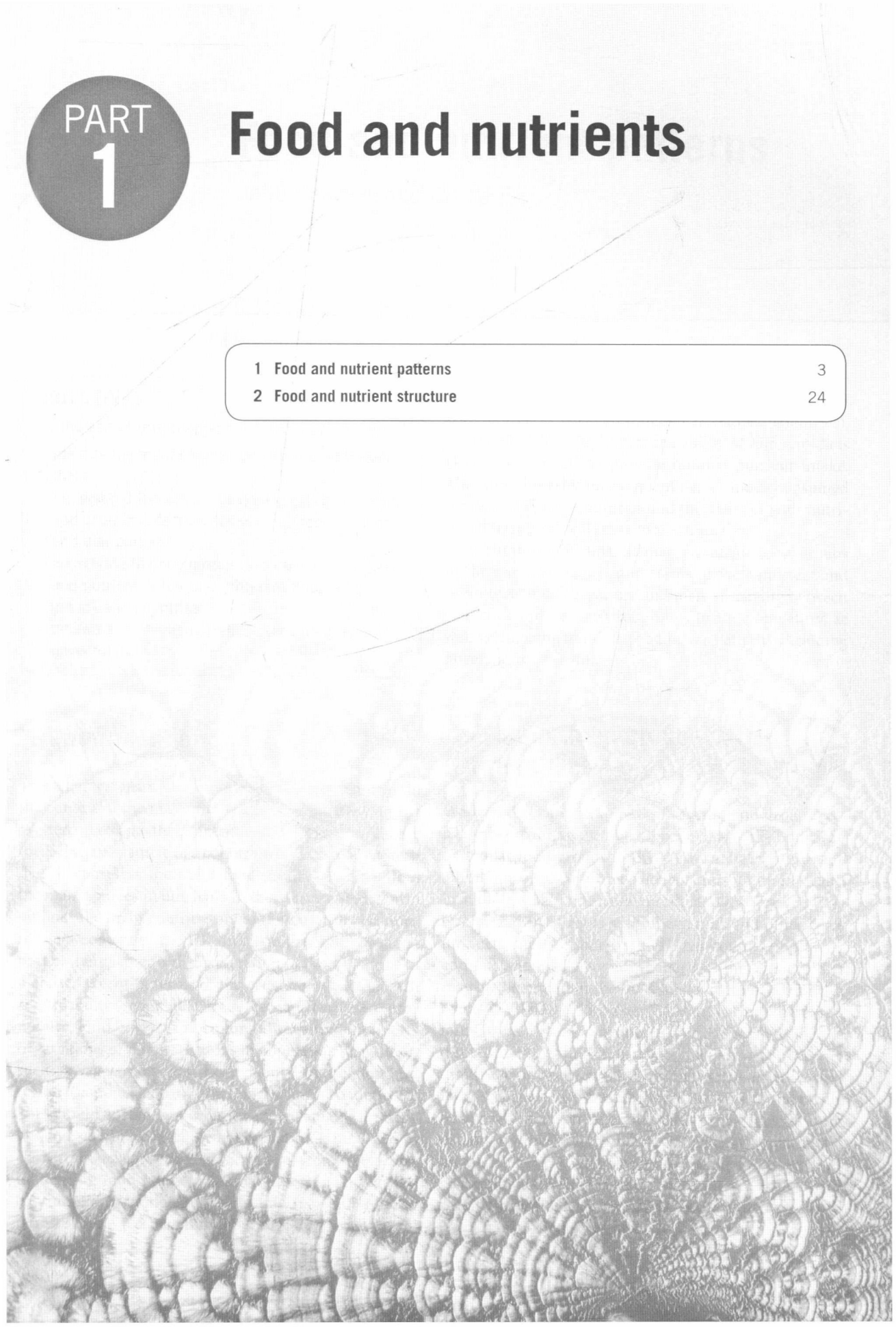
# Food and nutrients

1 Food and nutrient patterns

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2 Food and nutrient structure

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# 1

## Food and nutrient patterns

*John Kearney and Gerda Pot*

### OBJECTIVES

By the end of this chapter you should be able to:

- identify the main sources of nutrients in Western diets
- understand the social, psychological, geographic, and economic factors determining food choices and diet patterns
- appreciate the similarities and variability in food and nutrient patterns in different population groups and countries
- be aware of changing trends over time, including novel foods.

differences—between developing and developed countries as well as between different developed countries), is described. This highlights the ability of different diets (foods consumed) to provide optimal nutrient intake. The wide diversity in the quantities of foods consumed between different countries and the changes with nutritional transition will serve to illustrate this.

In summary, in this chapter the major food groups in the diet are examined in terms of their nutrient and non-nutrient contribution, and their variability between countries and between subgroups in the population, as well as changing trends in food intake patterns, including novel foods, over time.

### 1.1 Introduction

This chapter examines food and nutrient patterns in the context of the major foods and food products in the Western diet and their nutritional importance. Taking the UK as an example of a country with a typical Western diet, it considers the main food groups and identifies the main sources of nutrients in the Western diet. It also outlines the main contributors to the nutrient and non-nutrient content of the UK diet. Another important aspect of this chapter is the exploration of the variations in dietary patterns in terms of the causes of variation such as availability (geographic, trade, demand) as well as economics, food beliefs, and cultural differences. Examples of variations in dietary patterns in population subgroups, such as vegetarians and those defined by religion and region (national and international), are also outlined. This should enable the reader to appreciate the similarities and variability in different population groups and to clarify the social, psychological, and geographical factors influencing food intake patterns. The variability in the consumption of foods, nutrients, and non-nutrients, in terms of time (secular trends) and place (geographical

### 1.2 Major food groups in the western diet

Western diets are composed of several food groups collectively providing the nutritional needs of the body. The particular food groups in the Western diet that provide all the nutrients and non-nutrients for optimum health include cereals and cereal products (e.g. bread), vegetables and fruit, roots and tubers, milk and other dairy products, meats, fish, eggs, and other sources of protein, and fats and oils. A typical pattern of the Western diet may be illustrated in the food intake patterns for British adults (DEFRA 2013a) (see Table 1.1). How these patterns vary between countries (i.e. geographically) is discussed in Section 1.3, while changes over time are discussed in Section 1.4. The non-nutrients discussed in this chapter are those believed to have a potentially beneficial effect on human health. They include both dietary fibre and phytoproducts such as flavonoids and phytoestrogens. Other non-nutrients in foods, such as contaminants, allergens, and food additives, do not have specific nutritional benefits and are not discussed here (see Chapters 2 and 3).