



Summary from the European Meeting of WHO Collaborating Centres for Nutrition, Kraków, 23–24 June 2010

Podsumowanie Europejskiej Konferencji Ośrodków Współpracujących z WHO w zakresie Żywienia, Kraków, 23–24 czerwca 2010

Zbigniew Szybiński¹, Joao Breda²

¹Head of the WHO Collaborating Centre for Nutrition at the Department of Endocrinology, Jagiellonian University, Collegium Medicum, Kraków, Poland

²Programme Manager; Nutrition, Physical Activity and Obesity Programme; Division of Noncommunicable Diseases and Health Promotion; World Health Organization — Regional Office for Europe

Abstract

In June 2010, the WHO Regional Office for Europe, in co-operation with the WHO Collaborating Centre for Nutrition at the Department of Endocrinology, Jagiellonian University, Collegium Medicum, organized in Krakow the 1st Conference of the WHO European Collaborating Centres for Nutrition. Taking part were representatives of the WHO Regional Office for Europe Nutrition, Dr Joao Breda (Programme Manager – Nutrition, Physical Activity and Obesity Programme) and representatives of the WHO Collaborating Centres for Nutrition from Denmark, Greece, Holland, the UK and Poland, as well as representatives of co-operating institutes from Portugal, Switzerland and the UK. The main objective of the meeting was to discuss the ongoing work of each Collaborating Centre and the development of a strategic plan for the coming years in the most important areas of interest: the prevention of obesity, type 2 diabetes and other NCD, nutrition and inequalities, capacity building in nutrition as well as micronutrient deficiencies (namely iodine deficiency). A final report summarising the Network Meeting is being prepared and will be released in due course.

Streszczenie

W czerwcu 2010 roku Biuro Regionalne Światowej Organizacji Zdrowia (WHO, *World Health Organization*) w Kopenhadze wraz z Ośrodkiem WHO w zakresie Żywienia przy Klinice Endokrynologii Uniwersytetu Jagiellońskiego, *Collegium Medicum* w Krakowie zorganizowali I Europejską Konferencję Ośrodków WHO w zakresie Żywienia. W Konferencji wziął udział Dr Joao Breda, Kierownik Sekcji WHO w Kopenhadze w zakresie Programu n/t Żywienia, Aktywności Fizycznej i Otyłości, oraz kierownicy Ośrodków WHO w zakresie Żywienia z Danii, Grecji, Holandii, Wielkiej Brytanii, oraz reprezentacji Współpracujących z WHO Instytutów z Portugalii, Szwajcarii i Wielkiej Brytanii. Głównym celem Konferencji było przedstawienie planów pracy każdego z Ośrodków w następnych latach w najważniejszych obszarach działania: zapobiegania otyłości, cukrzycy typu 2 i innym chorobom cywilizacyjnym, strategii w zakresie żywienia, jak również niedoborom pierwiastków śladowych — głównie niedoborowi jodu. Końcowy raport podsumowujący Konferencję jest w trakcie opracowania i będzie udostępniony we właściwym czasie.

Introduction

Nutrition policy is a global challenge in Europe in the face of the increasing prevalence of obesity, type 2 diabetes, hypertension, cardiovascular disease, and some micronutrient (namely iodine) deficiency [1, 2]. Micronutrient deficiency is a very important health problem in Europe. Especially in some countries, iodine deficiency is a serious public health problem [3, 4] (Table I). In some regions, the prevalence of goitre is rising. In Europe, the prevalence of goitre increased by 80% between 1993 and 2003 [4]. Before the introduction of the effective model of iodine prophylaxis in Poland [5], the prevalence of goitre in pregnant women was estimated at around 80% [6] and in the Krakow and Sudeten areas,

the prevalence of goitre in schoolchildren reached over 50% [7, 8]. One epidemiological survey on the population level co-ordinated by the Department of Endocrinology, Jagiellonian University, Collegium Medicum in Krakow carried out in 1999/2001 revealed an endemic prevalence of type 2 diabetes on the population level: 5.6%, more than 2 million people [9].

Excess dietary salt is a risk factor for hypertension (affecting approximately nine million individuals in Poland) and has deleterious complications: stroke, myocardial infarction, coronary heart disease as well as certain cancers [10]. These constitute the main cause of mortality in individuals aged 60 years and over, and the second greatest cause of concern in individuals aged 15–59 years [11]. The cost of treating these individuals

Table I. Milestones in the development of iodine prophylaxis in children**Tabela I. Główne daty rozwoju w profilaktyce jodowej u dzieci**

1989 — Convention on the Rights of Children, United Nations Assembly, New York
1990 — World Summit for the Child, United Nations, New York
1991 — Declaration for the Survival, Protection and Development of Children, World Conference on Micronutrient UNICEF, WHO, AO, ICCIDD, Montreal
1992 — World Conference on Nutrition, WHO, FAO, Rome
2007 — Iodine Deficiency in Europe: A Continuing Public Health Problem, WHO. Editors: Maria Andersson (Swiss Federal Institute of Technology, Zurich, Switzerland), Bruno de Benoist (WHO, Geneva, Switzerland), Ian Darton-Hill, (UNICEF, NY, USA), Francois De Lange (ICCIDD, Brussels, Belgium).

is very high. In 2005, the cost of treating cardiovascular diseases in the European Union reached upwards of 169 billion [12, 13]. With the assistance of the WHO Regional Office for Europe, countries in the Region have been primary developing policies to tackle the double burden of malnutrition. One of the most relevant milestones was the WHO European Ministerial Conference on Counteracting Obesity, held in Istanbul in 2006 [14]. At this conference, Member States approved the European Charter on Counteracting Obesity which lists guiding principles and areas for action.

In 2007, the European Commission issued a 'White Paper on a Strategy for Europe on nutrition, overweight and obesity related health issues' [15]. The same year, the WHO Regional Committee for Europe endorsed 'The WHO European Action Plan for Food and Nutrition Policy 2007–2012' [2, 16] as a framework and principles for preventive actions and monitoring to be undertaken by Member States.

In March 2010, the WHO Regional Office for Europe organised the meeting for Nutrition Counterparts in the WHO European Region and National Information Focal Points for the Joint WHO/EC Joint Monitoring Project* in the 27 EU Member States, the Project Advisory Group, the Steering Committee and for members of the EC High Level Group on Nutrition and Physical Activity and other stakeholders. The aim of the meeting was to discuss a strategy to improve nutrition and physical activity, implementing policy actions and preventing obesity. Two representatives from Poland were invited: Dr W. Sekuła from the Food and Nutrition Institute in Warsaw who presented a new policy document entitled 'Position Paper on Initiatives Aimed at Decreasing Dietary Salt Consumption in Poland' [17], and Prof. Z. Szybiński, Head of the WHO Collaborating Centre for Nutrition at the Department of Endocrinology, UJCM, who presented the actual situation of

iodine prophylaxis in Poland [18]. One of the decisions was the organisation of the first meeting of the informal network of the WHO Collaborating Centres for Nutrition to be held in Krakow.

WHO Collaborating Centres for Nutrition

WHO Collaborating Centres participate in line with WHO policy and strategy and are designated to form part of an inter-collaborative network at regional, interregional, national, international and global levels. WHO Collaborating Centres also strengthen national research, training and services, in support of national health policy development.

A continuous consultation process on preventive measures to tackle the double burden of malnutrition takes place involving nutrition counterparts, governmental and non-governmental organisations and groups of experts.

In June 2010, the WHO Regional Office for Europe in co-operation with the WHO Collaborating Centre for Nutrition at the Department of Endocrinology, Jagiellonian University, Collegium Medicum, organised in Krakow the 1st Conference of the WHO European Collaborating Centres for Nutrition. The main objective of the meeting was to discuss the ongoing work of each Collaborating Centre and the development of a strategic plan for the next few years. Each WHO Collaborating Centre presented at this meeting its work to identify priority issues and specific areas for collaboration. It was also an opportunity to discuss fine-tuning of the strategy for nutrition and physical activity action in Europe. Finally, the meeting facilitated strengthened networking between the individual WHO Collaborating Centres for Nutrition and WHO. In the meeting, there were representatives of the WHO Regional Office for Europe Nutrition, Dr Joao Breda (Programme Manager — Nutrition, Physical Activity and Obesity Programme) and representatives of the WHO Collaborating Centres for Nutrition from Denmark, Greece, Holland, the UK and Poland, as well as representatives of the Co-operating Institutes from Portugal, Switzerland and the UK. The WHO Collaborating Centre for Nutrition in Poland was designated at the Department of Endocrinology, Jagiellonian University in Krakow in 2008 with the following terms of reference:

Prevention of iodine deficiency disorders

Contribute to the development of measures to align salt iodisation strategy with salt reduction strategy. In Poland, iodisation of animal salt licks and iodisation of table water have been implemented. Experience gained will provide information about the feasibility and effectiveness of alternative methods of inclusion of iodine in the food chain. The Collaborating Centre conducts

Table II. WHO, UNICEF, ICCIDD [13, 19]. *Recommended daily dietary iodine consumption (ug/day/person)***Tabela II.** WHO, UNICEF, ICCIDD [13, 19]. *Rekomendowane dawki jodu w codziennej diecie (g/dzień/osobę)*

Nursery-aged children (0–59 months) — 90
Elementary school-aged children (6–12 years) — 120
Adolescents and adults > 12 years — 150
Pregnant and breast-feeding women — 250

a public campaign focused on iodine deficiency, organises press conferences and prepares TV spots to improve public awareness about IDD, and promote the correct use of iodised food products. The Centre develops clear and unambiguous messages about the use of iodised salt, while recommending an — according to WHO recommendations [12, 13, 19] (Table II) — overall reduction of dietary salt intake.

Primary prevention of type 2 diabetes

The Collaborating Centre performs primary prevention of type 2 diabetes implementing the international programmes DE-PLAN and IMAGE [20] focused on education and promotion of non-pharmacological interventions. The main target is to introduce a model of early diagnosis of type 2 diabetes and non-pharmacological intervention on the primary health care level. This experience will allow contributing to the WHO work on primary prevention of non-communicable diseases through primary health care.

Monitoring, evaluation and research

The Collaborating Centre also develops research activities in the following areas:

1. Monitoring IDD in schoolchildren and pregnant women developed within the framework of the Programme for Elimination of Iodine Deficiency in Poland financed by the Ministry of Health.
2. Monitoring of the incidence rate of thyroid cancer and investigating the economics of primary prevention of type 2 diabetes and iodine prophylaxis.

Conclusions

The representatives of the European WHO Collaborating Centres for Nutrition and collaborating institutions

who took part in the conference agreed on a common work plan, and networking activities. Some of the most important areas of interest for these Collaborating Centres are the prevention of obesity, type 2 diabetes and other NCD, nutrition and inequalities, capacity building in nutrition as well as micronutrient deficiencies (namely iodine deficiency).

A final report summarising the Network Meeting is being prepared and will be released in due course.

References

1. WHO — Iodine deficiency in Europe: a continuing public health problem. WHO, Copenhagen, 2003.
2. WHO — European Action Plan for Food and Nutrition Policy 2007–2012. Copenhagen, WHO Regional Office for Europe 2008.
3. WHO, Iodine Status World Wide. WHO database on iodine deficiency. WHO, Geneva, 2004.
4. WHO, UNICEF, ICCIDD. Assessment of iodine deficiency disorders and monitoring their elimination. Geneva, WHO/NHD/01.1.2001.
5. Recommendations of the Polish Council for the Control of Iodine Deficiency Disorders and the Polish Society of Endocrinology. *Pol J Endocrinol* 1998; 49 (Suppl. 1): 203–213.
6. Krzyczkowska-Sendrakowska M, Zdebski Z, Kaim I et al. Iodine deficiency in pregnant women in an area of moderate goitre endemia. *Pol J Endocrinol* 1993; 44: 344–350.
7. Król W, Stylo D. Rozprzestrzenienie wola w województwie krakowskim i znaczenie środowiska w kształtowaniu rodzaju i stopnie endemii. *Pol Tyg Lek* 1957; 12: 2019.
8. Szybiński Z, Żarnecki A. Prevalence of goitre, iodine deficiency and iodine prophylaxis in Poland. The results of a nation-wide study. *Pol J Endocrinol* 1993; 44: 373–388.
9. Szybiński Z. Polish Multicentre Study on Diabetes Epidemiology. *Pol Arch of Int Med* 2001; 3: 751.
10. Sekula W, Ołtarzewska M, Banysz A. Ocena spożycia chlorku sodu w Polsce na podstawie wyników budżetów gospodarstw domowych. *Żyw Człow Met* 2008; 35: 265.
11. European recommendations on prevention of cardiovascular diseases in clinical practice. *Kardiologia Polska* 2008; 66 (Suppl.1): S1–S48.
12. WHO. Forum and Technical Meeting on Reducing Salt Intake in the Population. Paris, France. October 2006.
13. WHO. Report of a WHO Expert Consultation on Salt as a Vehicle for Fortification. Luxembourg 21–22 March 2007.
14. WHO. European Ministerial Conference on Counteracting Obesity. Conference Report. Copenhagen, WHO Regional Office for Europe 2007.
15. White Paper on Strategy for Europe on nutrition, overweight and obesity related health issues. Brussels, European Commission 2007.
16. Branca F, Nikogosian N, Lobstein T. The challenge of obesity in the WHO European Region and the strategies for response. WHO 2007.
17. Position Paper on Undertaking Initiatives Aimed at Reduction of Salt Consumption in Poland. Food and Nutrition Institute in Warsaw 2009.
18. Szybiński Z, Jarosz M, Hubalewska-Dydejczyk A et al. Iodine deficiency prophylaxis and the restriction of salt consumption — a 21st century challenge. *Pol J Endocrinol* 2010; 61: 135–140.
19. WHO Technical Consultation. Daily value of iodine intake. WHO, Geneva, 2005.
20. Thuomilehto J, Schwarz PE. Primary prevention of type 2 diabetes is advancing towards the mature stage: Hormone and Metabolic Research 2010; 42 (Suppl. 1): 51–52.