Special review

Review of the journal 'Public Health Nutrition', first volume 1998

Public Health Nutrition was launched in 1998 and publishes quarterly as one of the journals of The Nutrition Society. The subject is defined as a population approach to the prevention of illness and the promotion of health through nutrition. The journal aims to become 'the' journal for the publication of nutritional epidemiological findings. Other aims include the provision of an international forum that facilitates a dialogue between theory, research and practice; recognition of the diversity of international health problems and the approaches required to address these problems; encouragement of studies that evaluate the effectiveness and impact of nutrition-related health promotion; exploration of the complex links between knowledge, attitudes and behaviour; and encouragement of methodological research in study design. The definition, roles and functions of public health nutritionists are described in an article by Landman and colleagues in the first issue (Landman et al. 1998).

In the first year of publication, to what extent have the aims of Public Health Nutrition been reached? Out of the thirty-two papers in volume 1, less than ten are of UK origin and twenty different countries, including USA, Canada, Jamaica, India, Pakistan, Bangladesh, Rwanda, Denmark, Republic of Ireland, Spain, Greece, and Sweden are represented. The journal can therefore be said to be truly international. Diverse nutritional problems are tackled, ranging from plasma fibrinogen and heart disease in black South Africans (Vorster et al. 1998) to iron-deficiency anaemia in Nigerian adolescents (Barr et al. 1998), and the incidence of Wernicke-Korsakoff syndrome in relation to thiamin enrichment of bread in Australia (Rolland & Truswell, 1998). No journal on public health can be complete without consideration of health claims, and a thorough review of functional foods is included on p. 75 by Lawrence & Rayner (1998). The techniques of epidemiology are also all represented, with cross-sectional comparisons of alcohol and nutrient intakes in relation to blood status indices from data meticulously gathered from representative population samples in the UK (Walmsley et al. 1998), to intervention studies of fat intake on serum lipoproteins and apolipoproteins in Finland (Aro et al. 1998), and a case-control study of dietary factors in breast cancer in Germany (Thorand et al. 1998). An important contribution uses the prospective approach; Key et al. (1998) report a collaborative analysis of mortality in vegetarians and non-vegetarians from five prospective studies in the USA, UK and Germany. Overall, the study of 8300 deaths among 76 000 men and women, showed that vegetarians have strikingly lower rates of heart disease, but that vegetarians are not at lower risk of death from other causes, notably large-bowel cancer.

There are also interesting and informative reviews of nutritional transition and its effects on the patterns of diseases such as obesity and diabetes (Popkin, 1998), and of health inequalities both between affluent and less affluent countries and within them (Darnton-Hill & Coyne, 1998). Darnton-Hill & Coyne (1998) pack their review with dietary and health statistics drawn from all the major continents of the world and point out that non-food factors such as education, health care and clean water are of critical importance in determining nutrition. This is reinforced by studies of diet in Bangladesh (Ahmed *et al.* 1998) in which the nutritional status of adolescent girls was particularly influenced by their mothers' educational level. The importance of lack of education of women and difficulties in remedying this are described in a study from Pakistan (Northrop-Clewes *et al.* 1998).

From the UK, two papers describe the barriers to improving nutrition through increased fruit and vegetable consumption. Cox et al. (1998) reported that many individuals who thought they had a high intake of fruits and vegetables, in fact were consuming comparatively low amounts. In a large study, from the Health Education Authority, of over 5500 men and women (Margetts et al. 1998) cluster analysis was used to categorize healthy and less healthy diets; again the better educated were more likely to report eating a healthy diet than lower income younger family clusters. At a time when there has been remarkable consistency in dietary guidelines, the fact that the 75 % of respondents believed that experts never agree about which foods are good for health is disappointing, and probably reflects the effect of the media in presenting overall messages as controversial. Although frequently stated that dietary treatment alone is ineffective in reducing plasma cholesterol, a paper from Denmark shows the opposite. Over 1 year, the plasma cholesterol level of 159 patients with hyperlipaemia was reduced by 14 % after individual advice was given, by dietitians and doctors, in order to reduce dietary fat to 30 % energy intake (Træden et al. 1998).

Another major contribution of *Public Health Nutrition* will be in methodological issues. About one-third of contributions dealt with this important topic. A study of the utility of supermarket sales data to estimate consumption of certain foods showed more stability when items were considered on a proportional rather than absolute basis (Närhinen *et al.* 1998). Databases of household budget and individual surveys were used to predict the extent to which percentages of households can be used to predict the percentage of foods consumed by individuals within and between countries (Lambe *et al.* 1998). Other methodological issues covered include under-reporting (Gnardellis *et al.* 1998), the use of biomarkers to assess the validity of individual methods of assessing diet (Johansson *et al.* 1998),

development of food-frequency questionnaires (Hebert *et al.* 1998), and the validation of methods for assessing energy expenditure (Rennie & Wareham, 1998). Importantly, two papers by Nelson & Haraldsdóttir (1998*a*,*b*) document practical guidelines for the use of photographs used to assess food portion sizes in dietary surveys.

Overall, *Public Health Nutrition* has demonstrated that it does fulfil its intention of spanning the breadth of the subject. The editors are to be congratulated on the wide variety of topics covered, and the high standard and time-liness of various contributions. The journal deserves a healthy circulation with long-term continuation and dominance in public health citation indices in the near future.

Sheila Bingham MRC Dunn Human Nutrition Unit Hills Road Cambridge CB2 2DH United Kingdom

References

- Ahmed F, Zareen M, Khan MR, Banu CP, Haq MN & Jackson AA (1998) Dietary pattern, nutient intake and growth of adolescent school girls in urban Bangladesh. *Public Health Nutrition* 1, 83–92.
- Aro A, Pietinen P, Valsta LM, Turpeinen AM, Ehnholm C, Dougherty RM & Iacono JM (1998) Effects of reduced-fat diets with different fatty acid compositions on serum lipoprotein lipids and apolipoproteins. *Public Health Nutrition* 1, 109–116.
- Barr F, Brabin L, Agbaje S, Buseri F, Ikimalo J & Briggs N (1998) Reducing iron deficiency anaemia due to heavy menstrual blood loss in Nigerian rural adolescents. *Public Health Nutrition* 1, 249–257.
- Cox DN, Anderson AS, Lean MEJ & Mela DJ (1998) UK consumer attitudes, beliefs and barriers to increasing fruit and vegetable consumption. *Public Health Nutrition* **1**, 61–68.
- Darnton-Hill I & Coyne ET (1998) Feast and famine: socioeconomic disparities in global nutrition and health. *Public Health Nutrition* **1**, 23–31.
- Gnardellis C, Boulou C & Trichopoulou A (1998) Magnitude, determinants and impact of under-reporting of energy intake in a cohort study in Greece. *Public Health Nutrition* **1**, 131–137.
- Hebert JR, Gupta PC, Bhonsle RB, Murti PR, Mehta H, Verghese F, Aghi M, Krishnaswamy K & Mehta FS (1998) Development and testing of a quantitative food frequency questionnaire for use in Kerala, India. *Public Health Nutrition* 1, 123–130.
- Johansson G, Åkesson A, Berglund M, Nermell B & Vahter M (1998) Validation with biological markers for food intake of a dietary assessment method used by Swedish women with three different dietary preferences. *Public Health Nutrition* **1**, 199–206.
- Key TJ, Fraser GE, Thorogood M, Appleby PN, Beral V, Reeves G, Burr ML, Chang-Claude J, Frentzel-Beyme R, Kuzma JW, Mann J & McPherson K (1998) Mortality in vegetarians and non-vegetarians: a collaborative analysis of 8300 deaths among

76 000 men and women in five prospective studies. *Public Health Nutrition* **1**, 33–41.

- Landman J, Buttriss J & Margetts B (1998) Curriculum design for professional development in public health nutrition in Britain. *Public Health Nutrition* 1, 69–74.
- Lambe J, Kearney J, Becker W, Hulshof K, Dunne A & Gibney MJ (1998) Predicting percentage of individuals consuming foods from percentage of households purchasing foods to improve the use of household budget surveys in estimating food chemical intakes. *Public Health Nutrition* **1**, 239–247.
- Lawrence M & Rayner M (1998) Functional foods and health claims: a public health policy perspective. *Public Health Nutrition* **1**, 75–82.
- Margetts BM, Thompson RL, Speller V & McVey D (1998) Factors which influence 'healthy' eating patterns: results from the 1993 Health Education Authority health and lifestyle survey in England. *Public Health Nutrition* **1**, 193–198.
- Närhinen M, Nissinen A & Puska P (1998) Sales data of a supermarket a tool for monitoring nutrition interventions. *Public Health Nutrition* **1**, 101–107.
- Nelson M & Haraldsdóttir J (1998*a*) Food photographs: practical guidelines I. Design and analysis of studies to validate portion size estimates. *Public Health Nutrition* **1**, 219–230.
- Nelson M & Haraldsdóttir J (1998b) Food photographs: practical guidelines II. Development and use of photographic atlases for assessing food portion size. *Public Health Nutrition* 1, 231–237.
- Northrop-Clewes CA, Ahmad N, Paracha PI & Thurnham DI (1998) Impact of health service provision on mothers and infants in a rural village in North West Frontier Province, Pakistan. *Public Health Nutrition* **1**, 51–59.
- Popkin BM (1998) The nutrition transition and its health implications in lower-income countries. *Public Health Nutrition* **1**, 5–21.
- Rennie KL & Wareham NJ (1998) The validation of physical activity instruments for measuring energy expenditure: problems and pitfalls. *Public Health Nutrition* **1**, 265–271.
- Rolland S & Truswell AS (1998) Wernicke–Korsakoff syndrome in Sydney hospitals after 6 years of thiamin enrichment of bread. *Public Health Nutrition* **1**, 117–122.
- Thorand B, Kohlmeier L, Simonsen N, Croghan C & Thamm M (1998) Intake of fruits, vegetables, folic acid and related nutrients and risk of breast cancer in postmenopausal women. *Public Health Nutrition* **1**, 147–156.
- Træden UI, Holm L, Sandström B, Andersen PK & Jarden M (1998) Effectiveness of a dietary intervention strategy in general practice: effects on blood lipids, health and well-being. *Public Health Nutrition* **1**, 273–281.
- Vorster HH, Jerling JC, Steyn K, Badenhorst CJ, Slazus W, Venter CS, Jooste PL & Bourne LT (1998) Plasma fibrinogen of black South Africans: the BRISK study. *Public Health Nutrition* 1, 169–176.
- Walmsley CM, Bates CJ, Prentice A & Cole TJ (1998) Relationship between alcohol and nutrient intakes and blood status indices of older people living in the UK: further analysis of data from the National Diet and Nutrition Survey of people aged 65 years and over, 1994/5. *Public Health Nutrition* **1**, 157– 167.

© Nutrition Society 1999