



Editorial

Welcome to the first issue of 2004, and welcome to four new members to our Editorial Board. These are Roger Hughes of Griffith University, Australia, and three who strengthen our presence in the Americas: Carlos Monteiro of the University of São Paulo, Marion Nestle of New York University and Ricardo Uauy of the Institute of Nutrition and Food Technology (INTA), Santiago, Chile. Ricardo is also Professor at the London School of Hygiene and Tropical Medicine and, as from 2005, President of the International Union of Nutritional Sciences. We are losing Ruth Patterson from our board and I thank her for her valuable contributions. A lot of unpaid work is needed to produce an academic journal, and without the support of our editorial board we would not be able to produce *Public Health Nutrition*. To our new, and to our continuing Associate Editors, I (and The Nutrition Society) thank you for your support. Roger Hughes has been appointed as Deputy Editor, with a specific role to help run our special issues.

The evolution of our journal continues. Our primary purpose will not change: to publish the highest quality original research. At the same time, the Editorial Board believes that it is time to broaden our scope, and to become increasingly active in thought, writing and action designed to 'make things better'.

The introduction of 'Out of the Box' has been a real success. Geoffrey Cannon challenges and provokes us, as in this issue with his perception of the increasing commercialisation of nutrition congresses and even what he calls the privatisation of the UN system¹. He makes us think about what we do, and even, as in his last column², who we are and what our purpose is.

In response, I believe that our purpose in our profession and in this journal must be to improve health and well-being, in particular among those with the weakest voice and least power who suffer the most. Most will agree with these sentiments; the challenge is to translate them into real work and meaning, and the best way to do this is often neither clear nor straightforward. Our own challenge is to make *Public Health Nutrition* THE forum to identify what the real problems are, and what the best and most effective solutions are, and to help put these solutions into place and see if the proposed solutions actually work. Views from readers are welcome.

We also propose to explore the deeper underlying and basic issues that go beyond 'research' which affect nutrition and health. To this end we will commission articles, reviews and communications that provoke discussion and debate, and that challenge current assumptions and ways of thinking and approach. During

the coming year we will address the WHO strategy on nutrition, physical activity and health; public-private partnerships in public health nutrition; the impact of economic globalisation on public health nutrition; getting nutrition on the agenda in national priorities; workforce development: who are we training and what for? If readers have any ideas or comments, please get in touch with myself or any of the editors.

Highlights in this issue

*Under- and overreporting of energy intake in Jamaican adults by Mendez et al.*³

This study examines the impact of energy under- and overreporting on diet-obesity relationships in a stratified sample of 25–75-year-old men ($n = 351$) and non-pregnant women ($n = 539$) from Spanish Town, Jamaica. In the present study, underreporting was defined as energy intake $< 1.35 \times \text{BMR}$ (basal metabolic rate) and overreporting as energy $> 2.4 \times \text{BMR}$, with BMR estimated using the Schofield equations. Plausible reporters were defined as those not classified as over- or underreporters. Limitations of the study were that data on physical activity were not available and the response rate was modest (60%), and the authors acknowledge they cannot be sure that responders were not different from non-responders in dietary attitudes.

Nearly 39% of women and 22% of men underreported their intake, whereas 24% of men and 16% of women overreported their intake. One-third of obese men and half of all obese women were underreporters. If these underreporters were excluded it would be unlikely that the included sample would be representative of the entire sample. Underreporting was positively associated with obesity and smoking and found to be more common in older women; underreporters estimated lower energy intakes from potentially socially undesirable food groups (snacks) and estimated higher intakes of 'healthy' foods (such as fruit), than did plausible reporters. Men on special diets (diabetic, low-sodium, weight-loss or -gain, vegetarian) were more likely to overreport their energy intake.

The high prevalence of both under- and overreporting raises concerns as to the best way to assess diet in all populations, but particularly in societies in transition. Taking account of misreporting may be possible, provided the underlying models are appropriate and carefully considered. If relative intakes (ranking) are used to assess risk, rather than absolute intakes, taken together with measures of misreporting they may help reduce bias in

exploring associations between food groups and obesity or related health outcomes. The findings may also have implications for cross-country comparative studies, where the factors affecting misreporting may differ, and may therefore require different adjustment models.

***Energy-dense diets are associated with lower diet costs: a French study by Darmon et al.*⁴**

Increased consumption of energy-dense foods is often linked with the rise in obesity. Recent strategies have suggested increasing taxes on energy-dense foods as a means of controlling consumption. There are, however, few studies that have linked diet composition to diet cost; the study by Darmon *et al.*⁴ provides some welcome data. They studied 837 adults over the age of 18 years, selected in a two-stage cluster sampling design, and estimated the amount consumed and cost of the 57 most commonly consumed food items in the study sample. One hundred and eighty-three of 837 subjects were defined as under-reporters using energy intake to BMR ratios; when analysed separately, the authors reported that inclusion or exclusion of this subset did not affect the strength of any of the correlations reported. Darmon *et al.* found that the more energy-dense refined grains, sweets and fats provided energy at a lower cost than did lean meats, vegetables and fruits, and that diets of lower energy density were more expensive. This was to be expected.

What is new about this analysis is that it is the first to provide evidence for an inverse relationship between dietary energy density and estimated diet cost. The authors acknowledge a number of important limitations: the model was based on retail food prices, not food expenditure data (i.e. the model estimated what each diet cost, rather than what each consumer paid for it); and there was a disparity in time between data collection (1988/89) and food prices (2000). They present data to suggest that these potential problems are not likely to have led to the wrong answer.

The policy implications of these findings are potentially very important. Engel's law says that the proportion of disposable income spent on food increases as income falls. Among low-income households cost and taste are the key determinants of food choice; food cost is therefore a critical barrier to change in low-income groups. Darmon *et al.*'s study supports the observed link between obesity and poverty related to the low cost and palatability of energy-dense foods.

The authors are not sure whether punitive tactics such as levies on energy-dense foods and limits on advertising will be effective in reducing inequalities in obesity and poor diet. They conclude by arguing that there is a need to focus on the economics of food choice, so that responsible nutrition interventions and fiscal policy can be developed.

If policies are developed to make energy-dense food more expensive, it is not clear what impact this will have on energy intake and – just as importantly – on the intakes of nutrient-rich low-density expensive foods such as fruits and vegetables. We urgently need to strengthen the evidence base in this area of work, as increasingly politicians are looking for advice as to the best way forward.

Barrie Margetts
Editor-in-Chief

References

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- 4 Darmon N, BRIEND A, DREWNOWSKI A. Energy-dense diets are associated with lower diet costs: a community study of French adults. *Public Health Nutrition* 2004; 7(1): 21–28.