

The True Purpose Of Nutrition

Robert H. Lustig, MD, MSL

Integrated and Personalized Medicine Congress, July 1, 2023



Blueprint

- Blueprint Starter Guide By The Numbers Step 1: Meal Prep Step 2: Supplements Step 3: Measurements
- Bryan Johnson's Blueprint Current Results Routine Measurement Heart / Brain / Lung Gastrointestinal Hair / Skin / Eye / Ear Oral / Sleep / Other Diet / Supplements Fitness Notable Challenges Appendix Latest Photos FAQ [Archived] Monthly Notes

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Be the next evolution of human

MY RESULTS FROM 2 YRS OF BLUEPRINT:

- + 5.1 yrs epigenetic age reversal (world record)
- + slowed my pace of aging by 24%
- + perfect muscle & fat (MRI)
- + 50+ perfect biomarkers
- + 100+ markers < chronological age
- + fitness tests = 18yr old
- + body runs 3F° cooler







Axioms

- You can't fix healthcare until you fix health
- You can't fix health until you fix diet
- And you can't fix diet until you know what's wrong

Definitions

- Food Science: What happens between the ground and the mouth
- Nutrition: What happens between the mouth and the cell
- Metabolic Health: What happens inside the cell

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- Nutrition: What happens between the mouth and the cell
- Metabolic Health: What happens inside the cell

IT'S ONLY WHAT HAPPENS INSIDE THE CELL THAT LEADS TO DISEASE



Consultative Brief – March 2023

New Frontiers of Nutrition

Evolved science-based insights from global nutrition experts to inform food system/transformation.



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The True Purpose Of Nutrition: METABOLIC HEALTH



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New Frontiers of Nutrition

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The True Purpose Of Nutrition: METABOLIC HEALTH OK, what is that?



The Diseases That Aren't Diseases

Subcellular Pathologies that Belie Aging





The Diseases That Aren't Diseases

Subcellular Pathologies that Belie Aging



• 1. Glycation (carbon deposits)





The Diseases That Aren't Diseases

Subcellular Pathologies that Belie Aging



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- 2. Oxidative Stress (rusting)





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- 3. Mitochondrial Dysfunction (transmission)





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- 3. Mitochondrial Dysfunction (transmission)
- 4. Insulin Resistance (carburetor)





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- 6. Inflammation (rotted fuel lines)





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- 7. Methylation (spark plugs)





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- 6. Inflammation (rotted fuel lines)
- 7. Methylation (spark plugs)
- 8. Autophagy (oil sludge)





The Diseases That Aren't Diseases

Subcellular Pathologies that Belie Aging



- 1. Glycation ---- carbohydrate, fructose, lack of fiber
- 2. Oxidative Stress ---- glucose, fructose, trans-fats
- 3. Mitochondrial Dysfunction --- fructose, omega-6's, trans-fats, lack of micronutrients
- 4. Insulin Resistance --- fructose, branched chain amino acids
- 5. Membrane Integrity --- lack of omega-3's
- 6. Inflammation ---- carbohydrate/gluten (in some), omega-6s, fructose, lack of fiber
- 7. Methylation --- lack of folic acid, B₆, B₁₂
- 8. Autophagy --- frequent feeding, lack of fiber

None of these are "druggable" But they are all "foodable"



The Diseases That Aren't Diseases

Subcellular Pathologies that Belie Aging



- 1. Glycation ---- NOT amenable to exercise
- 2. Oxidative Stress ---- NOT amenable to exercise
- 3. Mitochondrial Dysfunction
- 4. Insulin Resistance
- 5. Membrane Integrity ---- NOT amenable to exercise
- 6. Inflammation
- 7. Methylation ---- NOT amenable to exercise
- 8. Autophagy

"You can't outrun a bad diet"

The goal: Metabolic Health

The Strategies:

- Promote Metabolism
- Inhibit Inflammation

Fructose inhibits mitochondrial functioning

- 1. AMP Kinase turns on mitochondria
- 2. Acyl CoA Dehydrogenase Long-Chain (ACADL) burns fat
- 3. Carnitine Palmitoyl Transferase-1 shuttles fat into mitochondria



"The most important takeaway of this study is that high fructose in the diet is bad," says Dr. Kahn. "It's not bad because it's more calories, but because it has effects on liver metabolism to make it worse at burning fat. As a result, adding fructose to the diet makes the liver store more fat, and this is bad for the liver and bad for whole body metabolism."

C. Ronald Kahn, MD, CEO Joslin Diabetes Center

Softic et al. Cell Metab 30:735, Oct 1, 2019



Systemic Chronic Inflammation

courtesy Dr. Tom O'Bryan





What is the definition of "healthy"?

- Michael Pollan said, "Eat Food. Not Too Much. Mostly Plants."
- Eat food: Some need a low-fat diet, others need a high-fat diet.
- Not too much: Doesn't take into account mitochondrial dysfunction.
- Mostly plants: Coke, Doritos, and Oreos are plant-based.

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- It's what's been done to the food; and really,
- It's what they did to the food that matters.
- And that's not listed on the food label.

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- It's what's been done to the food; and really,
- It's what they did to the food that matters.
- And that's not listed on the food label.
- I suggest a different three principles:



Healthy essential fats Plant based, short chain, polyunsaturated fatty acids Omega 3s: pregnancy, lifespan, childhood, ADHD, depression Brain selective nutrients



The Metabolic Matrix

The Metabolic Matrix: Gut Health

- Digestion, Absorption, Metabolism
- Gut is an organ
- Unprocessed food feeds the gut
- Fiber
- Ultraprocessed food damages the gut
- Microbiome health



If you don't feed your gut, your gut will feed on you



Desai et al. Cell 167:1339, 2016

Higher dietary fiber content correlates with reduction in chronic disease

Soluble + Insoluble Fiber together protects the liver and feeds the gut:

- Acts as a barrier to sugar absorption
- Reduces insulin response
- o Feeds the intestinal microbiome
- Induces the satiety signal sooner
- Colonic bacteria make short chain fatty acids
- Removes cancer cells from colon

Soluble Fiber alone:

Feeds the intestinal microbiome Colonic bacteria make short chain fatty acids

Insoluble Fiber alone:

Induces the satiety signal sooner Removes cancer cells from colon

Reynolds et al. Lancet 393: 434, 2019



Figure 1: Dose-response relationships between total dietary fibre and critical clinical outcomes based on data from prospective studies

(A) Total fibre and all-cause mortality. 68:183 doubts over 11-3 million person-years. Assuming linearity a risk ratio of 0.93 (95% Cl 0.90-0.95) was observed for every 8 g more fibre consumed per day. (B) Total fibre and incidence of coronary heart disease. 64,89 doubts over 2.5 million person-years. Assuming linearity a risk ratio of 0.81 (0.73-0.90) was observed for every 8 g more fibre consumed per day. (C) Total fibre and incidence of type 2 diabetes. 22,450 cases over 3.2 million person-years. Assuming linearity a risk ratio of 0.82 (0.82-0.89) was observed for every 8 g more fibre consumed per day. (C) Total fibre and incidence of type 2 diabetes. 22,450 cases over 3.2 million person-years. Assuming linearity a risk ratio of 0.92 (0.82-0.89) was observed for every 8 g more fibre consumed per day. (D) Total fibre and incidence of torextil cancer. 2000 g cases over 3.0 million person-years. Assuming linearity a risk ratio of 0.92 (0.82-0.89) was observed for every 8 g more fibre consumed per day.

The Metabolic Matrix: Feed the Gut



Fiber is critical

- Supports healthy metabolism & regulates bowel movement through delayed gastric emptying
- Increases satiety
- Helps regulate blood glucose levels
- May help prevent certain cancers
- Lowers LDL (bad cholesterol)
- In Type 2 Diabetics, increasing fiber consumption may reduce fasting glucose and HbA1c

The Metabolic Matrix: Liver Health

- Fat Fraction Maps
- Fructose reduction, metabolism, etc.
- Reduce total sugar, glycemic load
- Fiber
- Appropriate hydration
- Reduce environmental toxins
- Intestinal barrier



PROTECT THE LIVER

The Metabolic Matrix: Protect the Liver MRI Fat Fraction Maps



Fat, Metabolically Healthy Low Liver Fat = 2.6%

Fat, Metabolically III High Liver Fat = 24% Thin, Metabolically III High Liver Fat = 23%

Fructose is metabolized in the liver differently than glucose










Tight junctions keep bad stuff out



Di Ciaula et al. J Clin Med 9:2648 2020

Tight junctions keep bad stuff out

Gluten is a direct immunotoxin of zonulins, both in intestine AND brain- cause of Celiac Disease



Di Ciaula et al. J Clin Med 9:2648 2020

Fructose also disrupts tight junctions, and lets bad stuff in



Cho et al. Hepatology 2019 Apr 8. doi: 10.1002/hep.30652.

Sugar alters Th17 barrier in the intestine



Graphical abstract

Kawano et al., Cell 185, 1, 2022





Article

Dietary Intake of Free Sugars is Associated with Disease Activity and Dyslipidemia in Systemic Lupus Erythematosus Patients

María Correa-Rodríguez ^{1,2}, Gabriela Pocovi-Gerardino ^{1,2,*}, José-Luis Callejas-Rubio ³, Raquel Ríos Fernández ³, María Martín-Amada ⁴, María-Gracia Cruz-Caparros ⁵, Irene Medina-Martínez ¹, Norberto Ortego-Centeno ^{2,3,†} and Blanca Rueda-Medina ^{1,2,†}

. Higher consumption of free sugars in active vs. inactive SLE (8.60% \pm 5.51 vs, 6.36% \pm 4.82; p = 0.020)

2. Association between consumption of free sugars and number of complications of SLE

Correa-Rodriguez et al. Nutrients 12:1094, 2020

Group A Streptococcus grow better with fructose than glucose



GAS responsible for psych disease:

- 1) Sydenham's chorea
- 2) PANDAS OCD tic disorders adult personality dis. mood disorder



Orlovska et al. JAMA Pediatr. 74:740, 2017

Fructose and Cancer/Dementia

CellPress

Cell Metabolism

Perspective "Sweet death": Fructose as a metabolic toxin that targets the gut-liver axis

Mark A. Febbraio^{1,*} and Michael Karin^{2,*} ¹Monash Institute of Pharmaceutical Sciences, Monash University, Parkville, VIC, Australia ²Department of Pharmacology, School of Medicine, University of California, San Diego, San Diego, CA, USA *Correspondence: mark.febbraio@monash.edu (M.A.F.), mkarin@health.ucsd.edu (M.K.) https://doi.org/10.1016/j.cmet.2021.09.004

Febbraio et al. Cell Metab 33:2316, 2021



Review

Fructose and fructose kinase in cancer and other pathologies

<u>Hongfei Jiang</u>^a, <u>Qian Lin</u>^a, <u>Leina Ma</u>^a, <u>Shudi Luo</u>^c, <u>Xiaoming Jiang</u>^c, <u>Jing Fang</u>^a \gtrsim \boxtimes , <u>Zhimin Lu</u>^{b c} $\stackrel{\diamond}{\sim}$ \boxtimes

Jiang et al. J Genet Genom 48:531, 2021



Cerebral Fructose Metabolism as a Potential Mechanism Driving Alzheimer's Disease

Richard J. Johnson¹*, Fernando Gomez-Pinilla², Maria Nagel³, Takahiko Nakagawa⁴, Bernardo Rodriguez-Iturbe⁵, Laura G. Sanchez-Lozada⁵, Dean R. Tolan⁶ and Miguel A. Lanaspa¹

Johnson et al. Front Aging Neurosci 12:560865, 2020

Sugar is the marker for ultra-processed food 56% of the food sold in America is ultra-processed food Accounts for 62% of the sugar in the American diet



Fig 2 | Relative contribution (%) of each food group to consumption of ultra-processed food in diet

Srour et al. BMJ 365:I1451, 2019

The Metabolic Matrix: Brain Health

- What is your brain made of?
- Healthy & essential fats
- Plant based, short chain, polyunsaturated fatty acids
- Balance of omega 3 & 6 in the brain
- Omega 6
- Omega 3s: pregnancy, lifespan, childhood
- ADHD and depression
- Brain selective nutrients



SUPPORT THE BRAIN

What is your brain made of?







Poor psychiatric health is persistently linked to low omega-3

in adults with ADHD (n = 30)	ADHD	ADHD	
	м	SD	
Omega 6			
c18: 2n-6 (LA)	13.95	1.62	
c18: 3n6	0.08	0.03	
c20: 2n6	0.30	0.05	
c20:3n6	1.55	0.36	
c20: 4n6 (AA)	13.71	1.35	
c22: 4n6	3.67	0.53	
c22: 5n6	0.53	0.10	
Total n6	33.87	2.25	
Omega 3			
c18: 3n3 (ALA)	0.19	0.04	
c20: 5n3 (EPA)	0.53	0.18	
c22: 5n3	2.05	0.24	
c22: 6n3 (DHA)	3.80	0.95	
Total n3	6.57	1.22	



People with schizophrenia and depression have a low omega-3 index

Natalie Parletta^{a,} 🛓 S, Dorota Zarnowiecki^{a,} 🛎 , Jihyun Cho^{a,} 🗳 , Amy Wilson^{b,} 🗳 , Nicholas Procter^{c,} 🗳 , Andrea Gordon^{c,} 🗳 , Svetlana Bogomolova^{b,} 🗳 , Kerin O'Dea^{b,} 🗳 , John Strachan^{d,} 🗳 , Matt Ballestrin^{d,} 🗳 , Andrew Champion^{d,} 🗳 , Barbara J Meyer^{a,} 🗳

Comparison of Means		
n-3: <i>M</i> = 5.63, <i>SD</i> = 1.25		
n-6: <i>M</i> = 25.27 <i>, SD</i> = 3.74		
The omega-3 index in Parletta		
et al (2016) study was 3.95% in		
comparison to the omega-3		
index in NORAA participants		
which was: 4.33%		



ADHD and Depression

- Several meta-analyses have confirmed a small-modest effect size for reducing clinical symptoms of ADHD in children (see Hawkey & Niggs 2014, Clin Psychol Rev)
- Hallahan, Davis et al., Br J Psychiatry, 2016 confirmed an effect size of 0.61 (Cohens d) for reducing clinical depression in both cases EPA-rich formulations had the greatest efficacy



The Metabolic Matrix Explains What Nutrition Needs To Do

• The science is clear:

- more soluble and insoluble fiber (to feed the gut)
- less fructose (to protect the liver)
- more α -linolenic acid, EPA, DHA (to support the brain)
- A Low Insulin Diet = A Real Food Diet
- The challenge is going from knowledge to transformation
 - We must "Debunk the Calorie", and promote metabolic health



SHOPPING CART

GETTY IMAGES-KUTAY TANIR

Why Ultra-Processed Foods Are So Bad for You

Recent research finds that highly processed food may pose health risks.

TARA LAW JAN 09, 2023 9:06 AM PST

Is ultraprocessed food "food"?

Is ultraprocessed food "food"?

Food: Substrate that contributes either to the burning or growth of an organism

Burning: Ultraprocessed food inhibits mitochondria



Softic et al. Cell Metab 30:735, 2019

"The most important takeaway of this study is that high fructose in the diet is bad," says Dr. Kahn. "It's not bad because it's more calories, but because it has effects on liver metabolism to make it worse at burning fat. As a result, adding fructose to the diet makes the liver store more fat, and this is bad for the liver and bad for whole body metabolism."

Dr. C. Ronald Kahn, CEO Joslin Diabetes Center

Growth:

Ultraprocessed food inhibits bone growth









Tested parameter	Control	UPF+CSD
Stiffness (N/mm)	393.5 ± 58.9	103.5 ± 40.6 [*]
Yield (N)	57.7 ± 6.4	27.0 ± 4.0 *
Fracture load (N)	94.7 ± 10.5	24.7 ± 4.5*
Max load (N)	110.9 ± 10.1	$37.8 \pm 6.4^{*}$

UPF: Ultraprocessed food CSD: Caloric soft drink



A. Trabecular analysis





Zarestsky et al. Bone Res 9:14, 2021



Contents lists available at ScienceDirect

Clinical Nutrition

journal homepage: http://www.elsevier.com/locate/clnu



Original article

Consumption of <u>ultra-processed foods</u> associated with weight gain and <u>obesity</u> in adults: A multi-national cohort study



Reynalda Cordova ^{a, b}, Nathalie Kliemann ^a, Inge Huybrechts ^a, Fernanda Rauber ^{c, d}, Eszter P. Vamos ^e, Renata Bertazzi Levy ^{c, d}, Karl-Heinz Wagner ^b, Vivian Viallon ^a, Corinne Casagrande ^a, Geneviève Nicolas ^a, Christina C. Dahm ^f, Jie Zhang ^f, Jytte Halkjær ^g, Anne Tjønneland ^{g, h}, Marie-Christine Boutron-Ruault ^{i, j}, Francesca Romana Mancini ^{i, j}, Nasser Laouali ^{i, j}, Verena Katzke ^k, Bernard Srour ^k, Franziska Jannasch ^{1, m, n}, Matthias B. Schulze ^{1, o}, Giovanna Masala ^p, Sara Grioni ^q, Salvatore Panico ^r, Yvonne T. van der Schouw ^s, Jeroen W.G. Derksen ^s, Charlotta Rylander ^t, Guri Skeie ^t, Paula Jakszyn ^{u, v}, Miguel Rodriguez-Barranco ^{w, x, y}, José María Huerta ^{z, aa}, Aurelio Barricarte ^{y, ab, ac}, Lousie Brunkwall ^{ad}, Stina Ramne ^{ad}, Stina Bodén ^{ae}, Aurora Perez-Cornago ^{af}, Alicia K. Heath ^e, Paolo Vineis ^e, Elisabete Weiderpass ^a, Carlos Augusto Monteiro ^{c, d}, Marc J. Gunter ^a, Christopher Millett ^e, Heinz Freisling ^{a, *}





Article Ultra-Processed Food Consumption Associated with Incident Hypertension among Chinese Adults—Results from China Health and Nutrition Survey 1997–2015

Ming Li^{1,*} and Zumin Shi²

Research

JAMA Internal Medicine | Original Investigation

Ultraprocessed Food Consumption and Risk of Type 2 Diabetes Among Participants of the NutriNet-Santé Prospective Cohort

Bernard Srour, PharmD, MPH, PhD; Léopold K. Fezeu, MD, PhD; Emmanuelle Kesse-Guyot, MSc, PhD; Benjamin Allès, PhD; Charlotte Debras, MSc; Nathalie Druesne-Pecollo, PhD; Eloi Chazelas, MSc; Mélanie Deschasaux, MSc, PhD; Serge Hercberg, MD, PhD; Pilar Galan, MD, PhD; Carlos A. Monteiro, MD, PhD; Chantal Julia, MD, MPH, PhD; Mathilde Touvier, PhD, MSc, MPH European Journal of Public Health, Vol. 32, No. 5, 779-785

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Associations of <u>ultra-processed food</u> consumption with <u>cardiovascular disease</u> and all-cause mortality: UK Biobank

Xuanli Chen 💿 , Jiadong Chu, Wei Hu, Na Sun, Qida He, Siyuan Liu, Zhaolong Feng, Tongxing Li, Qiang Han, Yueping Shen

British Journal of Nutrition, page 1 of 9 © Department of Gastroenterology, the First Affiliated Hospital, Zhejiang University School of Medicine, 2022. Published by Cambridge University Press on behalf of The Nutrition Society

Association between <u>ultra-processed foods</u> consumption and risk of <u>non-alcoholic fatty liver disease</u>: a population-based analysis of NHANES 2011–2018

Zhening Liu, Hangkai Huang, Yan Zeng, Yishu Chen and Chengfu Xu* Department of Gastroenterology, The First Affiliated Hospital, Zhejiang University School of Medicine, 79 Qingchun Road, Hangzhou 310003, People's Republic of China

RESEARCH

Open Access

<u>Ultra-processed food</u> consumption and <u>metabolic syndrome</u>: a cross-sectional study in Quilombola communities of Alagoas, Brazil

Lídia Bezerra Barbosa^{1,2}, Nancy Borges Rodrigues Vasconcelos¹, Ewerton Amorim dos Santos³, Tamara Rodrigues dos Santos¹, Thays Ataide-Silva² and Haroldo da Silva Ferreira^{2*}



Manuscript Doi: 10.1093/ecco-jcc/jjac167

Intake of ultra-processed foods is associated with an increased risk of Crohn's disease: a cross-sectional and prospective analysis of 187,154 participants in the UK Biobank

Jie Chen, ^{a, b*} Judith Wellens, ^{c, d*} Rahul Kalla, ^e Tian Fu,^b Minzi Deng, ^b Han Zhang,^a Shuai Yuan,^f Xiaoyan Wang, ^{b, #} Evropi Theodoratou,^{g,h,†} Xue Li,^{a,#} Jack Satsangi,^{c,†}

Consumption of <u>ultra-processed foods</u> and <u>cancer</u> risk: results from NutriNet-Santé prospective cohort

Thibault Fiolet,¹ Bernard Srour,¹ Laury Sellem,¹ Emmanuelle Kesse-Guyot,¹ Benjamin Allès,¹ Caroline Méjean,² Mélanie Deschasaux,¹ Philippine Fassier,¹ Paule Latino-Martel,¹ Marie Beslay,¹ Serge Hercberg,^{1,4} Céline Lavalette,¹ Carlos A Monteiro,³ Chantal Julia,^{1,4} Mathilde Touvier¹





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^E September 06, 2022; 99 (10) **RESEARCH ARTICLES**

Association of <u>Ultraprocessed Food</u> Consumption With Risk of <u>Dementia</u> A Prospective Cohort Study

Huiping Li, Shu Li, Hongxi Yang, Yuan Zhang, Shunming Zhang, Yue Ma, Yabing Hou, Xinyu Zhang, Kaijun Niu, Yan Borné, Yaogang Wang First published July 27, 2022, DOI: https://doi.org/10.1212/WNL.000000000200871

American Journal of Preventive Medicine

GLOBAL HEALTH PROMOTION AND PREVENTION

Premature Deaths Attributable to the Consumption of Ultraprocessed Foods in Brazil

Eduardo A.F. Nilson, ScD,^{1,2} Gerson Ferrari, PhD,³ Maria Laura C. Louzada, PhD,⁴ Renata B. Levy, PhD,⁵ Carlos A. Monteiro, PhD,¹ Leandro F.M. Rezende, ScD⁶



NOVA I


NOVA I



NOVA II





NOVA II

NOVA III

NOVA I





NOVA I

NOVA III



NOVA III





NOVA II





NOVA IV

Only NOVA IV correlates with chronic disease 57% of US consumption 73% of US food supply



Nutrition

'Ultra-processed' products now half of all UK family food purchases

Exclusive: health experts warn increasing popularity of industriallymade food will lead to negative effects such as obesity and poor health



▲ Some of the UK's best-selling ultra-processed foods. Photograph: Jill Mead for the Guardian

Sarah Boseley Health editor

health	line	Health Condi	tions 🗸 🛛 🛛	Discover 🗸	Plan ~	Connect	~
NUTRITION	Special Diets	Healthy Eating	Food Freedom	Conditions	Feel Good Food	Products	Vita

Americans Are Eating More Ultra-Processed Foods: How to Cut Down on Them



Fast food such as hamburgers are among the ultra-processed foods that people are eating more often. Evrim Ertik/Getty Images

57% of US consumption 73% of the US food supply

Processed food and its role in nutritious and sustainable diets



VIEWPOINT

🕲 wbcsd

Robert H. Lustig, MD, MSL Department of Padiatrics, University of California, San Francisco; and Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco.

Corresponding Author: Robert H. Lustig, MD, MSL, Division of Pediatric Endocrinology, University of California, San Francisco, 550 16th St, PO Box 0434, San Francisco, CA 94143 (rlustia@ucsf.edu). Those of us who have participated in science know that 9 of every 10 experiments are failures. Now imagine that the last 50 years has been a grand clinical research experiment, with the American population as unwitting participants, conducted by 10 principal investigators—Coca-Cola, Pepsico, Kraft, Unilever, General Mills, Nestlé, Mars, Kellogg, Proctor & Gamble, and Johnson & Johnson. In 1965, these corporations posed the hypothesis that processed food is better than real food. To determine if the experiment was a success or a failure, we have to examine the outcome variables. In this case, there are 4: food consumption, health/disease, environment, and cash flow, divided into companies, consumers, and society.

Processed Food-An Experiment That Failed

Processed food is defined by 7 food engineering criteria; it is mass produced, is consistent batch to batch, is consistent country to country, uses specialized ingredients from specialized companies, consists of prefrozen macronutrients, stays emulsified, and has long shelf life or freezer life.¹

JAMA Pediatrics March 2017 Volume 171, Number 3

Furthermore, 11 nutritional properties distinguish processed food.² (1) Too little fiber. When fiber (soluble and insoluble) is consumed within food, it forms a gelatinous barrier along the intestinal wall. This delays the intestine's ability to absorb nutrients, instead feeding the gut microbiome. Attenuation of the glucose rise results in insulin reduction. Attenuation of fructose absorption reduces liver fat accumulation. (2) and (3) Too few ω-3 and too many ω-6 fatty acids. ω-3s are precursors to docahexaenoic and eicosapentanoic acids (anti-inflammatory). Conversely, ω-6s are precursors of arachidonic acid (proinflammatory). Our ratio of ω -6 to ω -3 fatty acids should be approximately 1:1. Currently, our ratio is about 25:1, favoring a proinflammatory state, which can drive oxidative stress and cell damage. (4) Too few micronutrients. Antioxidants, such as vitamins C and E, quench oxygen radicals in peroxisomes to prevent cellular damage, while others, such as carotenoids and a-lipoic acid, prevent lipid peroxidation. (5) Too many

jamapediatrics.com

Impact: Walnut Creek Spotlight - 3rd Silver Level District



Eat Real Featured Meal

Housemade Baked Ziti

Served with 100% whole grain pasta & freshly prepared marinara sauce

Plain milk is nutrient rich and contains no added sugar.

Why this matters Excess sugar negatively impacts your ability to learn.

Marinara sauce is made from scratch using minimally processed ingredients.

Why this matters? This sauce is filled with nutritious whole food ingredients & does not contain any added sugar or other harmful additives found in pre-made sauces.

Served with 100% whole grain pasta.

Why this matters?

Whole grain pasta contains fiber to support healthy digestion & is packed with micro nutrients to grow a healthy body.



CHILD NUTRITION SERVICES

Seasonal strawberries and kiwis are sourced locally from **Watsonville** and Gridley respectively.

Why this matters? Local sourcing of produce helps support businesses in our community and the planet's health.

The **salad bar** is stocked with a variety of fresh, local vegetables, including carrots from **Bakersfield** and romaine for Caesar salad from **Salinas**.

Why this matters Salad bars with fresh, local produce provide the opportunity to try a variety of fruits & vegetable

This meal showcases the values of our Eat Real Certification! Learn more at www.eatreal.org/walnut-creek-is-certified.



WCSD Eat Real Certification Highlights

- ★ 66% of produce is sourced locally (34% increase from 2019)
- ★ Removed an average of 7 lbs of added sugar per student per year from breakfast grains alone
- Nothing on menu contains more than 3 tsp of added sugar
- Increased plant-based menu options
 - From 0 to 5 at K-5 and K-8 sites
 - From 1 to 7 at 6-8 sites

Saw lunch participation increase by **73%** and breakfast by **2400%** from 2019 to 2023







Prospects for the true cost accounting of food systems

Evaluating food systems in a holistic way is paramount to their transformation. Recent initiatives show how true cost accounting can help achieve that transformation at policy, product, organizational, farm, and investment levels.

(I) Chack for updates

comment

Lauren Baker, Guillermo Castilleja, Adrian De Groot Ruiz and Adele Jones

Ultraprocessed foods are only "cheap" when the costs of their negative metabolic impact are externalized to health care and public health budgets.



Scientific Group of UN Food Systems Summit 2021

What Good Nutrition Needs To Do to Improve Metabolic Health

• The science is clear:

- more soluble and insoluble fiber (to feed the gut)
- more α -linolenic acid, EPA, DHA, micronutrients (to support the brain)
- less sugar (to protect the liver)
- A Real Food Diet
- Can the food industry re-engineer its current practices?

Cell Metabolism



Forum Eliminate or reformulate ultra-processed foods? Biological mechanisms matter

Deirdre K. Tobias^{1,2} and Kevin D. Hall^{3,*}

¹Division of Preventive Medicine, Department of Medicine, Brigham and Women's Hospital and Harvard Medical School, Boston, MA, USA ²Nutrition Department, Harvard T.H. Chan School of Public Health, Boston, MA, USA ³Laboratory of Biological Modeling, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, USA *Correspondence: kevinh@niddk.nih.gov https://doi.org/10.1016/j.cmet.2021.10.005

Increased ultra-processed foods (UPFs) in the food sup^{10/18/21, 1:30 PM} lence and related chronic diseases. To address this publ elimination of UPF categories will require improved un UPFs lead to overconsumption and poor health. 'Intake of added and free sugars should be as low as possible': EFSA confirms sugar consumption a risk factor in chronic diseases



'Intake of added and free sugars should be as low as possible': EFSA confirms sugar consumption a risk factor in chronic diseases

By Katy Askew C 22-Jul-2021 - Last updated on 22-Jul-2021 at 15:46GMT

Can technology help, and turn a profit?

• Ingredients

- Primary low or no calorie sugars/sweeteners
- Secondary non sugar / sweetener ingredients
- Healthy Fats (functional and supplemental)
- Dairy-based ingredients
- Processing
- Filtering out sugar
- · Enzymes that eat glucose and fructose
- Fiber products
- · Caramelizing or other processing techniques
- Optimizing lactose/fat/protein content
- Fruit flavored beverages with no calories

• Packaging

• Juice in functional "shots," supplemented with vitamins, minerals, and fiber

Data Science

- Recommendation engine
- Procurement and distribution model

TYPE Methods PUBLISHED 30 March 2023 DOI 10.3389/fnut.2023.1098453

Check for updates

OPEN ACCESS

EDITED BY Dominic Agyei, University of Otago, New Zealand

REVIEWED BY Sergio Perez-Burillo, Public University of Navarre, Spain Andrew Bremer, National Institutes of Health.

The Metabolic Matrix: Re-engineering ultraprocessed foods to feed the gut, protect the liver, and support the brain

Timothy S. Harlan^{1*}, Rachel V. Gow², Andreas Kornstädt³, P. Wolfram Alderson⁴ and <u>Robert H. Lustig⁵</u>

- Sugar reduction
- Non-nutritive sweeteners
- Fats
- Fiber
- Dairy-based ingredients
- Processing
- Packaging
- Food data science

WORLD ECONOMIC FORUM Health Meets Food through a Metabolic Matrix

An Actionable Idea by a Member of the World Economic Forum's Regional Action Group for the Middle East and North Africa

Call to action

This Actionable Idea is a call to action, contributing to:

Action 1: Principles of Stakeholder Capitalism for the Middle East and North Africa

Principle 5: Mitigating global health risks

Principle 5: Milgating global nearin rasks Governments and the private sector are called upon to cooperate on a regional level in order to mitigate the impact of global health risks affecting their populations, as well as guest workers, and collaborate in such areas as research and development, digital health, and vaccine development and distribution.

Action 2: UN Sustainable Development Goals



UN SDG12: Ensure sustainable consumption and production patterns

A new paradigm: health meets food

"Metaboic health" — the primary marker and outcome of nutritional security – needs to be re-conceptualized as a fundamental organizing principle to drive food system change. To achieve this outcome, the Kuwatil Danish Dainy (MDD) company, currently working with an independent, evidence-based food re-engineering team, seeks the support of stakeholders from the Regional Action Group for the Model East and North Arica to champion

The key to understanding chronic disease is that there are not four separate problems – nutrition, metabolism, inflammation, immunity; there's only one, but they are all relate.

Robert H. Lustig, Professor Emeritus of Pediatrics, Division of Endocrinology, University of California, San Francisco (UCSF), USA

What is "food re-engineering"?

Food re-engineering is the scientific approach to creating foods with metabolically supportive ingredients and processes. The science behind such an approach looks beyond the product to health outcomes, cratiting functional foods that are designed to protect our health, economy and the environment. Linking good food, metabolism and health reduces or eliminates preventable diet-related diseases and the burdensome financial burdens they toster.



this prototype and bring it to the United Nations Food System: Summit and other international fora as an example of how a

metabolic paradigm shift is not only possible, but necessary.

developed by KDD proposes a scalable and replicable prototype

for fundamentally shifting the basis for making commercial food

and beverage products, built upon a new and safe paradigm of food processing that promotes metabolic health.

To work towards this outcome, the metabolic matrix

Macronutrients	Vitamins	Micronutrients	Heavy metals	Other
Omega-3 polyunsaturated fatty acids	Vitamin A (Retinol)	Choline	Lead	Anthocyanins
Saturated Fats	Vitamin A (Beta Carotene)	Sodium	Arsenic	Polyphenols
Omega-6 polyunsaturated fatty acids	Vitamin D	Copper	Cadium	Flavonoids
Transfats	Vitamin E (Tocopherol Profile)	Magnesium	Mercury	Glyphosate
Total protein	Vitamin C (Ascorbic Acid)	Maganese		Colony Forming Units (CFUs)
Amino acid profile	Vitamin B1 (Thiamine)	Iodine		Juice Authenticity
Sugar profile	Vitamin B2 (Riboflavin)	Iron		
Fiber profile	Niacin	Phosphorus		
	Vitamin B5 (Pantothenic Acid)	Potassium		
	Vitamin B6 (Pyridoxine)	Selenium		
	Vitamin B12	Zinc		
	Total folate	Calcium		

TABLE 3 Product and Ingredient Testing (Eurofins).

New Products on the Shelves in Kuwait

В

Nutrition Fa	acts
servings per container Serving size	(106g
Amount per serving Calories	80
% Da	aily Value
Total Fat 2g	39
Saturated Fat 1.5g	89
Trans Fat 0g	
Cholesterol 5mg	29
Sodium 75mg	39
Total Carbohydrate 12g	49
Dietary Fiber 1g	49
Total Sugars 11g	
Includes 7g Added Sugars	14%
Protein 3g	
Vitamin D 2.2mcg	109
Calcium 110mg	8
Iron 0.3mg	29
Potassium 190mg	40

Servings per container	(106a)
oon ning oleo	(1009)
Amount per serving	
Calories	50
%	Daily Value
Total Fat 2g	3%
Saturated Fat 1.5g	8%
Trans Fat 0g	
Cholesterol 5mg	2%
Sodium 75mg	3%
Total Carbohydrate 13g	5%
Dietary Fiber 1g	4%
Total Sugars 4g	
Includes 0g Added Sugar	rs 0%†
Sugar Alcohol 8g	
Protein 3g	
Vitamin D 0mcg	0%
Calcium 110mg	8%
Iron 0.3mg	2%
Potassium 190mg	4%

re-engineered

servings per container	
Serving size	(100g)
Amount per serving	
Calories	200
% C	Daily Value
Total Fat 10g	13%
Saturated Fat 9g	45%
Trans Fat 0g	
Cholesterol 5mg	2%
Sodium 40mg	2%
Total Carbohydrate 24g	9%
Dietary Fiber 0g	0%
Total Sugars 21g	
Includes 16g Added Sugar	s 32%†
Protein 3g	
Vitamin D 0mcg	0%
Calcium 90mg	6%
Iron 0.7mg	4%
Potassium 290mg	6%

original

Nutrition	Facts
servings per container Serving size	(100g)
Amount per serving Calories	140
	% Daily Value*
Total Fat 10g	13%
Saturated Fat 7g	35%
Trans Fat 0g	
Cholesterol 20mg	7%
Sodium 45mg	2%
Total Carbohydrate 22g	8%
Dietary Fiber 0g	0%
Total Sugars 6g	
Includes 0g Added Sug	ars 0%†
Sugar Alcohol 7g	
Protein 4g	
Vitamin D 0mcg	0%
Calcium 100mg	8%
Iron 0.7mg	4%
Potassium 310mg	6%

re-engineered

WATER, COW'S SKIMMED MILK POWDER, SUCROSE, ALKALIZED COCOA POWDER, MILK FAT, EMULSIFIER AND STABILIZER (MONO- AND DIGLYCERIDES OF FATTY ACIDS E471, CARRAGEENAN E407, GUAR GUM E412), SODIUM CHLORIDE, VANILLA FLAVORING ((53%) PROPYLENE GLYCOL E1520, (27.4%) WATER, (8.9%) SUCROSE, (3%) GLYCERINE E422, (1%) INVERT SUGAR, FLAVORING SUBSTANCES, FLAVORING PREPARATIONS), VITAMIN A (VITAMIN A ACETATE), VITAMIN D3 (CHOLECALCIFEROL)

WATER, COW'S SKIMMED MILK POWDER, ERYTHRITOL, ALKALIZED COCOA POWDER, MILK FAT, STABILIZER (ACACIA GUM E414, GELLAN GUM E418), SODIUM CHLORIDE, VANILLA FLAVORING ((53%) PROPYLENE GLYCOL E1520, (27.4%) WATER, (8.9%) SUCROSE, (3%) GLYCERINE E422, (1%) INVERT SUGAR, FLAVORING SUBSTANCES, FLAVORING PREPARATIONS), SWEETENER (STEVIA)

WATER, SUCROSE, FULLY HYDROGENATED COCONUT OIL, WATER, MILK FAT, COW'S SKIMMED MILK POWDER, COW'S SKIMMED MILK POWDER, ALKALIZED COCOA POWDER, SWEET WHEY POWDER (FROM COW'S MILK), MILK FAT, STABILIZER (VEGETABLE MONO- AND DIGLYCERIDES OF FATTY ACIDS E 471, LOCUST BEAN GUM MODIFIED WAXY MAIZE FOOD STARCH (E1412), STABILIZER E410, GUAR GUM E412)

ERYTHRITOL, STABILIZER (POLYDEXTROSE E1200), ALKALIZED COCOA POWDER, SWEET WHEY POWDER (FROM COW'S MILK), MONK FRUIT JUICE CONCENTRATE, (VEGETABLE MONO- AND DIGLYCERIDES OF FATTY ACIDS E 471, LOCUST BEAN GUM E410, GUAR GUM E412), SWEETENER (STEVIA)

FIGURE 1

XXX

Strategies for Advancing Metabolic Health

Public Health Intervention (one population at a time)

Personal Intervention (one patient at a time)

Technological Innovation (one company at a time)