

The table shows that Spain had the best average life expectancy over the 35 years, and Australia now has a longer life expectancy than any Mediterranean country. The countries that started with long life expectancies have seen a lengthening of about 12% in 35 years; while countries with lower life expectancies have had much bigger gains, around 40% in the period.

It could be argued that these numbers are greatly affected by mortality in children, so we compared health-adjusted life expectancy at 60 years of age in 2002. The respective years for men and women were Japan 19.6, France 18.4, Australia 18.2, Spain 18.15, Italy 17.9 and Greece 17.05. These have changed since the early 1960s, when Australia's life expectancy at 60 years (males and females combined) was 17.19 compared with 17.96 in Italy, 17.74 in Greece, 17.60 in France and 17.88 in Israel.

An idealised 1960s Greek–Italian diet pattern is only one model healthy diet. The Japanese have the longest life expectancy in the world and there are other countries, like Australia, which have improved their relative position.

Ann Noah and A Stewart Truswell\*  
Human Nutrition Unit  
University of Sydney  
Sydney, NSW 2006, Australia  
\*Email: S.Truswell@mmb.usyd.edu.au

DOI: 10.1079/PHN2006961

## References

- 1 Garcia-Closas R, Berunguer A, González CA. Changes in food supplies in Mediterranean countries from 1961 to 2001. *Public Health Nutrition* 2006; **9**(1): 53–60.
- 2 Ferro-Luzzi A, Sette S. The Mediterranean diet: an attempt to define its present and past composition. *European Journal of Clinical Nutrition* 1989; **43**(Suppl. 2): 13–29.
- 3 Fidanza F. The Mediterranean Italian diet: keys to contemporary thinking. *Proceedings of the Nutrition Society* 1991; **50**(3): 519–26.
- 4 Willett WC, Sacks F, Trichopoulou A, Drescher G, Ferro-Luzzi A, Helsing E, *et al.* Mediterranean diet pyramid: a cultural model for healthy eating. *American Journal of Clinical Nutrition* 1995; **61**(Suppl. 6): 1402S–6S.

Sir,

Although Geoffrey Cannon, in his column in this April's issue of *Public Health Nutrition*<sup>1</sup>, recognises the difference between the 'old' NCHS reference as 'descriptive' and the new WHO reference as 'proscriptive', he seems not to appreciate the profound contribution that the NCHS reference made to our knowledge of children's growth throughout the world. I well remember, in the discussions leading to our paper in the *Bulletin of the World Health Organization*<sup>2</sup> and from that to the WHO worldwide surveys, that we too were aware of the shortcomings of the NCHS data. Nevertheless, we decided to adopt the NCHS

as a reference, rather than as a standard to be aimed at, for purely practical reasons: it was statistically the best worked-out set of data available, which enabled systematic comparisons to be made worldwide. The excellent datasets of van Wieringen in The Netherlands showed little difference from the NCHS. It was probably inevitable, although not intended, that this reference would be used to assess the growth of individual children. Nevertheless, I submit that a deviation of more than 2SD below the mean is a useful, although not cast-iron, indicator of unsatisfactory growth.

The new reference, which I have not yet seen, certainly has a better claim to be a normative standard, but it remains to be seen whether it makes much difference to comparisons between populations or to the ages at which wasting and stunting have their highest prevalences. The old questions remain: whether there are ethnic/genetic differences in child growth; whether a cut-off point at a particular Z-score is a useful statistic, since some argue that the mean and the SD give a better picture of the whole distribution, etc. I believe that although we are moving on, we should not forget the important contribution that was made by the US National Center for Health Statistics.

Professor John Waterlow  
15 Hillgate Street, London W8 7SP, UK

DOI: 10.1079/PHN2006962

## References

- 1 Cannon G. The 'is' and the 'ought', and other stories [Out of the Box]. *Public Health Nutrition* 2006; **9**(2): 174–7.
- 2 Waterlow JC, Buzina R, Keller W, Lane JM, Nichaman MZ, Tanner JM. The presentation and use of height and weight data for comparing the nutritional status of groups of children under the age of 10 years. *Bulletin of the World Health Organization* 1977; **55**(4): 489–98.

## How far should nutrition reach?

Sir,

I fully support *The New Nutrition Science project* described in the September 2005 issue of *Public Health Nutrition*. In the hope of strengthening it, I would like to offer three observations.

First, regarding the status of nutrition science itself, the project emphasises that nutrition science has changed largely because the world has changed. However, it is has also changed partly by becoming weaker. It has lost traction in UN and other agencies, at national as well as global levels, with funding shrinking and some nutrition programmes shutting down. One reason is that nutritionists sometimes work on obscure technical questions while people go hungry just outside their laboratory

doors. This ignoring of the real world has resulted in part from patterns of funding, but that is an explanation, not a justification. Nutritionists can make choices and they can make demands.

Apart from this negative skew caused in part by research funding patterns, some positive changes have resulted from the evolving larger vision for nutritionists and other scientists. Not long ago, many – perhaps most – scientists took the view that policy was beyond their ken. Indeed, many still feel that their mission is to find ‘the truth’ in some narrow technical sense, and it is up to ‘the politicians’ to use these scientific truths to advance the human condition. Fortunately, nutritionists now are more inclined to engage in policy discourse. This enlarged understanding of the nutrition profession, to be accelerated by *The New Nutrition Science project*, certainly is welcome.

Second, how far should nutritionists reach? Many would reject the project’s claim that ‘The purpose of nutrition science is to contribute to a world in which present and future generations fulfil their human potential, live in the best of health, and develop, sustain and enjoy an increasingly diverse human, living and physical environment’<sup>1</sup>. They would say that much of the work needed to accomplish those goals goes well beyond nutritionists’ competence as scientists.

The new nutritionists would say the remedy is to expand their competence, enlarging the scope of their work to cover not only biology but also environmental and social sciences. Of course, this approach should be tempered with humility about the profession’s current capabilities.

Cannon and Leitzmann note that a striking feature of recent moves towards integration of the nutrition-related sciences is that they have been based on collaborations<sup>2</sup>. The new nutrition science should take that observation to heart. The new outreach should be not only about making claims on new territory, but also about working out partnerships with established experts in other fields, based on acknowledgment of and respect for their special areas of competence. This can be done systematically. Nutritionists can improve their ways of partnering with others, rather than doing the work of others, by cultivating the skills of collaboration.

Third, *The New Nutrition Science project* should be based on clear recognition of political and economic realities in the world today. Cannon and Leitzmann support McMichael’s view that ‘The genetic modification of food species ... should be a co-operative public–private partnership, with agreed environmental, social and public health objectives. Priority should be given to nutritional needs in food-insecure populations’ (p. 683). If we replace ‘genetic modification of food species’ with ‘food production’ we immediately see the political naïveté of such a position. Nutritionists may be able to identify the best way to feed people in terms of biology, environment and society, but that does not mean it is going to happen.

One clear example is the persistent promotion of breast-milk substitutes such as infant formula despite the fact that it is consistently found that infant formula produces worse health outcomes for infants than breast-feeding. Ignoring this robust scientific finding, the US government continues to distribute half the infant formula used in the country at no cost, through its Special Supplemental Nutrition Program for Women, Infants, and Children<sup>3</sup>. Cannon and Leitzmann tell us ‘nutrition science will be able effectively to address the relevant challenges and opportunities of the twenty-first century only as an integrated biological, social and environmental science’ (p. 677). This suggestion – that major global challenges can be solved with better, broader nutritional science – overreaches.

The idea that larger truths will show us the way appears to be based on an implicit assumption that we all want to solve nutrition and related problems. The fact is that there are some groups, such as employers of wage labour, that benefit from the threat of hunger. As a practitioner of the art of political ‘science’, I appreciate that many major social problems are about power, and no scientific knowledge will override that power. The secret to ending malnutrition in the world will not be found in some arcane bit of scientific knowledge.

Much as Cannon and Leitzmann recognise that ‘biology is not enough’ (p. 681), we need to appreciate that even much larger truths – environmental and social, as well as biological – are not enough.

The persistence of hunger in the world is not due to a lack of scientific knowledge. It is due mainly to the fact that the people who have the power are not the ones who have the problem. Bad government policy in relation to nutrition is not simply the result of error or ignorance. It is due to distinct social, economic and political forces that serve other priorities.

*The New Nutrition Science project* should appreciate that finding the truth is good, but there is much more to be done than that.

Professor George Kent  
Department of Political Science  
University of Hawai’i  
Honolulu, HI 96822, USA  
Email: kent@hawaii.edu

DOI: 10.1079/PHN2006964

## References

- 1 The Giessen Declaration, *Public Health Nutrition* 2005; **8**(6A): 783–6.
- 2 Cannon G, Leitzmann C. The new nutrition science project. *Public Health Nutrition* 2005; **8**(6A): 673–89.
- 3 Kent G. WIC’s promotion of infant formula in the United States. *International Breastfeeding Journal* 2006; **1**: 8. Available at <http://www.internationalbreastfeedingjournal.com/content/1/1/8>.