The Evolution of the
BANT Wellbeing Guidelines

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1 Introduction

A growing body of scientific evidence supports the fact that nutrients and other food components influence the function of the body, protect against disease, restore health, and determine people’s response to changes in the environment. Actions by key global stakeholders brought these facts into the spotlight in 2014, as elaborated below.

In March 2014 the World Health Organisation (WHO) issued a revision of its 2002 sugar intake guidelines and strongly recommended that in order to accrue the most health benefits, sugars should be less than 10% of total energy intake per day. A recommendation to reduce sugars to below 5% of total energy intake per day was also introduced as a means to provide additional benefits. On 17th July 2015, the Scientific Advisory Committee on Nutrition adopted the World Health Organisation’s guidelines and published a document 1 entitled “Why 5%? An explanation of SACN’s recommendations about sugars and health” which detailed the benefits of the new sugar recommendations. At this point the public health dietary guidelines that the British people had been following for the last 20 years could no longer be relied upon with any degree of confidence as fit for purpose.

Above: The original “Healthy Eating Puzzle” and “Fight the Fat / Beat the Bloat” posters, as released for public consultation in September 2014.

Footnotes.
Please see Resources Section on for links to the full documents.

With no immediate public authority response that these guidelines would be updated anytime soon, BANT took the opportunity to take a critical look at these and the Eatwell Plate, with aim to address 1) any other inadequacies aside from sugar recommendations and 2) the one-size-fits all approach, especially with regard to its applicability to those who are overweight or obese. In particular BANT took a position of making foods, rather than nutrients, as building blocks for guidance and used the dietary models (pyramid and plate) produced by Harvard School of Public Health as its starting point for the development of its Wellbeing Guidelines.

On 3rd September 2014 BANT started a six-week consultation period on its “Healthy Eating Plates”, which were designed as a tool for use with groups and communities. The need for the tool development arose from dissatisfaction with the British government’s 20-year old model of the Balance of Good Health or The Eatwell Plate.

The public consultation received a great deal of attention in social media and a good public response. BANT expert panel collated hundreds of comments on the plates. A wide spectrum of respondents included healthcare professionals as well as members of the general public. All comments were given appropriate consideration and contributed to the further development of BANT “Wellness Solution” and “Fight The Fat, Beat The Bloat”.

This guidance and the two advice models are intended for use by BANT members, as well as other registered nutrition professionals, both with groups/communities and with individuals. They represent a general aid to various dietary models and why different initial conditions might require different programmes. BANT’s “plates” provide a starting point for personalised recommendations to be layered upon in order to meet specific needs.

Both dietary guidelines will be reviewed in 2017/18.

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2 Other Public Health Eating Models

In order to develop a robust set of wellbeing guidelines that are able to deal with current health concerns, the BANT expert panel studied carefully some of the key existing public health eating models. The aim was to feed from their strengths and to avoid their weaknesses.

2.1 The Eatwell Plate

UK Government advice is that "is appropriate advice for most people including people of all ethnic origins and people who are of a healthy weight or overweight. It is also suitable for vegetarians. However, it does not apply to children under 2 years of age because they have different needs. Between the ages of 2 and 5, children should gradually move to eating the same foods as the rest of the family, in the proportions shown on The Eatwell Plate”.

What are the problems with The Eatwell Plate?

- It applies not just to healthy weight people but also to those who are already overweight or obese.
- There is no evidence that any foods and drinks high in fat and sugar should be recommended as dietary advice. This is even more important for those who are overweight or obese.
- All fruits and vegetables are not equal. Fruit juice should not be included, and particularly not a large glass of juice.
• Milk and dairy foods: whilst these are important it is not clear why the products of one animal should constitute a ‘food group’ other than to reflect a food industry reality.
• There is no evidence that overweight/obese people should eat ‘plenty of bread, rice, potatoes and pasta’ even if it is wholegrain.

Further recommendations are that the 5 food groups should be consumed as follows:

• bread, rice, potatoes, pasta and other starchy foods - 33%
• fruit and vegetables - 33%
• milk and dairy foods - 15%
• meat, fish, eggs, beans and other non-dairy sources of protein - 12%
• foods and drinks high in fat and/or sugar - 8%

There is no evidence that any individual should follow a diet with these percentages or that it is a valid form of advice. National diet researchers can use these percentage recommendations to determine whether the nation or populations are eating healthily as a whole.

2.2 The US Dietary Guidelines

The official US Dietary Guidelines are reviewed every five years and have undergone many revisions, including how advice is represented, either pyramid or plate, as currently. A key difference from the UK guidelines is the split of fruit from vegetables.
2.3 Harvard Plate and Pyramid

The Harvard School of Public Health has developed and adapted its own plates and pyramids based on the prevailing science and free from food industry influence or lobbying. Harvard even has provided comparison charts on their plate and the US government’s guidelines.³

3 The BANT Wellbeing Guidelines Explained

Based on the Harvard models, BANT has developed “The Wellness Solution” and the “Fight The Fat / Beat The Bloat” plates. These pull together the latest dietary, as well as some lifestyle, advice for healthy living. The focus of these models is on the need to eat to provide energy, vital nutrients and fibre, and bioactive components (nutrients and non-nutrients) for long-term genomic stability. Population reference values for micro-nutrients and non-nutrient bioactives are not able to encompass the full diversity of individuals or do not exist at all.

3.1 The Wellness Solution

3.2 Fight The Fat / Beat The Bloat
In the absence of individualised advice, a short number of questions and observations will help determine which plate might be most suitable:

- Are you overweight with an all over layer of excess fat, or with wobbly bits or muffin top?
- Are you constantly tired?
- Do you get sugar cravings, particularly about 4pm?
- Do you bloat? Does it get worse during the day?

If the answer to one or more of the above is yes, then the “Fight The Fat / Beat The Bloat” plate may be best advise but with a recommendation for an individual consultation with a nutritional therapist to determine if there are adverse food reactions. The BANT practitioner may in this case use the Nutritional Therapy Consultation Process to provide personalised advice that is layered upon the simple guidelines featured in the plate in order to meet the individual’s needs.
4 Individualised Nutritional Advice

Individualised nutrition recognises: 1) under certain circumstances and in some individuals, diet can be a serious risk factor for a number of diseases; 2) common dietary chemicals can act on the human genome, either directly or indirectly, to alter gene expression or structure; 3) the degree to which diet influences the balance between healthy and disease states may depend on an individual’s genetic makeup; 4) some diet-regulated genes (and their normal, common variants) are likely to play a role in the onset, incidence, progression, and/or severity of chronic diseases; and 5) dietary intervention based on knowledge of nutritional requirements, nutritional status, and genotype (i.e. “personalised nutrition”) can be used to prevent, mitigate or treat chronic disease.

Individualised/personalised nutrition advice starts with assessing the individual and their health status and then working out nutritional requirements for optimal performance. This contrasts with the approach of taking a person’s food diary and evaluating it in relation to population recommended intakes.

Longevity and healthy-aging? Anti-ageing is dependent on optimal intakes of food bioactives (nutrients and non-nutrients) to maintain genome stability and expression in all life-stages, taking into account an individual’s genetic make-up.
5 Terms and Definitions

The following terms are useful in describing aspects of the BANT Wellbeing Guidelines and about diet in general, or where there may be specific questions, e.g. sources of calcium other than dairy products.

- **Antioxidant:** bioactive compounds which have the ability to quench free oxidising radicals, which in excess can damage DNA.

- **Body Mass Index (BMI):** weight in kilograms divided by the square of height in meters. It does not correlate with body fat which may represent a better indicator of health and can be assessed from skinfold thickness measurements, bioelectrical impedance, densitometry (underwater weighing), dual energy x-ray absorptiometry (DXA) and other methods.

- **Detoxification:** the biotransformation of molecules through several phases to become hydrophilic and facilitate excretion.

- **Food bioactive:** nutrients and non-nutrients which influence physiology.

- **Fruit:** sweet (dessert) fruits; other botanical fruits, e.g. cucumber or tomatoes, are treated as salad or vegetables.

- **Health:** a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. (World Health Organization, 1948)

- **Healthy Fats/Oils:** includes all fatty acids but particularly mono-unsaturated and poly-unsaturated fats from nuts, plant and fish sources. Saturated fats should not be consumed in excess.

- **Nutraceutical:** naturally derived bioactive compounds that are found in foods, dietary supplements and herbal products, and which have health promoting, disease preventing or medicinal properties. This does not include essential nutrients.

- **Nutrient:** is a fully characterised (physical, chemical, physiological) constituent of a diet, natural or designed, that serves as: (a) a significant energy yielding substrate; or (b) a precursor for the synthesis of macromolecules or of other components needed for normal cell differentiation, growth, renewal, repair, defense and/or maintenance; or (c) a required signaling molecule, cofactor or determinant of normal molecular structure/function and/or a promoter of cell

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and organ integrity. Additionally nutrients can catalyse reactions and promote the assembly of mechanistic structures.

- **Optimum nutrition:** encompasses individual prescriptions for diet and lifestyle in order to alleviate or prevent ailments and to promote optimal gene expression through all life stages. Recommendations may include guidance on natural detoxification, procedures to promote colon health, methods to support digestion and absorption, the avoidance of toxins or allergens, and the appropriate use of supplementary nutrients, including phytonutrients.

- **Protein:** from animal and plant sources to supply amino acids.

- **Superfood:** (usually) plant foods which have direct health benefits above their nutritional (vitamin/mineral) value.

- **Vegetables:** the spectrum of plant foods, excluding sweet fruits.

- **Vitamins and minerals:** a group of small co-factors essential for health.
6 Resources


