



# ILSI LA collaborative research- The ELANS



# Estudio Latinoamericano de Nutrición y Salud (ELANS): Food intake and physical activity patterns of Latin American Population.



ESTUDIO LATINOAMERICANO DE NUTRICIÓN Y SALUD  
LATIN AMERICAN STUDY ON NUTRITION AND HEALTH- LAHNS

On behalf of ELANS Group:

## **Mauro Fisberg, MD PhD**

Associate Professor - Pediatrics Department, Federal University of Sao Paulo (UNIFESP)  
Coordinator of the Nutrition Center- Pensi Institute- Fundação José Luiz Setúbal  
Member of the Board and Coordinator of Healthy Life Style Task Force- ILSI Brazil

## **MSc. Georgina Gómez**

Full professor- Department of Biochemistry  
School of Medicine- University of Costa Rica

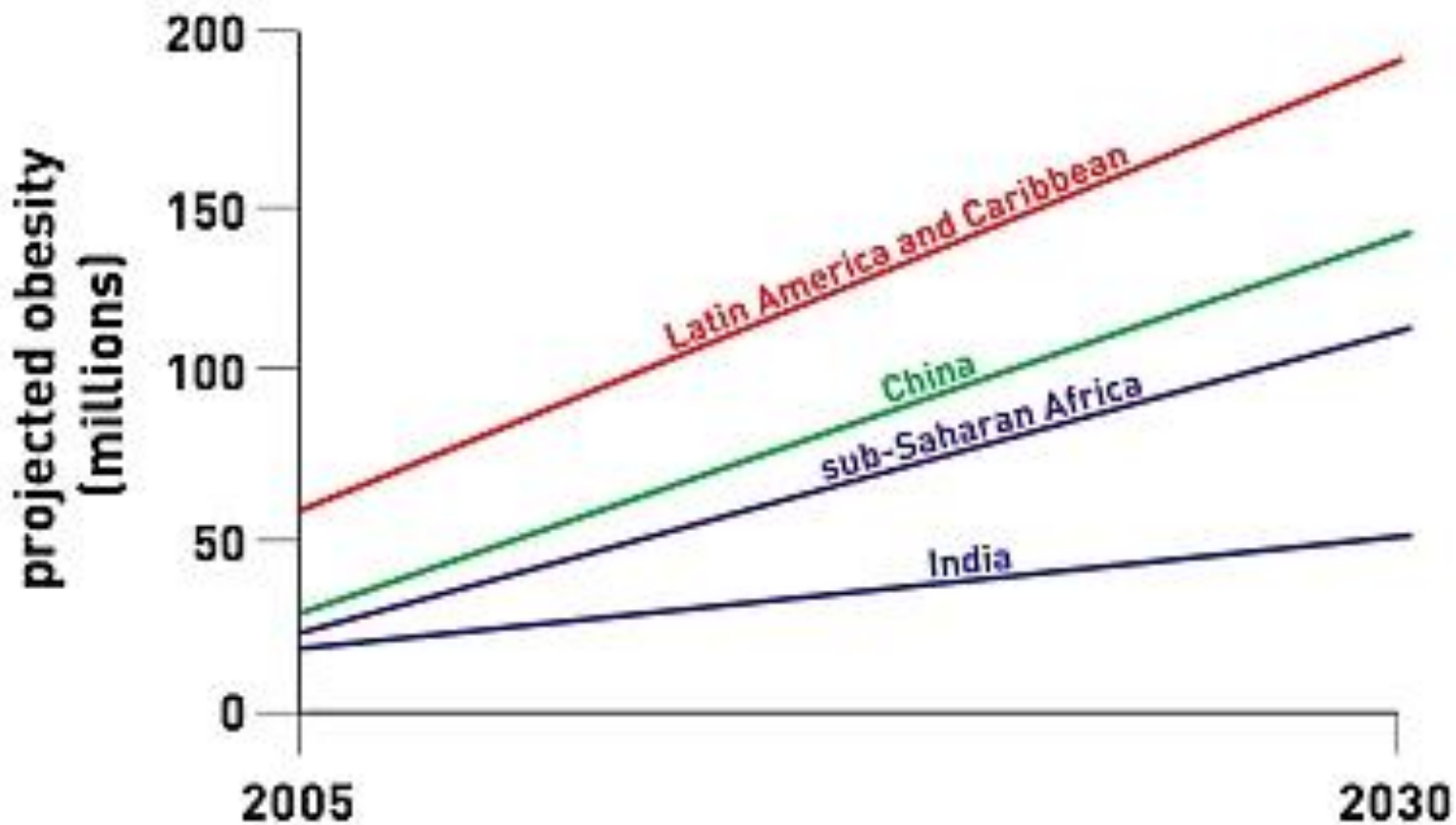


# Interest Disclosure

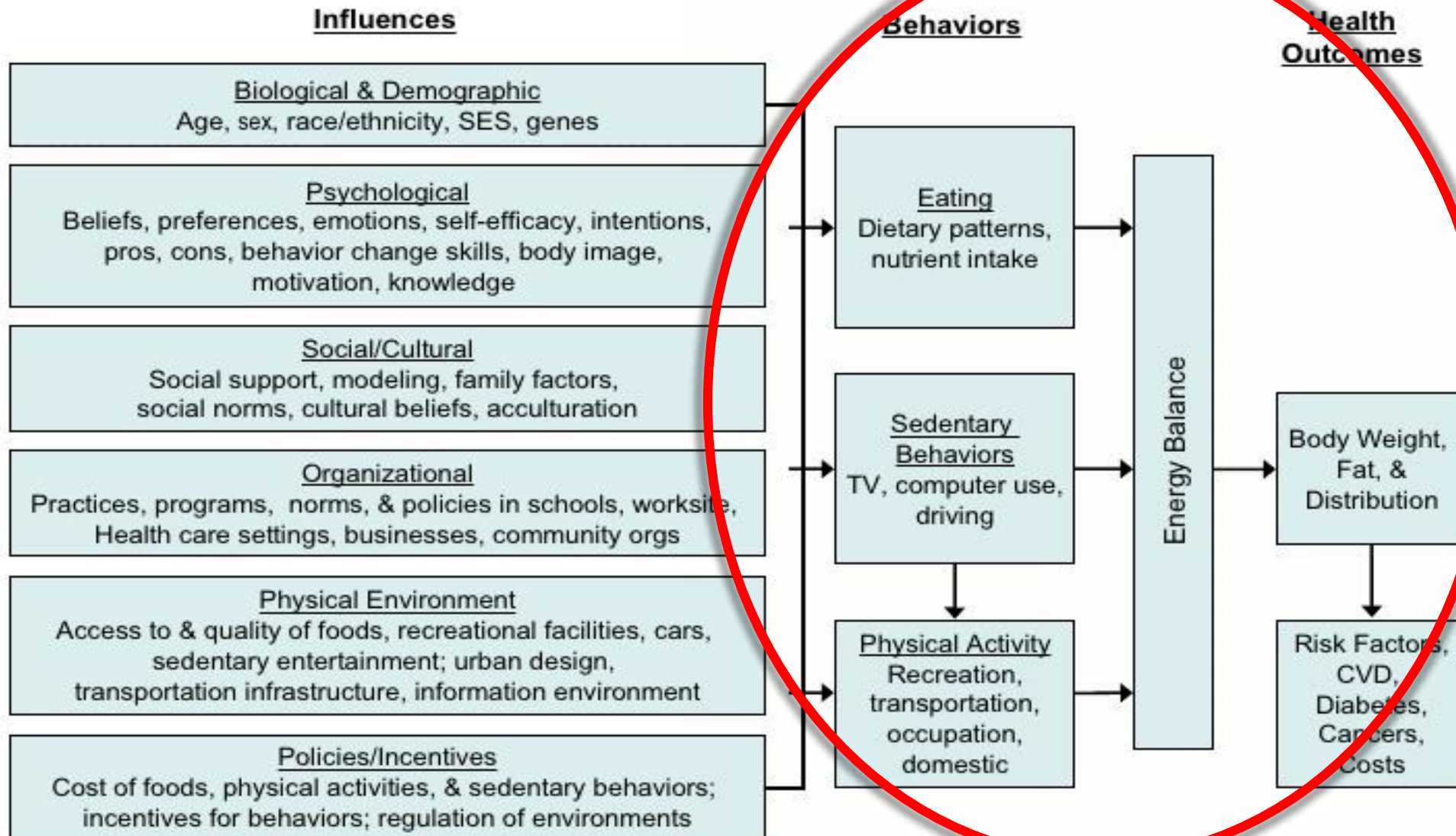
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. This manuscript do represent the original idea of all authors and do not necessarily represent ILSI views.



## LATIN AMERICA HAS THE WORST SCENARIOS OF OBESITY FOR COUNTRIES IN EMERGING REGIONS BY 2030.



# An Ecological Model of Diet, Physical Activity, and Obesity



- **Lack of studies that combine nutrition and physical activity assessment in representative samples of Latin American countries.**
- Up to now, there is no Latin American study using a central standard methodology across a group of participating countries.

Country	Year	Sample size	Sample size that underwent dietary assessment	Method	Analysis of the dietary data
Argentina (ENNyS)	2004-2005	36,354 (aged 6 m - 5 y and women 10-49 y)	36,354	24-h Recall	Food Composition database developed for ENNyS
Brasil (POF)	2008-2009	159,941 (aged ≥ 0 y)	34,003 (aged ≥ 10 y)	Two 24-h recall	NDSR software and Food Composition database developed for POF
Colombia (ENSIN)	2008-2010	162,331 (aged 0-64 y)	17,897 (aged 5 - 64 y)	Food-Frequency Questionnaire	Qualitative (daily frequency of intake)
Chile (ENCA)	2014	4,920 (aged ≥2 y)	4,920	Quantitative Food-Frequency Questionnaire and 24-h Recall	PC-SIDE software
Ecuador (ENSANUT-ECU)	2011–2013	57,727 (aged 0-59 y)	19,932 (aged 1-59 y)	24-h Recall	PC-SIDE software
México (ENSANUT)	2012	96,031 (aged >0 y)	10,563 to 12,484 according to method used	Semi-quantitative Food Frequency and 24-h recall in 11% and 13% of sample, respectively	Food Composition database developed by National Institute of Public Health
Perú (ENINBSC)	2006	4,206 (aged ≥20 y)	4,206	24-h Recall	ANDREA software, developed by CENAN-INS
Venezuela (ESCA)	2012-2014	20.670 (aged ≥ 3 y)	6,316 aged ≥ 3 y	Diet history and food frequency questionnaire	Food Composition database developed for ESCA

# Latin American Study of Nutrition and Health

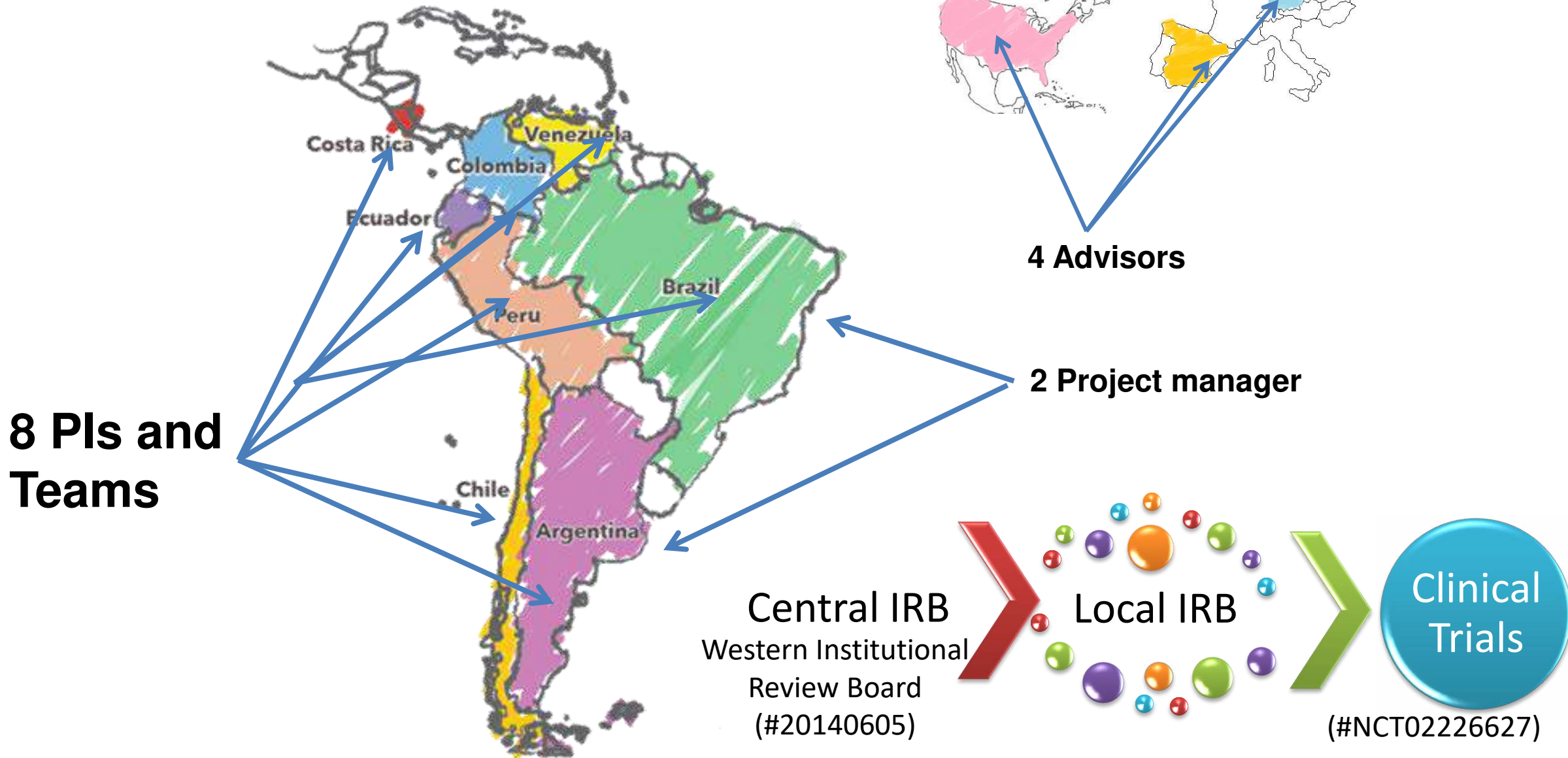
## Aims

- Provide up-to-date reliable and comparable data of dietary intake, physical activity, and its association with anthropometric profile among representative urban populations of eight Latin American countries (~ 40% of the population of the Americas);
- Measure variations by region, cultural background, socioeconomic status, age and gender;
- Add new scientific-based evidence to describe the interplay among energy intake, energy expenditure, and anthropometric measurements.





# ELANS work group



# Overall Design and Methods

## Sample:

- Total of 9,000 subjects;
- Representative sample of the urban household population of each country;
- Stratified by geographical location (only urban areas), gender, age and socioeconomic status:

15 – 19,9 years (adolescents)  
20 – 34,9 years (young adults)  
35 - 49,9 years (adults)  
50 - 65 years (senior adults)



- Socioeconomic level (SEL): high, medium and low.

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- Abstract
- Background
- Discussion
- Declarations
- References

Study protocol | [Open Access](#) | Open Peer Review

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## Latin American Study of Nutrition and Health (ELANS): rationale and study design

M. Fisberg ✉, I. Kovalskys, G. Gómez, A. Rigotti, L. Y. Cortés, M. Herrera-Cuenca, M. C. Yépez, R. G. Pareja, V. Guajardo, I. Z. Zimberg, A. D. P. Chiavegatto Filho, M. Pratt, B. Koletzko, K. L. Tucker and the ELANS Study Group

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<https://doi.org/10.1186/s12889-016-2765-y> | © Fisberg et al. 2016

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[Open Peer Review reports](#)

### SECTION

[Energy balance-related behaviors](#)

### Metrics

Article accesses: 2926



# Variables

## INTAKE

- Two 24-hours dietary recall
- Beverage intake questionnaire

## EXPENDITURE

- IPAQ-Long Questionnaire
- Accelerometry

## ANTHROPOMETRY

- Body weight
- Height
- Waist, hip and neck circumferences



Name: .....		
Sex:	Male: 1	Female: 2
Subject code:	.....	
Interviewer code:	.....	
Interview date:	/ /	

"Now the next questions are about your diet in ONE MONTH period. Therefore would like to know how often do you drink each of the beverages on this list? "

BEVERAGES & SNACKS	How often do you eat.....?	Unit
	N-1-2-3-4-5-6-7-8-9-10	D - W - M
<b>NON-ALCOHOLIC BEVERAGES</b>		
Water sparkling/still	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Flavored water		
sugar free	N-1-2-3-4-5-6-7-8-9-10	D - W - M
with sugar or fruit	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Carbonated beverages		
common (cola, lemon, etc)	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Light/Zero (cola, lemon, etc)	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Energy drinks		
isotonic (6-8%HC)	N-1-2-3-4-5-6-7-8-9-10	D - W - M
vitamin drinks	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Fruit juices		
juice powder 0% sugar	N-1-2-3-4-5-6-7-8-9-10	D - W - M
fresh fruit juice/with pulp 24%	N-1-2-3-4-5-6-7-8-9-10	D - W - M
<b>ALCOHOLIC BEVERAGES</b>		
Beer lager/stout	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Wine (white/red)	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Sparkling (champagne)	N-1-2-3-4-5-6-7-8-9-10	D - W - M
others: Vodka, whisky, tequila	N-1-2-3-4-5-6-7-8-9-10	D - W - M
<b>INFUSIONS</b>		
Mate		
Without sugar or with sweetener 0%	N-1-2-3-4-5-6-7-8-9-10	D - W - M
With sugar	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Tea		
Without sugar or with sweetener 0%	N-1-2-3-4-5-6-7-8-9-10	D - W - M
With sugar	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Coffee		
Without sugar or with sweetener 0%	N-1-2-3-4-5-6-7-8-9-10	D - W - M
With sugar	N-1-2-3-4-5-6-7-8-9-10	D - W - M
With low-fat milk	N-1-2-3-4-5-6-7-8-9-10	D - W - M
Whole milk	N-1-2-3-4-5-6-7-8-9-10	D - W - M
cappuccino	N-1-2-3-4-5-6-7-8-9-10	D - W - M

Times N: NEVER 1: Once 2: Twice 3: 3 times ... 10: 10 times

UNIT: D: day W: week M: month

The serving will be obtain from the 24 hrs recall

# Dietary assessment Beverage intake questionnaire

# Food Standardization

*Nutrients* **2015**, *7*, 1-x manuscripts; doi:10.3390/nu70x000x

OPEN ACCESS

*nutrients*

ISSN 2072-6643

www.mdpi.com/journal/nutrients

*Article*

## **Standardization of the Food Composition Database Used in the Latin American Nutrition and Health Study (ELANS)**

**Irina Kovalskys <sup>1,2\*</sup>, Mauro Fisberg <sup>3,4</sup>, Georgina Gómez <sup>5</sup>, Attilio Rigotti <sup>6</sup>,  
Lilia Yadira Cortés <sup>7</sup>, Martha Cecilia Yépez <sup>8</sup>, Rossina G. Pareja <sup>9</sup>,  
Marianella Herrera-Cuenca <sup>10</sup>, Ioná Z. Zimberg <sup>11</sup>, Katherine L. Tucker <sup>12</sup>, Berthold Koletzko <sup>13</sup>,  
Michael Pratt <sup>14</sup>, on behalf of the ELANS Study Group <sup>†</sup>**

<sup>1</sup> Committee of Nutrition and Wellbeing, International Life Science Institute (ILSI-Argentina), Buenos Aires C1059ABF, Argentina

<sup>2</sup> Facultad de Ciencias Médicas, Departamento Nutrición, Universidad Favaloro, Solís 453, Buenos Aires C1078AAI, Argentina

<sup>3</sup> Fundação Jose Luiz Egydio Setubal, Hospital Infantil Sabara, Instituto Pensi, Av Angelica 1968, São Paulo 01239-040, Brazil; E-Mail: mauro.fisberg@gmail.com

<sup>4</sup> Centro de Atendimento e Apoio ao Adolescente, Departamento de Pediatria, Universidade Federal de São Paulo, R. Botucatu 715, São Paulo 04023-062, Brazil

<sup>5</sup> Departamento de Bioquímica, Escuela de Medicina, Universidad de Costa Rica, San José 11501, Costa Rica; E-Mail: georgina.gomez@ucr.ac.cr

<sup>6</sup> Departamento de Nutrición, Diabetes y Metabolismo, Centro de Nutrición Molecular y Enfermedades Crónicas, Escuela de Medicina, Pontificia Universidad Católica, Santiago 833-0024, Chile; E-Mail: arigotti@med.puc.cl

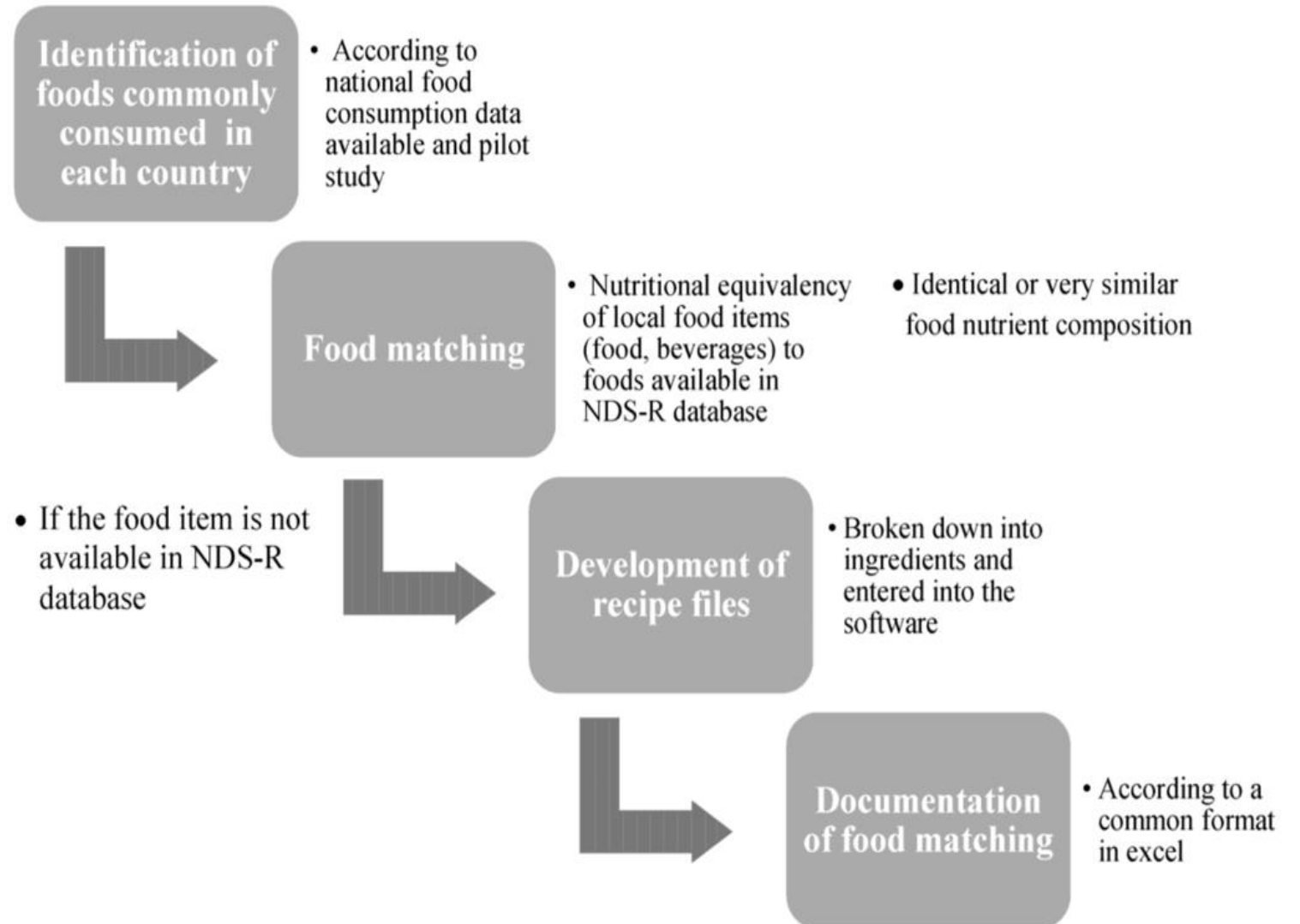
<sup>7</sup> Departamento de Nutrición y Bioquímica, Pontificia Universidad Javeriana, Carrera 7 # 43-82 ofc 52-613, Bogotá, Colombia; E-Mail: ycortes@javeriana.edu.co

<sup>8</sup> Colegio de Ciencias de la Salud, Universidad San Francisco de Quito, Quito 17-1200-841, Ecuador; E-Mail: myepeza@usfq.edu.ec



# Food standardization procedures.

## Nutrient and Food Group Calculation Software





# Food and Drink Standardization.

By country

Country	Number of food and drink preparations			Agreement
	Food	Recipes	Total	Percentage (%)
Argentina	638	195	833	80-120
Brazil	666	495	1161	80-120
Chile	130	31	161	90-110
Costa Rica	512	235	747	90-110
Colombia	145	65	210	85-105
Ecuador	220	130	350	68-105
Peru	652	281	933	85-115
Venezuela	291	44	335	80-120

4730 total food standardized

## Need to evaluate those plausible reporters- exclusion of under and over reporters

PREVIDELLI, A. N. et al.

Misreporting of energy intake in multicenter study in Latin America population: results from the Latin American Study of Nutrition and Health (ELANS). THE FASEB JOURNAL (ONLINE) , v. 31, p. 295, 2017.



# Physical activity measures-IPAQ

- Validated for physical activity in Latin America;
- The Mexican (Spanish) version of IPAQ (Salvo et al, 2014) was adapted for all countries of ELANS
- Only the sections **leisure-time** and **transport** physical activity (LTPA and TPA) were included;

## Outcomes:

- Total vigorous, moderate, sedentary time in minutes/week
- Transport and Leisure time vigorous, moderate, sedentary time in minutes/week
- Differentiation by week and weekend



# Physical activity measure- Accelerometry

- 40% of the sample
- Objectively monitor physical activity and inactivity
- Accelerometer (model GT3X+, ActiGraph, Pensacola, FL, USA)
- Elasticized belt at hip level on the right mid-axillary line
- 7 days



# Issues/Learnings

## Planning the Conduct of Multicenter Research

Assure standardization

Uniformity of procedures

Important outcome measures

Ethical approval by international and local IRB

Sponsor role in the study

## Selection of the sites and team

Coordinating Center and External Advisors Committee responsibility

Cooperation between institutions

Develop infrastructure

Funding

## Data Quality

Preparatory meetings

Manual of operation

Site visits

Technical visits to participating centers

Close monitoring of data collection and data entry

Inconsistency checks

## Dissemination of findings

Plan of analysis

Plan of communication

Plan of publication



Special report

## Developing a cooperative multicenter study in Latin America: Lessons learned from the Latin American Study of Nutrition and Health Project

Mauro Fisberg,<sup>1</sup> Irina Kovalskys,<sup>2</sup> Georgina Gómez Salas,<sup>3</sup> Rossina Gabriella Pareja Torres,<sup>4</sup> Martha Cecilia Yépez García,<sup>5</sup> Lilia Yadira Cortés Sanabria,<sup>6</sup> Marianella Herrera-Cuenca,<sup>7</sup> Attilio Rigotti,<sup>8</sup> Viviana Guajardo,<sup>2</sup> Ioná Zalcmán Zimberg,<sup>9</sup> Agatha Nogueira Previdelli,<sup>10</sup> Luis A. Moreno,<sup>11</sup> Michael Pratt,<sup>12</sup> Berthold Koletzko,<sup>13</sup> Katherine L. Tucker,<sup>14</sup> and the ELANS Study Group<sup>15</sup>

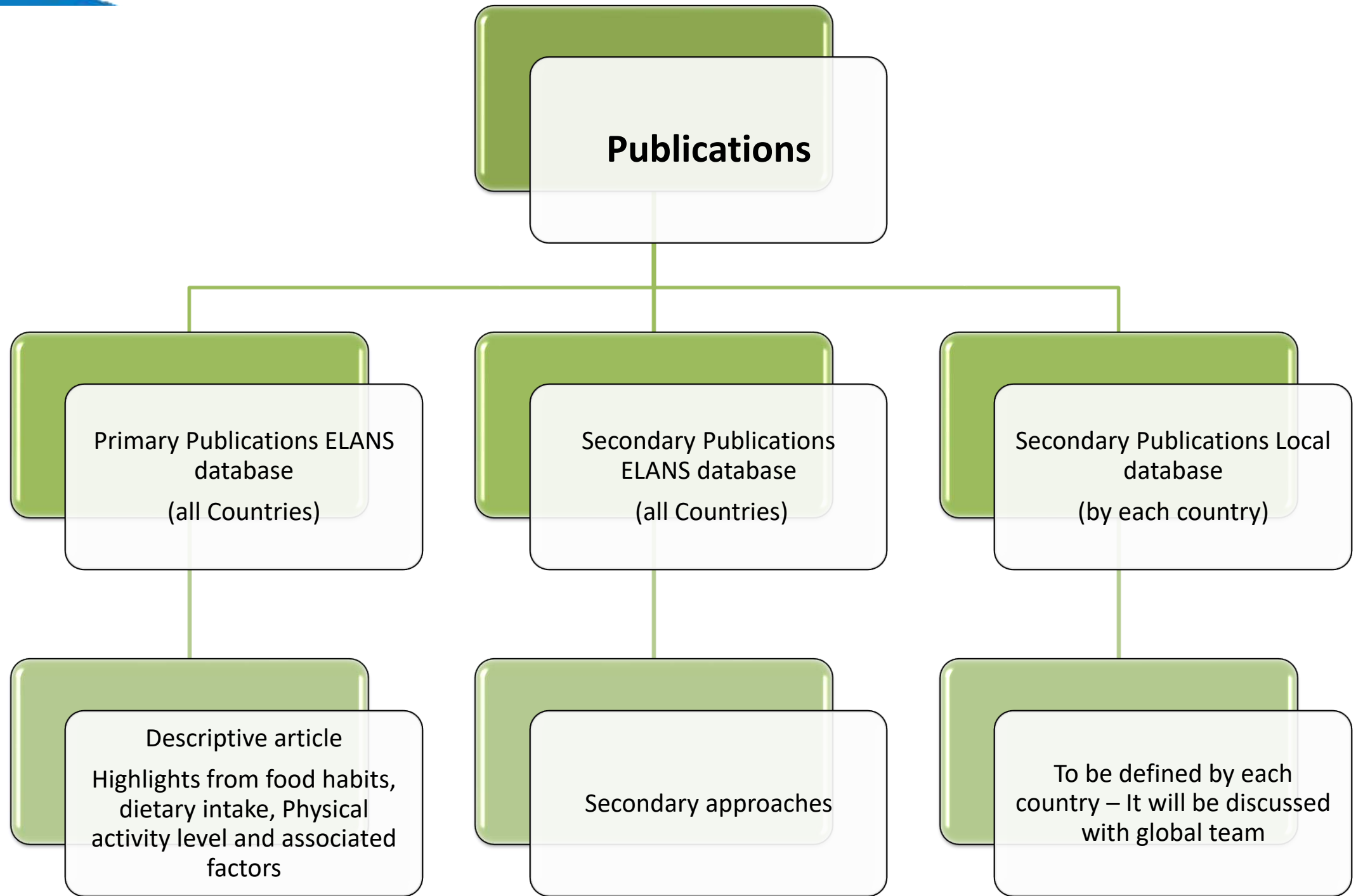
**Suggested citation** Fisberg M, Kovalskys I, Gómez Salas G, Pareja Torres RG, Yépez García MC, Cortés Sanabria LY, et al. Developing a cooperative multicenter study in Latin America: Lessons learned from the Latin American Study of Nutrition and Health Project. *Rev Panam Salud Publica.* 2017;41:e111.



### ABSTRACT

This report examines the challenges of conducting a multicenter, cross-sectional study of countries with diverse cultures and shares the lessons learned. The Latin American Study of Nutrition and Health (ELANS) was used as a feasibility study involving the most populous cities of eight countries in Latin America (Argentina, Brazil, Chile, Colombia, Costa Rica, Ecuador, Peru, and Venezuela) in 2014–2015, about 40% of the population of the Americas. The target sample included 9 000 individuals, 15–65 years of age, and was stratified by geographic location (only urban areas), gender, age, and socioeconomic status.

Six principal challenges were identified: team structuring and site selections; developing a single protocol; obtaining ethics approval; conducting simultaneous fieldwork; ensuring data quality



# Presentations and operational items with ILSI LA and regional branches support





# ELANS Applications and Future Directions

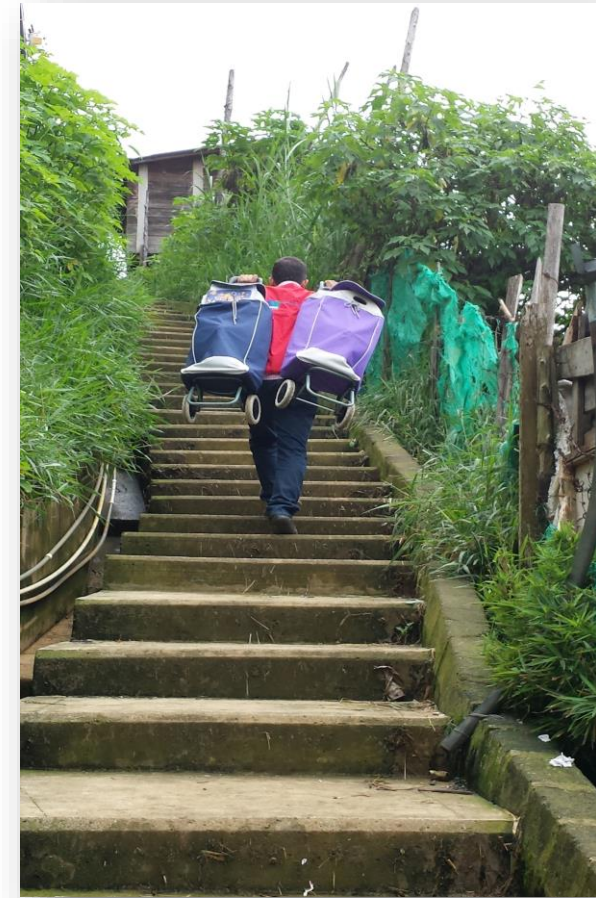
- Influence with Science based information on Public Health
  - Chronic disease prevention Programs
  - Fortification Programs
  - Drivers of Food Choice
  - Diet diversity interventions....and more
  
  - New data arriving from Mexico (EMANS)
  - Paraguay prospecting workshop and participation
- Answering health and also environmental questions
  - i.e. Sustainability of the LA diet?
  - Biological vs cultural preferences ?
  - Comparative data with other data basis
  - ..... many more....
- One ILSI opportunity ! LA integration of branches
  - Diet composition, recipes , potential future open data, regional workshops, political influence...





**ELANS Working Group and ILSI members**

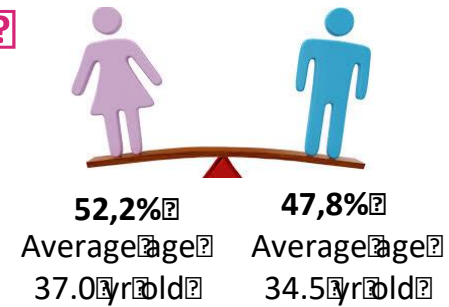
# Main results and next steps



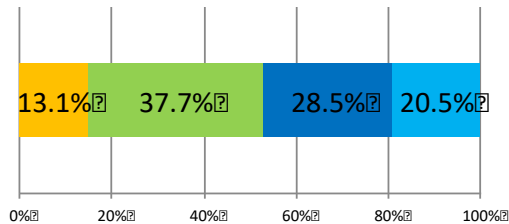
# ELANS: Overall Study Sample sociodemographics



## SEX



## AGE DISTRIBUTION

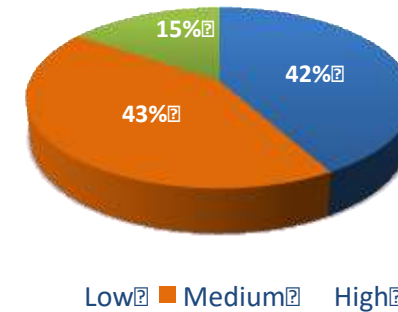


## EDUCATION

9.5% University or higher  
 29.2% Middle-high school  
 60.1% Lower school  
 1.2% None



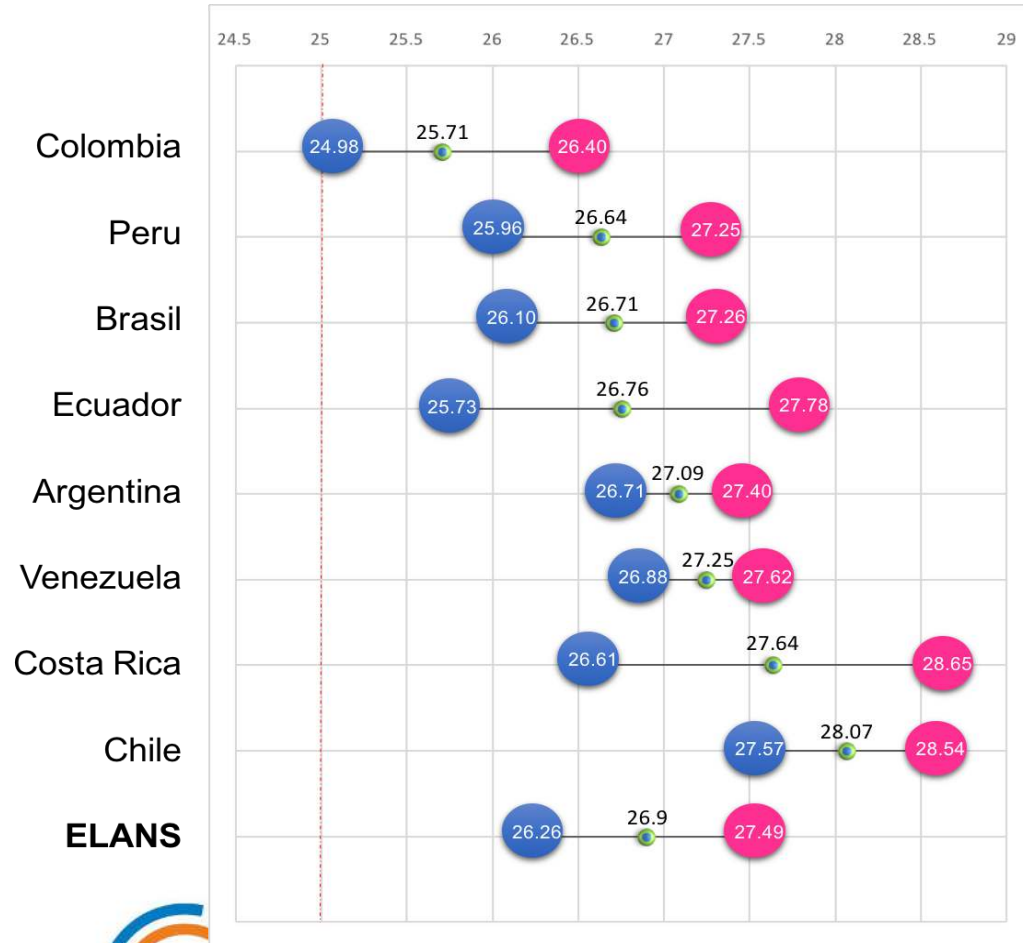
## SOCIOECONOMIC LEVEL (SEL)



# ELANS: Body Mass Index

Body Mass Index (kg/m<sup>2</sup>)

Males — mean — Females



60%  
Excess weight

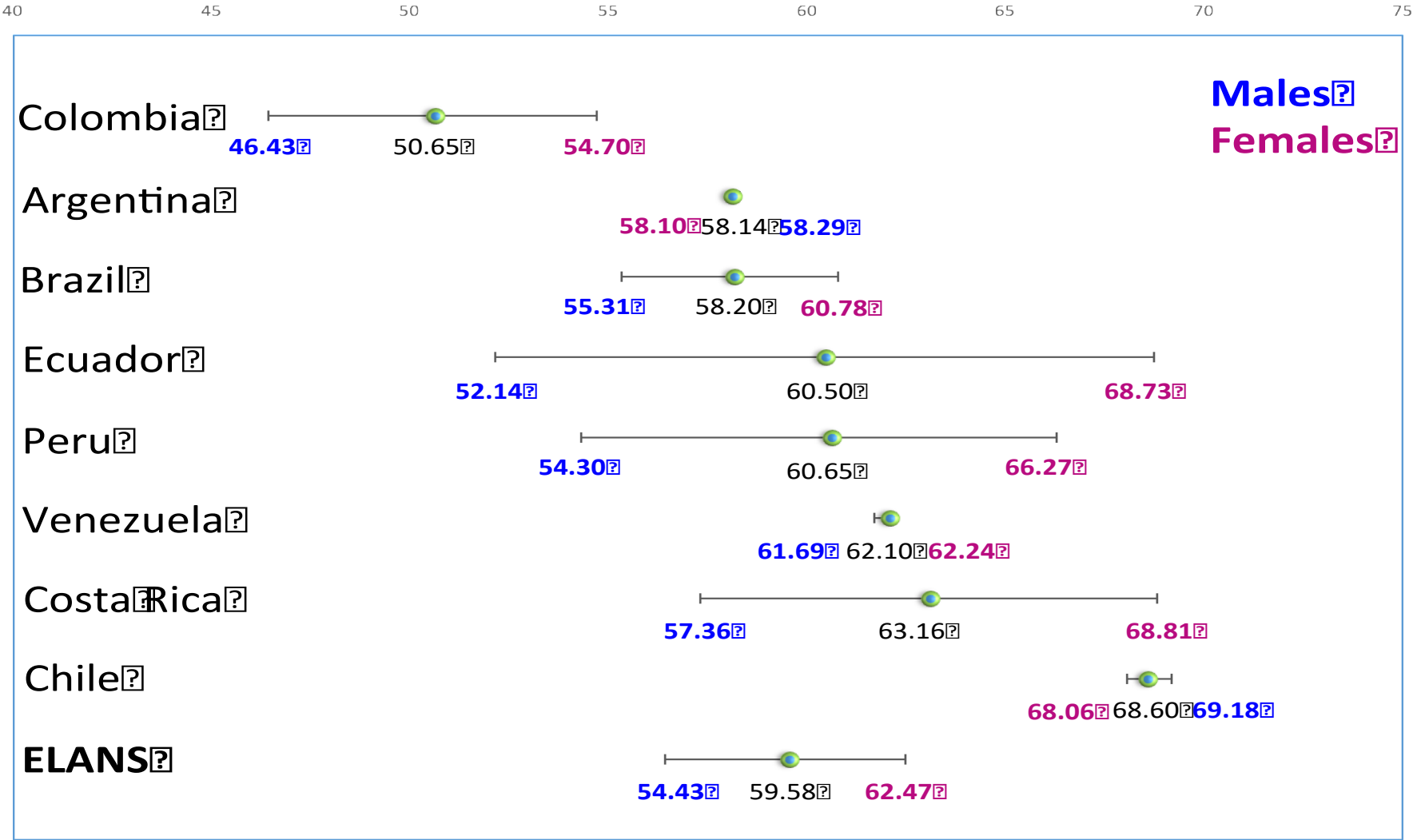


ILSI

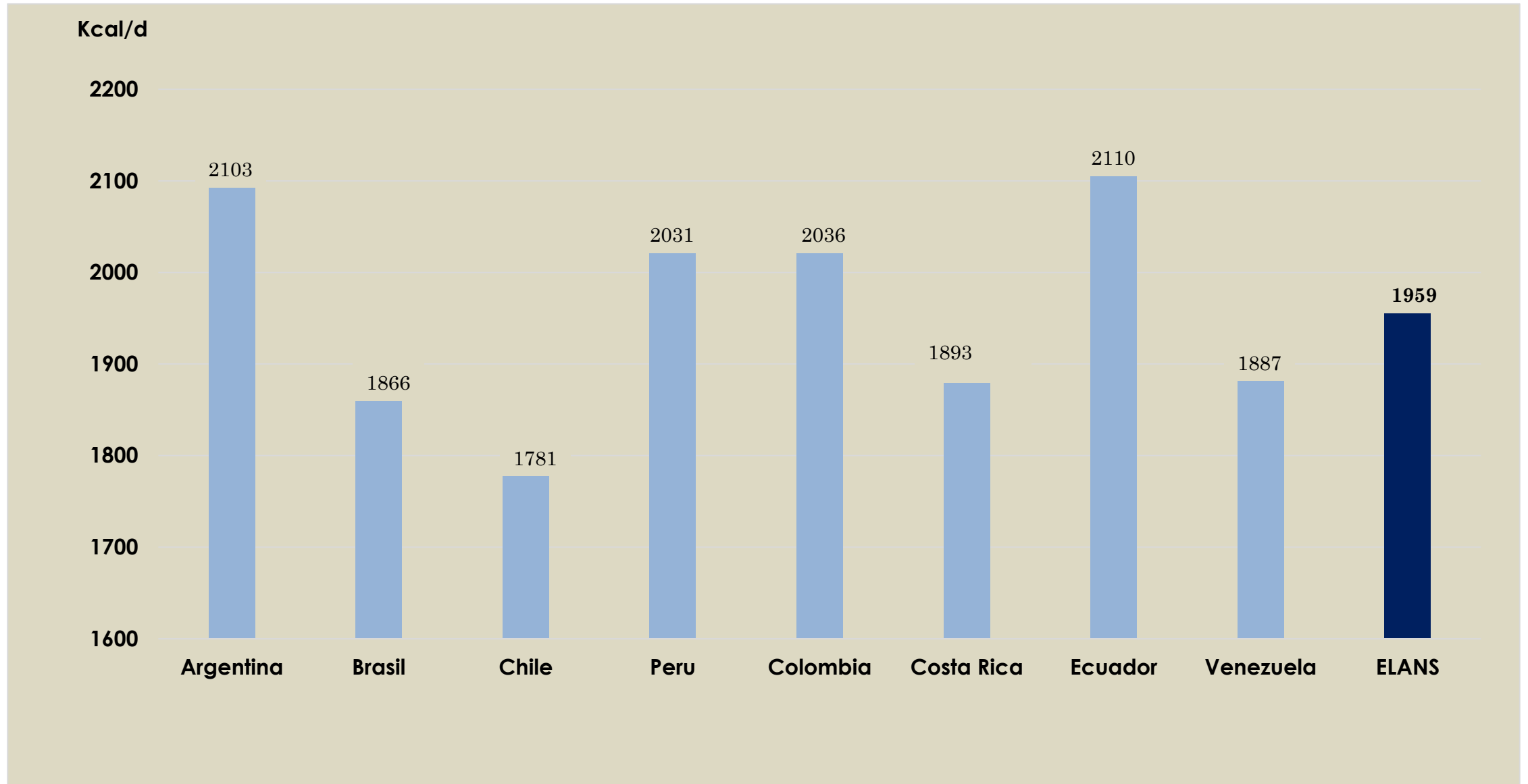
p>0.05 between sexes among all countries

# ELANS: Overweight and Obesity

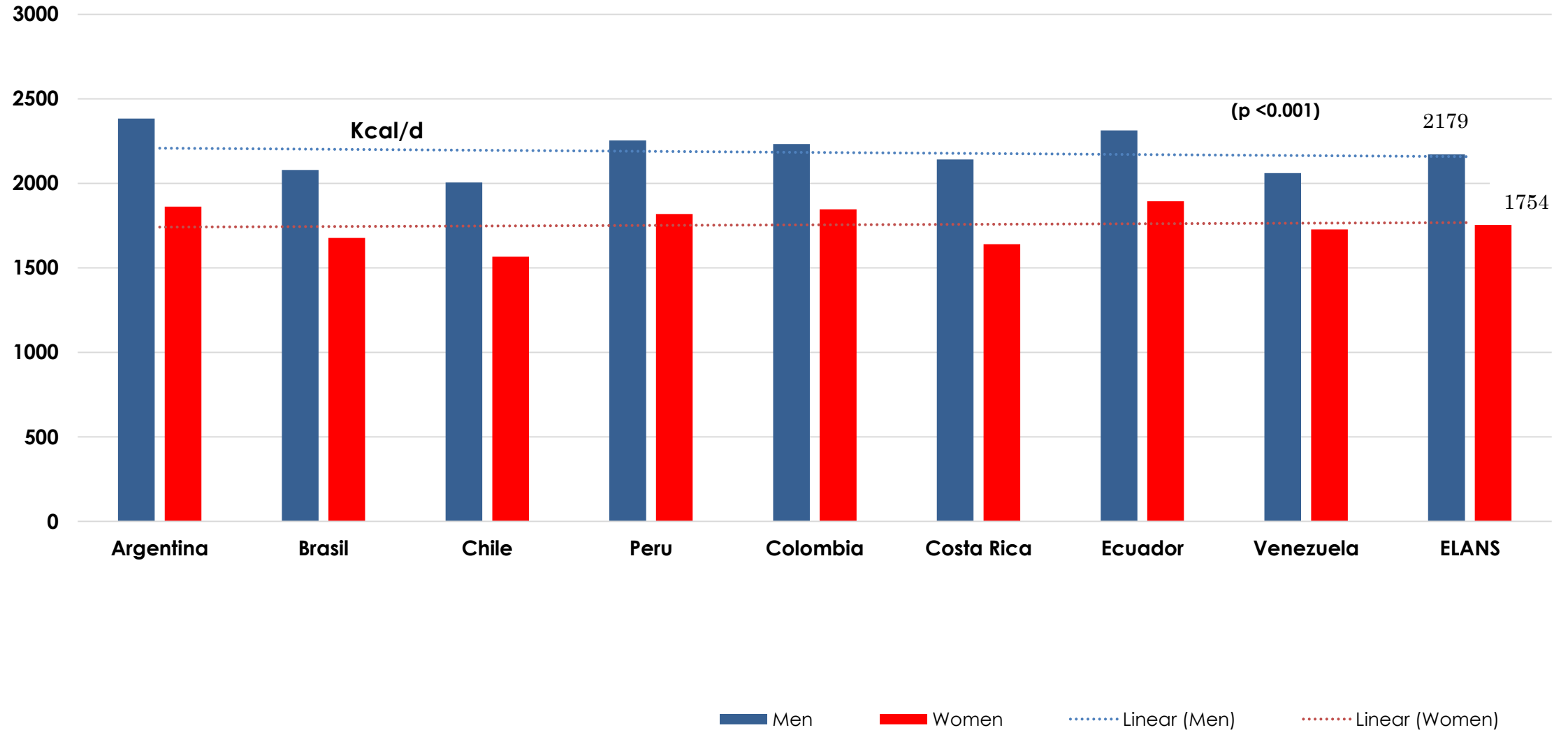
Prevalence (%) of Overweight and Obesity



# Mean energy intake (Kcal/d) by country

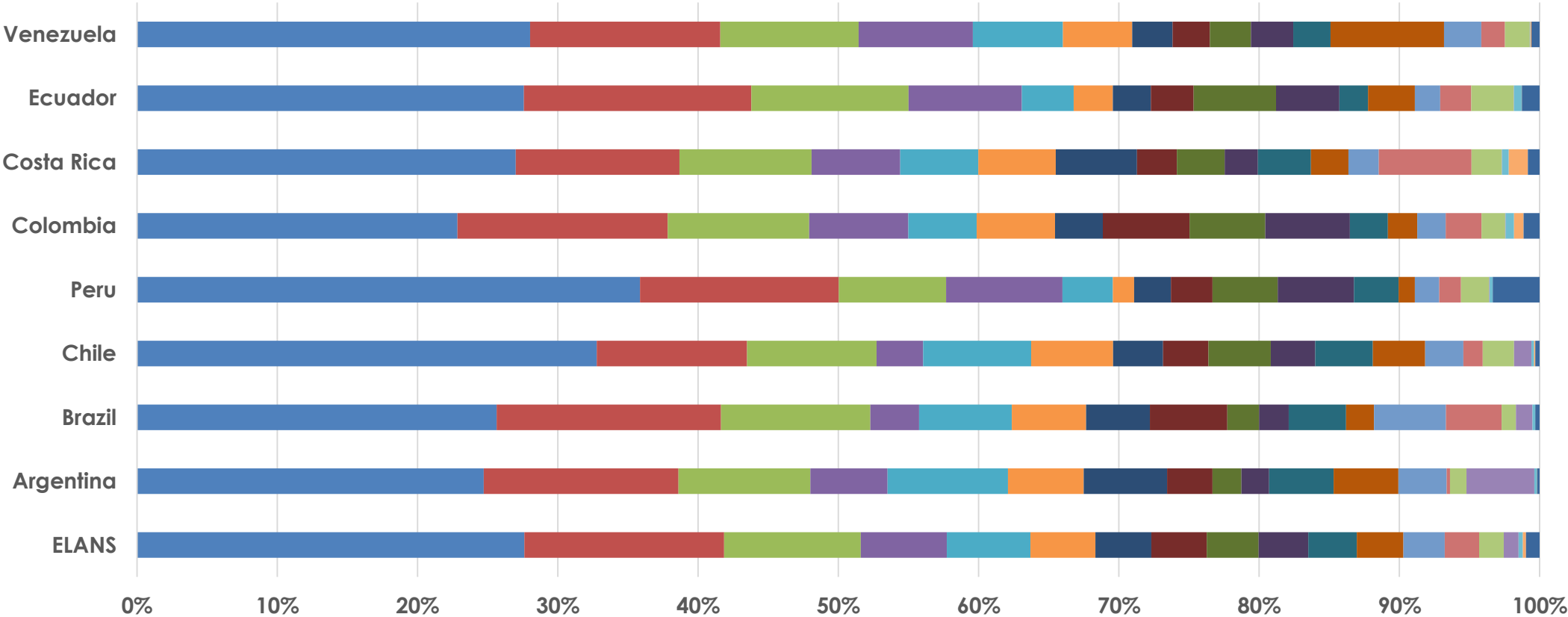


# Mean energy intake (Kcal/d) by sex



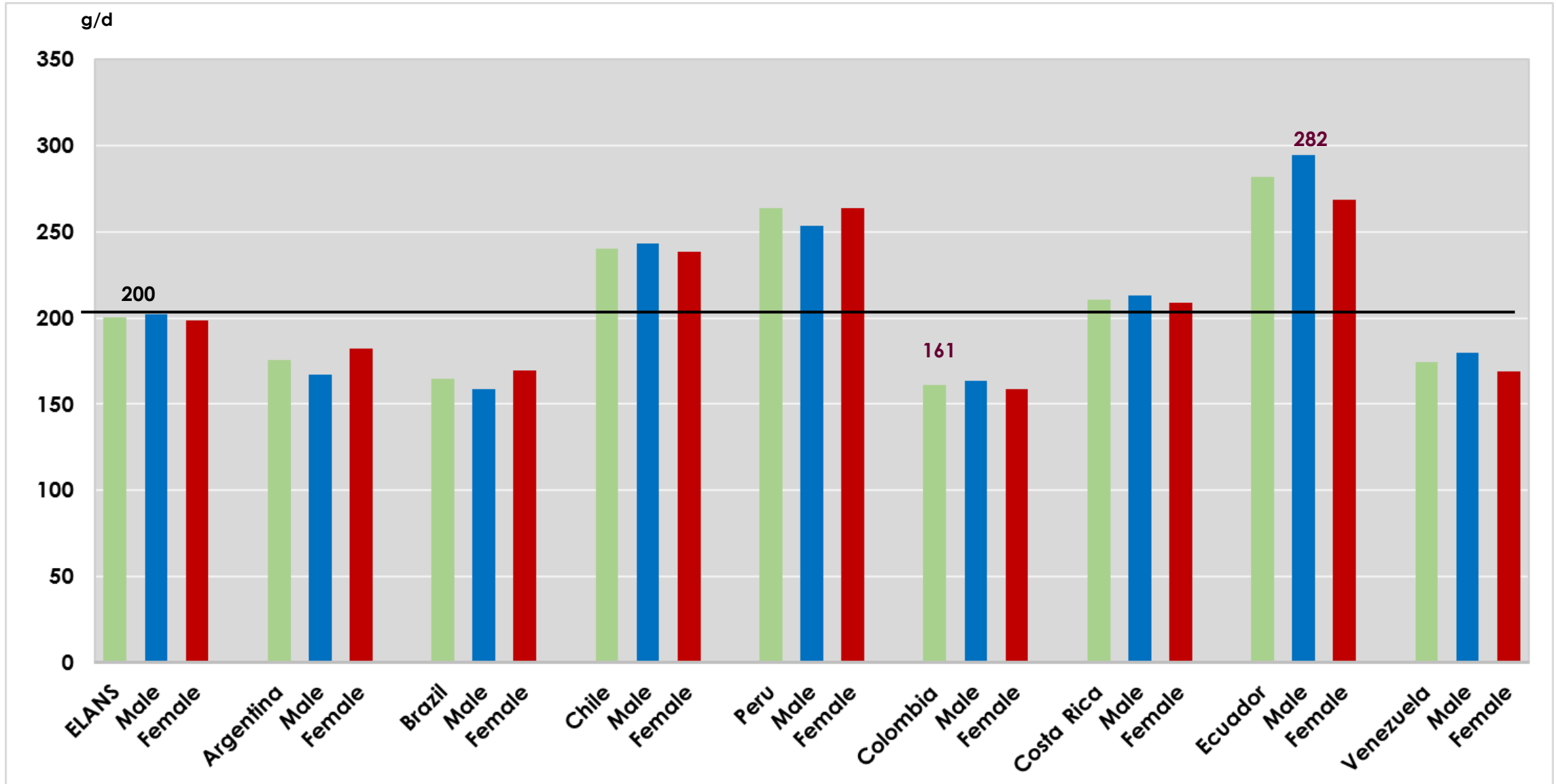


# Source of energy intake (big group)

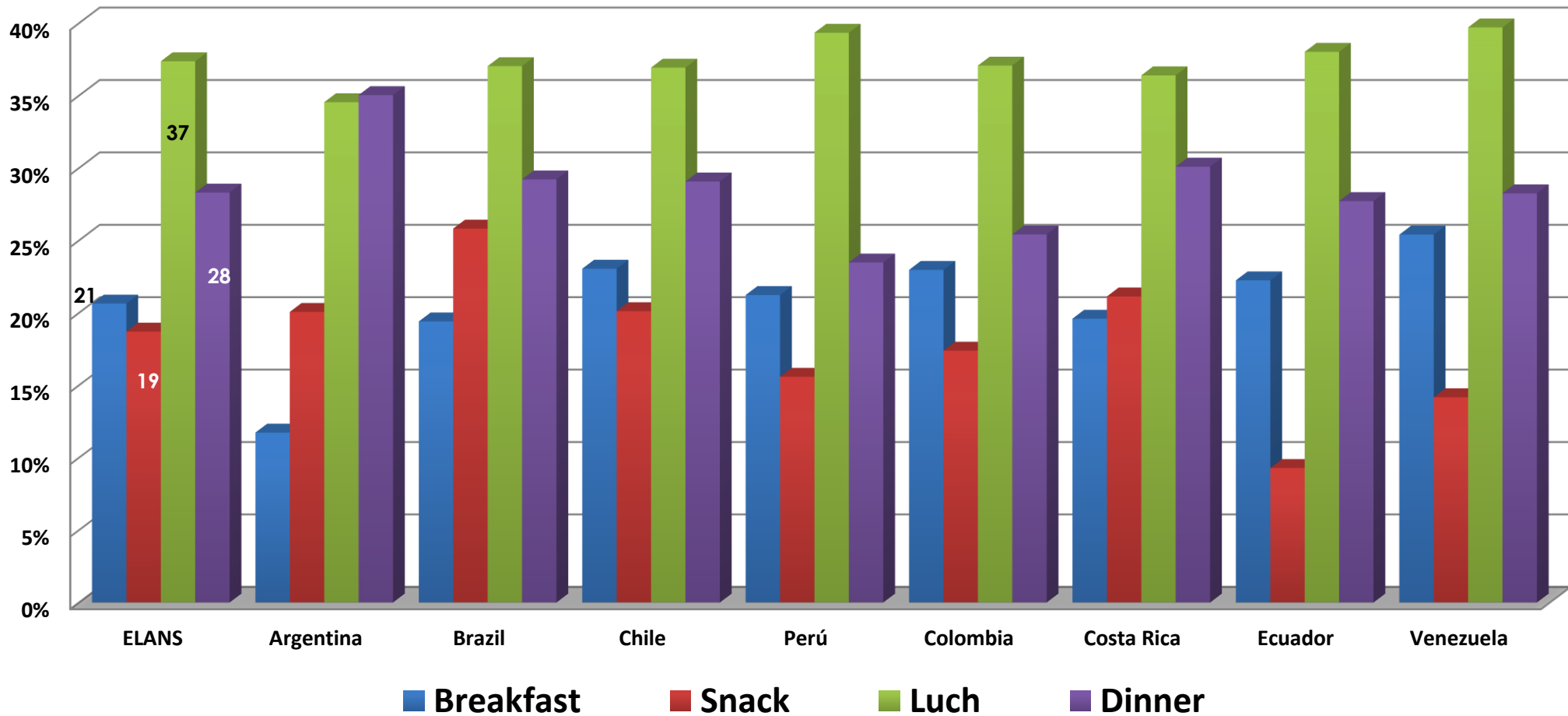


- Grains, Pasta and Bread
- Meat (not processed) and Eggs
- Oils, Fats and Dressings
- Non-alcoholic beverages - Homemade
- Non-alcoholic beverages - RTD
- Processed Meat
- Cookies, Crackers, Popcorn, Breakfast cereal
- Milk, Yogurt and Soy milk
- Fruits
- Roots
- Sugars and Sweets
- Dairy products
- Alcoholic beverages
- Beans, Legumes and Soybeans
- Vegetables
- Pizza
- Nuts & Seeds
- Tortillas/Tacos/Turnovers
- Others

# Mean fruit and vegetable intake by country and gender (g/d)

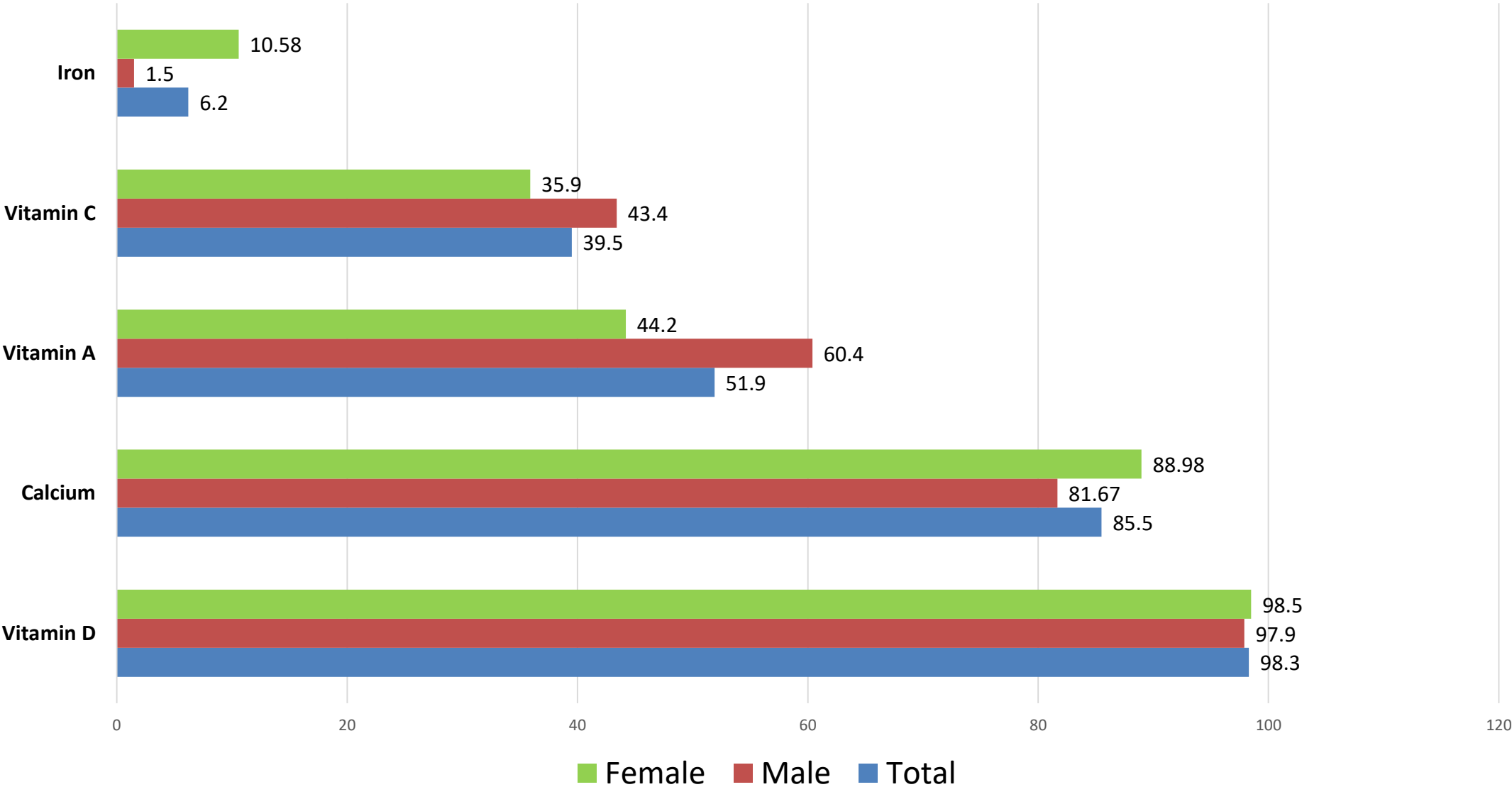


# Mean percentage of energy by meal



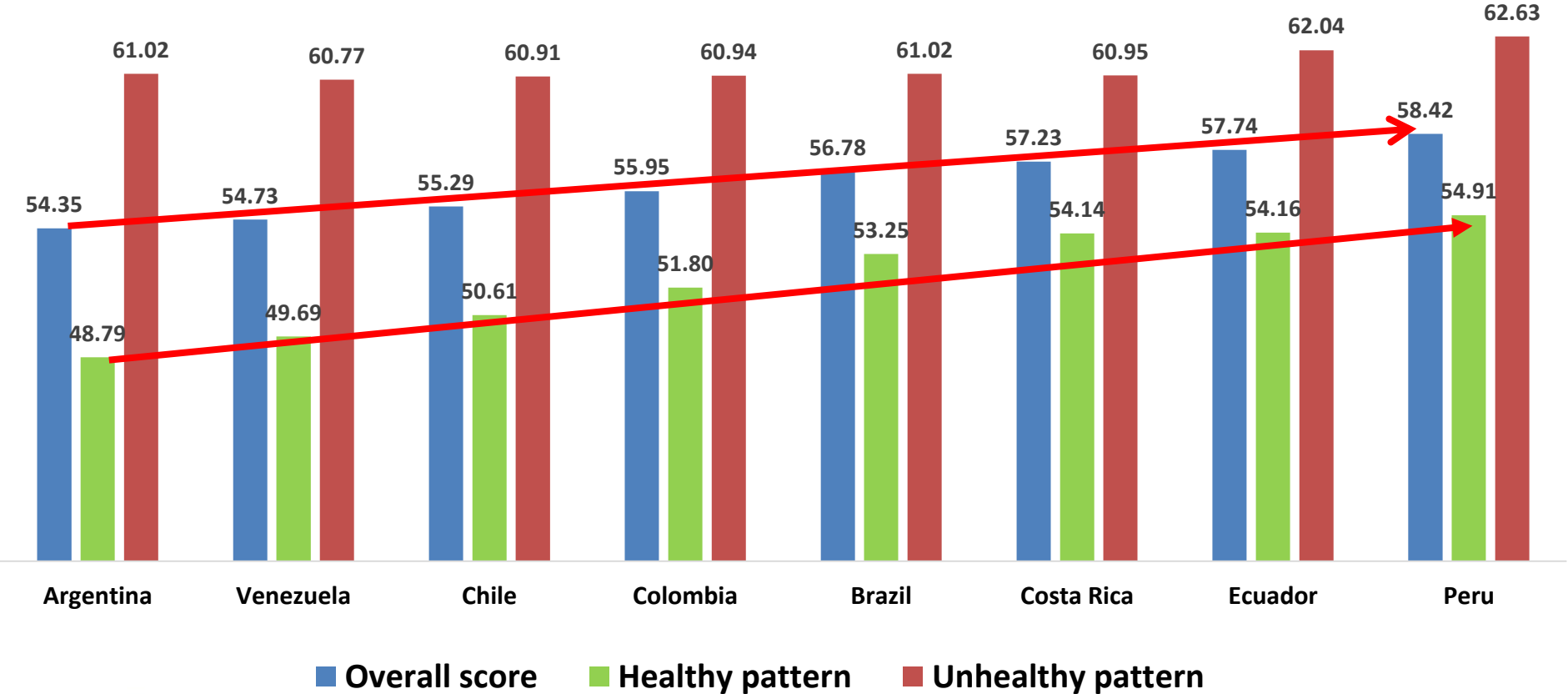
The distribution of energy throughout the day in the different meal times **does not have a homogeneous distribution among the eight countries**

# Micronutrients deficiency (%)

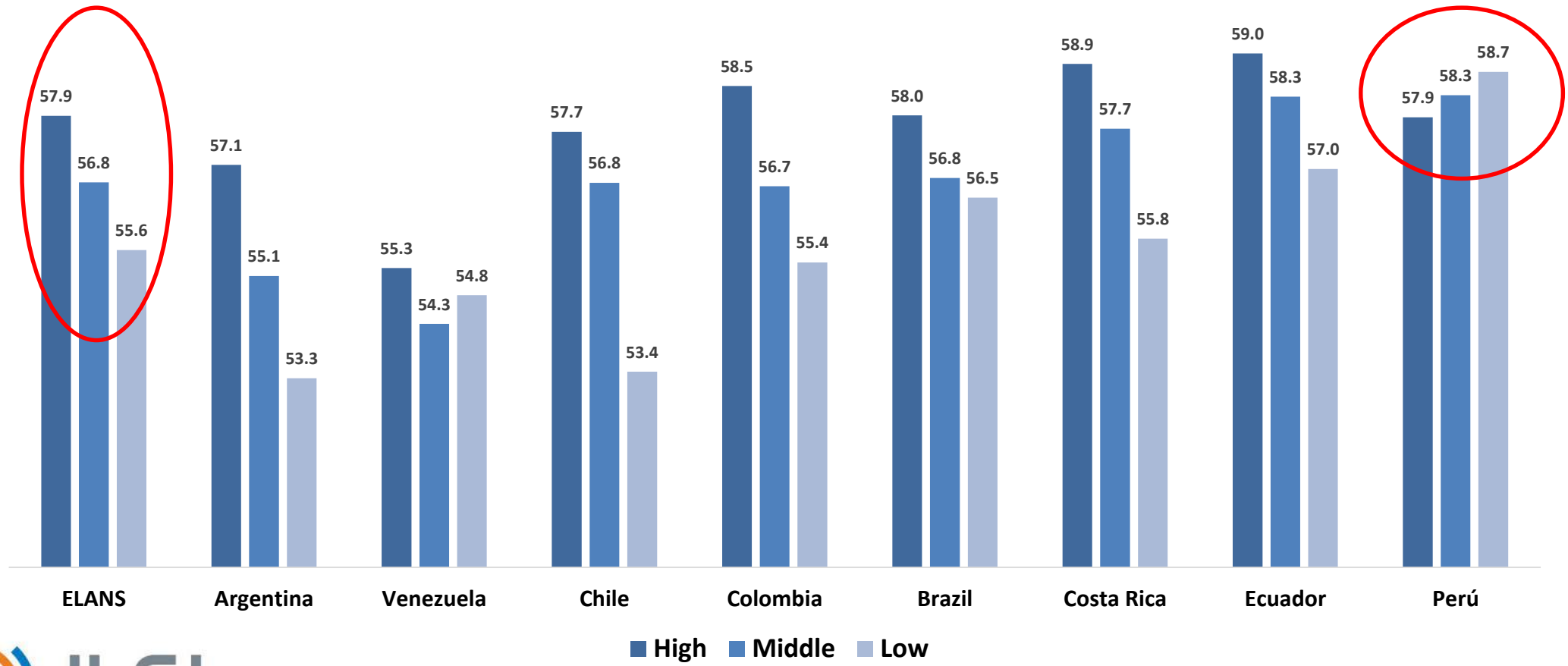


# Dietary quality

Based on relatively high consumption of healthy foods and low consumption of unhealthy foods



# Impact of socioeconomic status

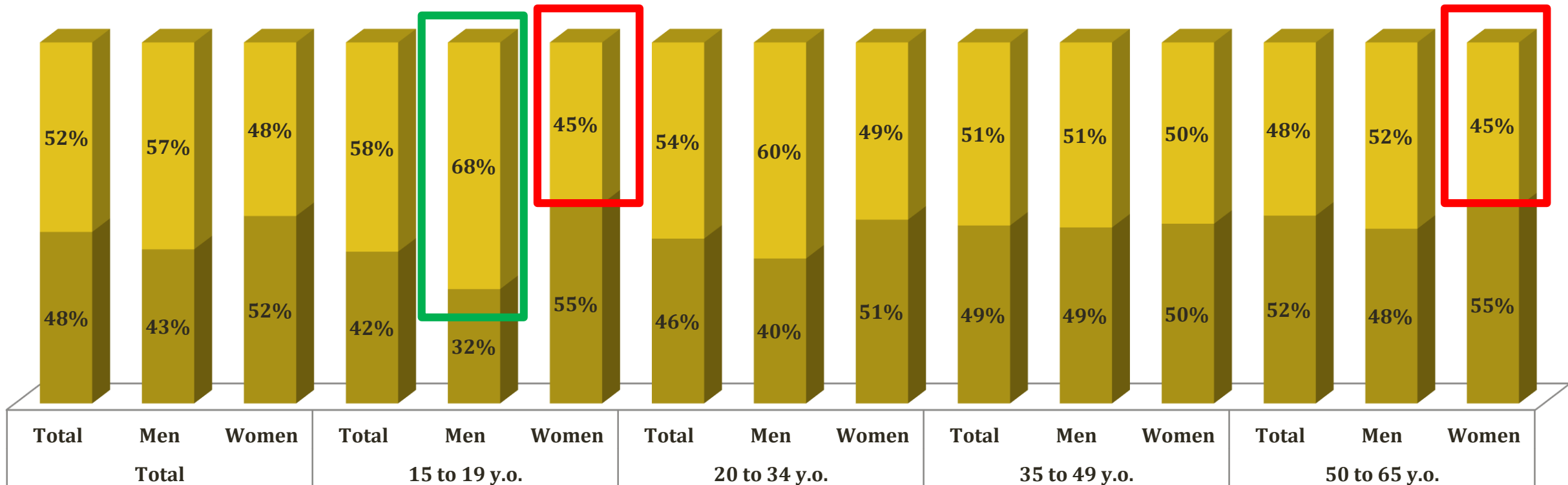


# Physical Activity

## Active vs Inactive (IPAQ by age and sex)

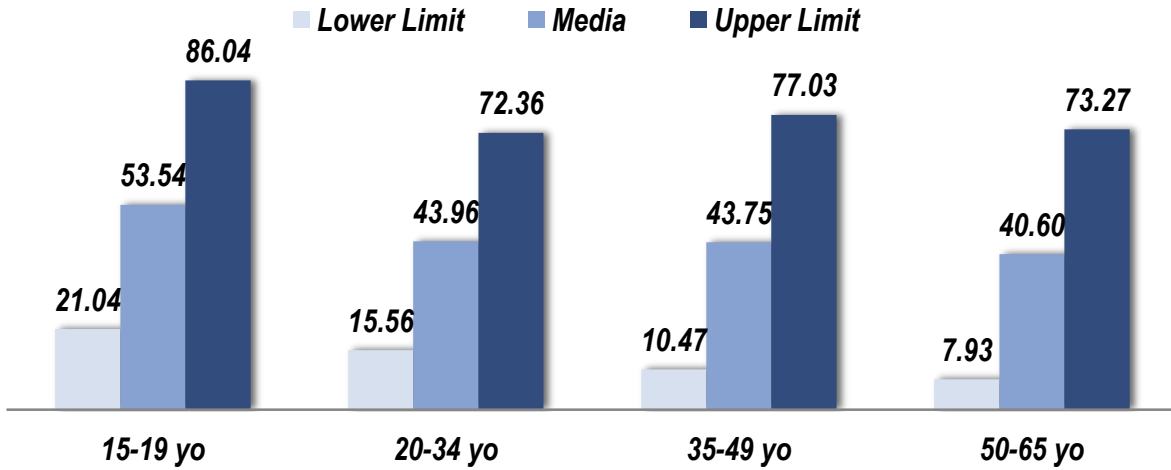
Physical Activity Level (IPAQ) by Age Group

■ Insuf.active ■ Active

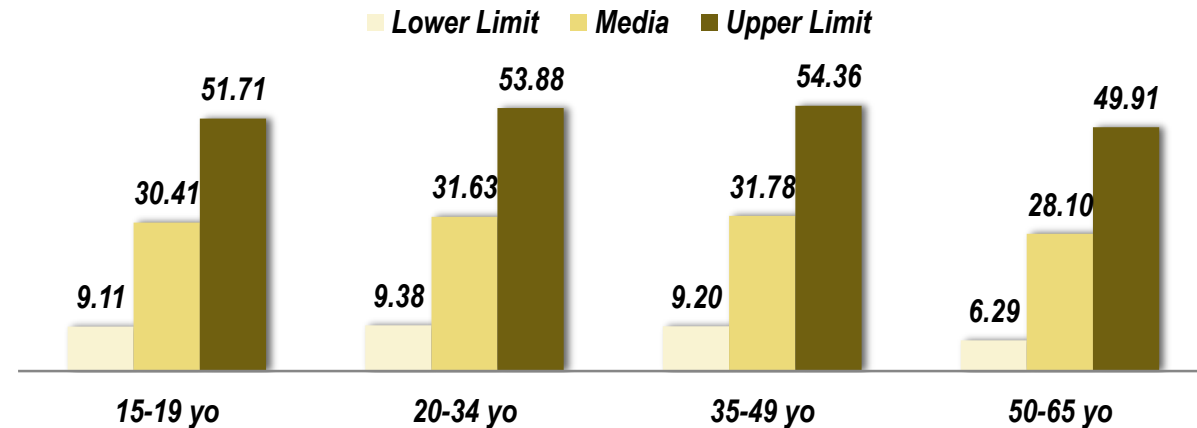


# Accelerometers: MVPA (Moderate vigorous Physical Activity)

Minutes of MVPA by Week for Men by Age Range  
ELANS Total Sample



Minutes of MVPA by Week for Women by Age Range  
ELANS Total Sample



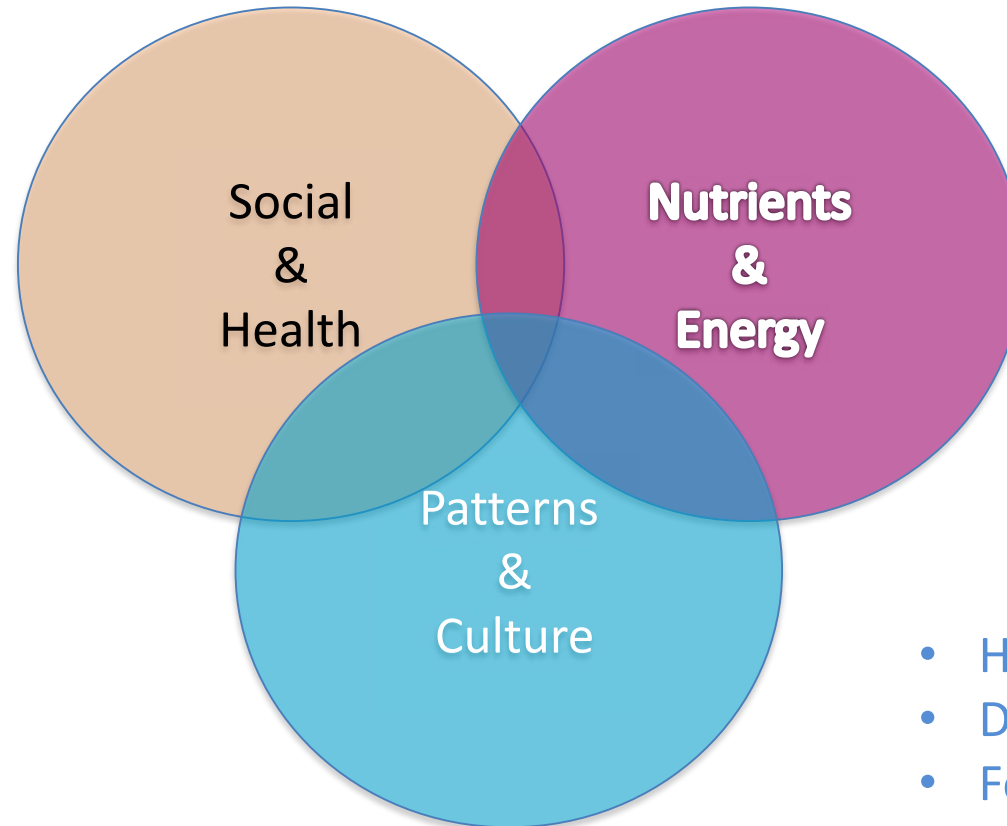


# In summary

- 34.4% are obese and 60% have excess weight, with the higher rate observed in Chile and the lower in Colombia.
- Mean energy intake varies among countries, sex and age group.
- Low consumption of fruits and vegetables and other sources of micronutrients and fiber.
- High prevalence of vitamin A, calcium and vitamin D deficiency.
- Low diet quality score, that seems not to be related to social income, or nutritional status.
- Almost half of the participants were insufficiently active specially among adolescents

# Other Approaches

- Individual associations with energy intake/expenditure:
  - (e.g.: gender, SEL, age, marital status, education)
- LA Costs of food supply
- Environmental and Social assoc. with weight and energy intake/expenditure:
  - (e.g.: income, violence and inequality)
- SEL, Gender or age diet associated behaviors
- Sleep time duration and obesity



- Alignment between nutrient and energy intake and dietary guidelines
- Misreporting of energy intake and associated factors
- Total added sugar consumption
- Sources of Nutrients

- HE I score Latam?
- Diet Quality Index
- Food Groups
- Food patterns
- Meals at home or outside
- Breakfast consumption
- Meal caloric density

**Mauro Fisberg, MD, PhD  
(Brasil) - Chair**



**Irina Kovalskys, MD, PhD  
(Argentina) - Chair**



## **Scientific Committee**

**Georgina Gómez Salas, Ms.  
(Costa Rica)- Co-Chair**



**Attilio Rigotti, MD,  
PhD (Chile)**



**Lilia Yadira Cortés Sanabria., ND.,  
MSc, PhD (Colombia)**



**Martha Cecilia Yépez García,  
Bch, MSc. (Ecuador)**



**Rossina Gabriella Pareja  
Torres, M.Sc. (Peru)**



**Marianella Herrera-Cuenca  
MD, DSc. (Venezuela)**



## Project manager

**Viviana Guajardo, Ms.**  
**(Argentina)**



**Ioná Zalcman Zimberg, PhD**  
**(Brasil)**



## External advisors

**Michael Pratt, MD, PhD**  
**(United States)**



**Luis A. Moreno, MD, PhD**  
**(Spain)**



**Berthold Koletzko MD, PhD**  
**(Germany)**



**Katherine L. Tucker, MD,  
PhD (United States)**



# Expert Advisors

## Accelerometry

**Claudia Alberico  
(Brasil)**



**Priscila Bezerra  
(Brasil)**



## Physical activity

**Gerson Luis de Moraes Ferrari  
(Brasil)**



## Statistical analysis

**Agatha Previdelli  
(Brasil)**



## NDS-R

**Regina Fisberg  
(Brasil)**



**Natasha França  
(Brasil)**



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