Nutritional Assessment

Dr. Lamis Aziz Hameed

Objectives:

- 1. Understanding how nutritional status can be assessed for the individual person and the population
- 2. Being familiar with the meaning of dietary surveys and how they can be conducted

Nutritional assessment Provides the information needed to determine how well a person's nutritional needs are being met (the amount of nutrients in the diet are compared with RDA)

Aims of nut. Assessment:-

- 1. To determine the magnitude and geographical distribution of malnutrition.
- 2. To discover and analyze factors that are responsible for malnutrition
- 3. To plan and put an effective measure not only for control & eradication of malnutrition but also for subsequent maintenance of good nutrition.

Nutritional assessment:

1- For an individual 2- For the community

Assessing nutritional status for an individual:

A) Historical information

Medical history

Drug history

Socioeconomic history

Diet history

Diet history:

A/provides a record of eating habits & food intake

B/can help identify possible nutritional imbalances and factors that affect food intake

C/provides the background for developing nutrition needs.

1/24- Hour Recall

it provides data for one day only & is commonly used in nutritional surveys to obtain estimates of the

typical food intakes for a population.

For individual, the assessor uses 24- hour recall to get an idea of general eating habits & meal times.

2/<u>Usual intake</u> – assessment of usual meal patterns & details of food intake.

- 3/<u>Food frequency checklist</u> a checklist of foods on which a person can record the frequency with which he or she eats different types of foods.
- **4/Food records** —a record of food intakes that is maintained over several days.
- **5/Observing food intake** direct observation of person's food intakes is possible in health care facilities such as hospitals or nursing homes.
- **B) Physical examination:** an assessor search for signs of nutrient deficiency or toxicity
- C) Anthropometric measurements:
- D) Biochemical tests (laboratory test):

Ex. Hemoglobin level, and biochemical tests for protein status such as serum albumin.

Anthropometric measurements

Are measurements of the physical characteristics of the body such as height and weight.

They serve 3 main purposes:

- 1.To evaluate the progress of growth in pregnant women, infants, children, and adolescents.
- 2. To detect under nutrition & over nutrition in all age groups.
- 3. To measure change in body composition over time

A) Measures of growth & development:

*Height * Weight * Head circumference

B) Measures of body fat & skeletal muscle mass:

Fat fold measures (triceps fat fold thickness), waist-to-hip ratio.

Mid-upper –arm –circumference (MUAC) provides information about skeletal muscle mass.

Measures of growth & development:

Head circumference is a useful predictor of brain growth in children under 2 years of age.

Height / Length and weight are the most common and useful measurements.

How to assess?

1/ anthropometric measurements taken on an individual are compared to the median of healthy reference population (specific sex & age)

2/ take measurements periodically and compare them with previous measurements to reveal changes in an individual's status.

- ■■ Growth monitoring- regular weighing of children and plotting the wt. on growth chart → early detection of any change in the wt. ▶ helps in early prevention of under nutrition
- -The nutritional indices of a child are taken to be assessed and compared with standard growth curves (weight for age, height for age, weight for height) & BMI.

→ This comparison is expressed as a percentage of median or the number of SDs from the median.

1. wt. for age:

child's wt. is compared with reference wt. value for his /her age.

Moderate Underweight (2SD) below ref. or < 80%

Severe Underweight (3SD) below ref. or < 70%

2. Wt. -for -ht:

child's wt. is compared with the international reference for a child of the same ht.

Moderate wasting (2SD) below ref. Or < 80%

Severe wasting (3SD) below ref. Or < 70%

3. <u>Ht. for age.</u>: Ht. of a child is compared with international reference ht. for a child of the same age.

Moderate Stunting (2SD) below ref. or < 90%

Severe Stunting (3SD) below ref. or < 85%

4. <u>Body Mass Index A child whose BMI is (2SD)</u> above the median is overweight A child whose BMI is (3SD) above the median is obese

For adults the used standards for nutrition

- 1. Body mass index (BMI)
- 2. Weight-for-height table

Nutritional assessment of the community:

- 1. The task is done by a team.
- 2. The purpose is to provide a basis for decision –makers for planning a nutritional program.

<u>A-Indirect</u>: different indices (IMR, NMR, Prevalence of diseases related to nutrition--- etc.

2- Direct (Dietary Survey): -

Objectives:

A-Diagnose the problem & determine its extent.

B-To identify groups at high risk i.e.: specific Age group.

C-To estimate the no. of people needing assistance.

D-To act as a base line to monitor the impact of intervention.

Dietary surveys could be divided into:

- 1. Family surveys: useful for determining the food consumed by different socioeconomic groups.
- 2. Individual surveys: could be done on selected age group, or on people in various occupations.
- 3. National surveys: monitor the nutritional intake of the public by collecting information of food consumption of household & selected individual surveys.