

# **WHO's Healthy Diet and Physical Activity Strategies to Prevent Cancer**

**Andreas Ullrich  
WHO Headquarters Geneva**

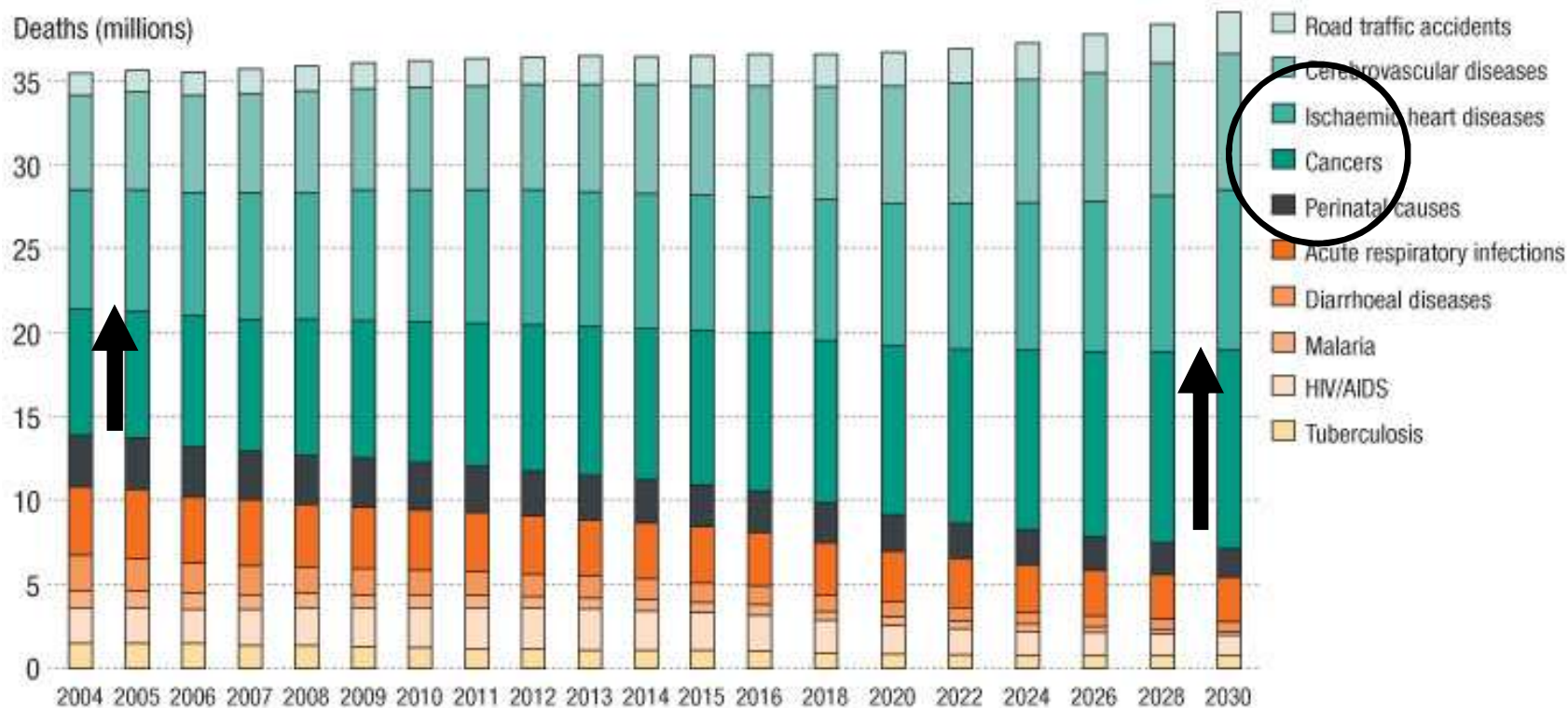
**ESMO Symposium on Cancer and Nutrition Zurich 20-21. March 2009**

# Overview

- **Cancer prevention and control framework**
- **Evidence for causes and actions**
- **Global strategy diet/ physical activity (DPAS)**
- **Implementation of DPAS**
- **Conclusions**

# Trend in global burden of cancer

GBD WHO, 2008



7,4 millones

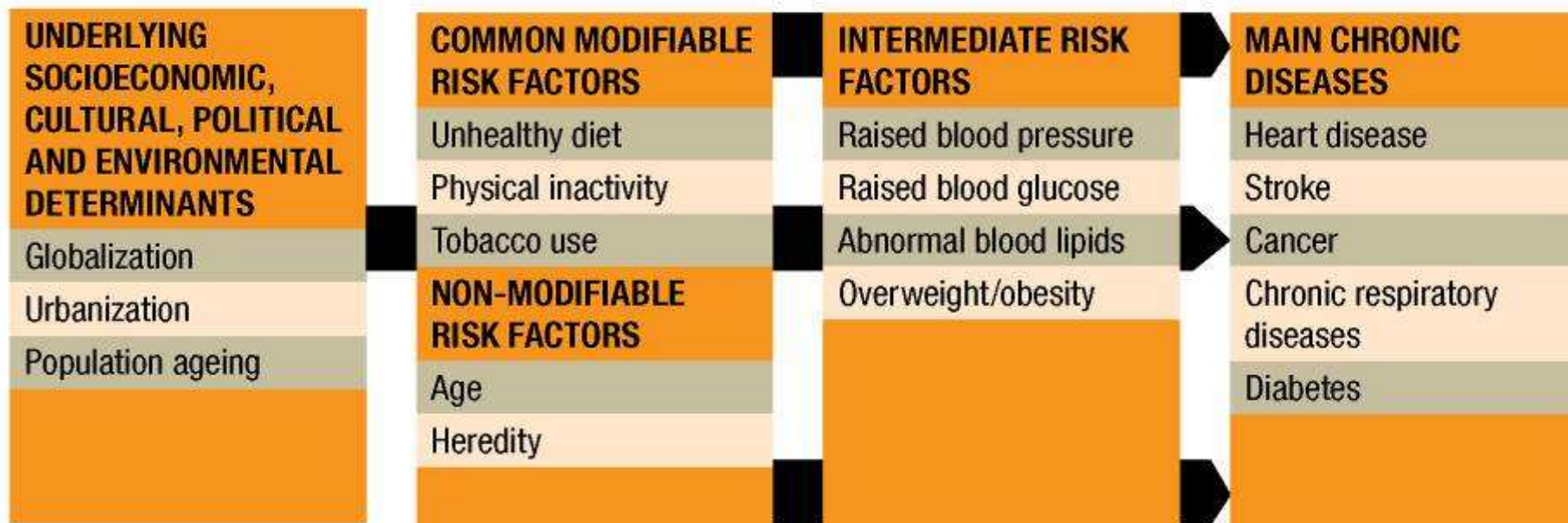
12 millones



World Health Organization

Chronic Diseases and Health Promotion – [www.who.int/chp/en](http://www.who.int/chp/en)

# Opportunities for Prevention and Control



## Additional specific causes of cancer:

- Infections HBV, HCV, HP
- Carcinogens, radiation

# Evidence: dietary risk factors for cancer

- **Overweight /Obesity** > breast, uterus, colorectal, pancreas, kidney cancer
- **Alcohol** > oral, oesophageal, laryngeal breast cancer
- **Dietary components**
  - red/processed meat > Colorectal cancer
  - Salt > stomach cancer
- **Contaminants:**
  - **Aflatoxines:** > HCC ( +HBV)

Source: WHO/FAO 2002, WCRF 2008



World Health  
Organization

Chronic Diseases and Health Promotion – [www.who.int/chp/en](http://www.who.int/chp/en)



# Evidence > WHO recommendations:

- **Maintain weight (BMI 18.5 – 25), avoid weight gain (in adulthood).**
- **Maintain regular physical activity (30 – 60 minutes/day).**
- **Alcohol: 2 units/day.**
- **At least 400g fruit and vegetables /day.**
- **Moderate consumption preserved meat.**

**WHO 2003, 2008**

# Evidence for action: setting approach

- **Example: work place**
- **Objective: NCD/cancer risk reduction**
- **Interventions: workplace health promotion programmes**
- **Results:**
  - **Increased physical activity**
  - **Body fat reduction**
  - **Reduced smoking incidence**
  - **Reduced sick days**

**Janer et al. 2002, Pelletier 2005,**



**World Health  
Organization**

Chronic Diseases and Health Promotion – [www.who.int/chp/en](http://www.who.int/chp/en)

# The Global Strategy on Diet and Physical Activity

- = Resolution of World Health Assembly 2004
- DPAS = set of policy options aimed at reducing obesity, unhealthy diet and physical inactivity
- Action targets: agriculture, food production and distribution, fiscal policies, regulation and legislation and urban design .
- The resolution "urges WHO Member States to implement DPAS through health and other sectors."



# Strategic objectives of DPAS:

- 
- Reduce population risks by public health actions.
  - Develop national policies and action plans.
  - Monitor and evaluate impact.

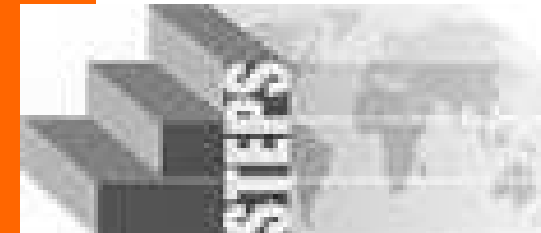
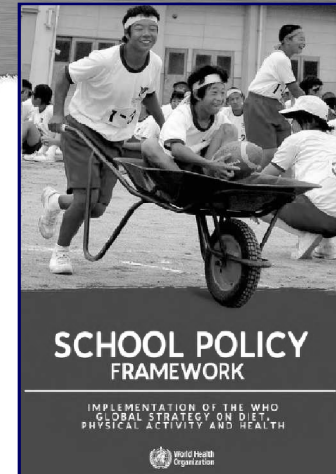
# DPAS implementation: health sector component

**"Prevention is a critical element of health services.." (DPAS, 2004)**

- **Health care: target group = patients/families**
- **Involvement of health professional bodies**
  - **Advocacy, raising public awareness**
  - **Influencing governmental policies**

# DPAS Activity Focus

- **Policy and Setting-based approach**
  - Prevention of NCDs at the Workplace
  - School Policy Framework
- **Monitoring and Evaluation**
  - A Framework to Monitor and Evaluate Implementation
  - STEPS – Surveillance System for NCD Policy Planning



# Conclusion

- **Solid evidence**
  - diet/ physical inactivity > cancer
  - Actions > reducing NCD/cancer risks
- **Global agreement about policies (WHA 2004)**
- **WHO and partners are implementing DPAS**
  - Normative work (guidelines)
  - Collaboration/negotiation with interest groups ( private sector involvement)
  - Monitoring
  - Advocacy (World Economic Forum)
  - > involvement of health sector and health professional bodies need to be further developed