



President's Message (Part 1) EFAD and Brexit: Business as Usual

The 24th of June will go down in history as the day we learned the UK voted to leave the European Union. This news sent shock waves around Europe and the world, **but** the islands known as the UK are not sailing off to North America or somewhere else. The UK remains part of the continent of Europe just like Switzerland, which is not part of the EU; we are all Europeans whatever happens.

When EFAD was established in 1978 it was clearly stated in our Articles that our members would be drawn from any European country. EFAD's borders and its membership are much wider than the political union of states in the EU. EFAD represents all European dietitians and according to Wikipedia there are 70 countries in Europe who are members of the UN!



The UK has announced its intention to divorce but has not yet signed the paperwork. So for the next 2 years at least it is still a member of the EU. It is far too early to even think about the movement of healthcare professionals including dietitians across Europe or the effects on universities. Switzerland has negotiated free movement across Europe for its citizens and this includes students, so maybe the UK will do the same.

So for EFAD we continue to value all our members (including Turkey and Israel who are not part of the EU) and their contribution to dietetics and dietitians in Europe. It is business as normal. There is no need to panic or leave committees or worry about acceptance of qualifications across Europe.

Let us keep focussed on our vision; EFAD, national dietetic associations (NDAs) and dietitians are recognised leaders in the field of dietetics and nutrition. We will continue to proactively initiate and grow partnerships in order to improve nutritional health, reduce socioeconomic health inequalities and contribute to economic prosperity.

To achieve our vision EFAD supports the highest quality of dietetic education, professional practice, research activity and partnership.



President's Message (Part 2)

Since our last newsletter I have been busy meeting with associations: in Sweden with the Administrative Dietitians, in Italy and through a virtual presentation I sent congratulations to the Hungarian Association on the occasion of their 25th anniversary. The EFAD Vice-President Annemeike van Ginkel went to Croatia to take part in a meeting to discuss the progress of their new association for dietitians. The organisation of Spanish dietetics is especially welcome in this issue explaining as it does the way that Spain has taken responsibility for a professional and evidenced-based profession. Congratulations to them for their dedication to establishing a quality mark for dietitians. It would be interesting to hear how other associations are building their quality agenda. The PEN initiative hosted by the British Dietetic Association is another quality mark.

EFAD was also represented at the Optimal Nutritional Care for All meeting (ONCA) in Poland and at the recent EC hosted 'think-tank' meeting to discuss personalised nutrition. It is a continued privilege to have this first-hand experience of the valued work and recognition of dietitians across Europe. As you will read in this newsletter, dietitians (including students) have more evidence of how we can continue to make our voice heard in the European Parliament and with ministers nationally.

I am also delighted to highlight the research currently taking place through initiatives such as IMPECD, (Improvement of Education and Competences in Dietetics) which sits alongside EFAD's work in this area by the Professional Practice Committee and our Education and Lifelong Learning Committee.

The summer holidays are fast approaching and I wish you a peaceful time. See you in Granada!

Anne

Anne de Looy, President, EFAD Professor of Dietetics, Plymouth University, England

Save the Date



www.efadconference.com



Obesity as a Disease: A Healthy Breakfast for MEPs

Nine MEPs have made a written declaration calling for the recognition of obesity as a disease by EU member states. The European Association for the Study of Obesity (EASO) supports this declaration. On 26 April, MEPs, their staff and other stakeholders attended a healthy breakfast at the Parliament where EASO presented four speakers (including me) to make clear the urgency of the obesity problem in Europe, the importance of early prevention and treatment, and why obesity should be declared a disease. The other speakers were:

- Roberto Bertollini, epidemiologist WHO European Region
- Nathalie Frampourt, President of EASO and paediatrician at Geneva University Hospital
- Vicky Mooney, member of the EASO Patient Council

The speakers spoke about the prevalence of obesity, the problems that are encountered in management and prevention, and their own experience. Afterwards a lively discussion took place: food labelling and the obesogenic environment were the main topics of the discussion. All present agreed that clear and easily understandable food labelling is essential to help the general public to make the right food choices.

The Proposed Next Steps Being Advocated at the Meeting Organised by EASO

All European countries need to convince their MEPs to sign the written declaration calling for obesity to be classified as a disease. Malta, who will hold the European Presidency from 1 July 2016 on, has made obesity a top priority. It is expected that voting will take place soon in the Parliament. Countries need to convince their MEPs to sign the written declaration before that date if action is to be taken.

Clearly this is an important consideration and dietitians are key to the debate and actions to be taken across European countries. Drawing on the evidence base and considering the outcomes and implications should all be key to any action. ESDN Obesity would like to hear your views or if you have contacted your MEP with your views.

Ellen Govers, ESDN Obesity



Our specialist dietitians are in the news and contributing to important debates across Europe. The EFAD Editorial Board welcomes responses to this debate about classifying obesity as a disease.



Public Health Issues and Creative Approaches to Engage Young People

On 21 April, I went to the European Parliament, to participate in the roundtable event 'Public Health Issues and Creative Approaches to Engage Young People'. Boys and Girls Plus Project organised the event http://boysandgirlsplus.eu Speakers included:

- Bart Staes, MEP (Greens/European Free Alliance) who welcomed us to the Parliament and introduced the Boys and Girls Plus Project.
- Peer van der Kreeft, who spoke more about the Boys and Girls Plus Project and their results so far.
- Dr Jacqueline Harding, who spoke about Tomorrow's Child (a specialised film production and media research company) and the influence of the media on children.



Soa Aids Nederland

Maga Aceves presented the final project: European Youth Tackling Obesity (EYTO) www.eyto.org.uk which ran from September 2013 until September 2015. The EU funded the project and the UK-based National Children's Bureau led the project with partners in Spain, Portugal and the Czech Republic. EYTO involved young people from disadvantaged communities in the development of their campaigns.

Erwin Fisser spoke about Soa Aids Nederland and the strategies they use in their campaigns to prevent sexually-transmitted infections amongst young people, eg using Facebook or featuring celebrities in short videos on social media to direct their fans to the Soa Aids website www.soaaids.nl/nl



EUROPEAN YOUTH TACKLING OBESITY

These campaigns promoted a healthy lifestyle (both healthy eating and physical activity) and as a result reduce obesity rates. They focused on disadvantaged young people ages 13 to 18. Obesity is a growing problem worldwide, especially in poorer areas where it is responsible for serious inequalities in areas such as health, education and broader life chances. Research has shown that there are not enough projects promoting a healthy lifestyle that are aimed at adolescents. By letting young people actively contribute ideas for campaigns, better results were achieved. After the presentations, some key points emerged from a general discussion:

- Many projects stop as soon as the financing ends, even though most of them are valuable and well functioning: implementation and sustainability are key to extending the life of a project.
- A holistic approach should be used in tackling health problems in young people, especially as the common problem of unhappiness at school can influence health outcomes.
- More money should go towards the prevention of health problems, rather than treatment.
- Meetings like this were very beneficial

I would like to thank ENDietS and EFAD for the opportunity to join this event.

Lore D'Helft **Dietetics Student, Belgium**

United Kingdom

Practice-Based Evidence in Nutrition (PEN)



The public trust dietitians because dietetic practice is evidenced-based. However, maintaining an accurate overview of the evidence-base in all areas of dietetic practice can be a challenge for dietitians. PEN is a global nutrition and dietetic resource, compiling the latest evidence on over 190 nutrition and dietetic-related topics (or 'Knowledge Pathways') into one handy online database. Launched in 2005, PEN provides dietitians with the evidence-base and helps to apply that evidence-base in a practical way through the use of tools and resources (such as national guidelines/recommendations & patient leaflets/booklets).

Why choose PEN?

- Unlike other research databases, PEN applies the concept of 'Knowledge Translation' and provides you with the evidence-base (through the 'Practice Questions', 'Practice Guidance Toolkit', 'Background' and 'Evidence Summary' sections) and helps you to apply that evidence in a practical way (through the 'Related Tools and Resources' and 'Practice Guidance Toolkit' sections).
- The PEN database covers a wealth of nutrition and dietetic-related topics, which is continually expanding.
- All of the evidence in PEN is graded so you always know the quality of the evidence behind a
 particular nutrition or dietetic-related topic. In 2015, PEN adopted the GRADE approach as used by
 the British Medical Journal, The National Institute for Health and Care Excellence and The Cochrane
 Library.
- Each 'Knowledge Pathway' is continuously reviewed as the evidence changes, ensuring you are kept as up-to-date as possible.
- All references cited in PEN link to the abstract or full text so you can easily locate the original journal article or research paper.
- PEN contains a number of useful features. For example, you can use the 'Sort By Country' to search for 'Related Tools and Resources' relevant to your country. You can add PEN content to your 'Favourites' this could be a particular 'Practice Question' or 'Background' section that you can save so you don't have to search again for the topic at a later date saving you time!
- There is full accessibility through your computer or mobile device at work, home or on the road.

How do I get access to PEN?

- You can try PEN free for 15 days before you sign up for an annual subscription; click here: www.pennutrition.com/index.aspx
- Dietitians who are part of a National Dietetic Association recognised by ICDA or EFAD get a discounted rate. Click here to sign up: www.pennutrition.com/signup.aspx
- Dietitians in Europe can join the BDA as an international member, which includes an annual subscription to PEN in addition to other benefits. Click here for more information: www.bda.uk.com/membership/categories/categories
- Higher Education Institutions can buy a site licence, which is recommended for classes of up to 30 students. The licence allows for up to five users at any one time. A site licence costs £1875 (+ VAT) and gives access to PEN for one year.

For more information, please visit the PEN pages on the BDA website www.bda.uk.com/pen/home



Sammie Gill
Policy Officer (Evidence-Based Practice)
BDA

Spain

The General Council of Dietitians-Nutritionists (GCDN) is Three Years Old



The dietetic profession in Spain is relatively new: the first students graduated just 25 years ago at the University of the Basque Country, where the studies were not even given official recognition. The path towards official and social recognition has been slow, laborious and arduous.

In Spain, there is no compulsory public official registry where professionals from different sectors can individually register their profession. Recognition is achieved through professional associations, which are not government agencies, but which have a structure and operation independent of the State Government and the Autonomous Communities. The Associations of Dietitians-Nutritionists, which are created by regional laws, regulate their own ethical codes, maintain good high standard of practice and decide their own working methods and protocols. In most European countries, professionals are required to register officially with a Government body in order to practise, but the organization of the dietetic profession in Spain is different.

One of the most important events in the history of the profession in Spain was the signing of the Pact of Barcelona. This saw the uniting of each of those Spanish Autonomous Communities who had an Association of Dietitians-Nutritionists and the creation of the GCDN. The General Council, which is regulated by a national law, was recognized as the official body responsible for the management, regulation and representation of the profession and its graduates, at a national and international level. It was also to act as interlocutor with the national authorities and to be principally responsible for the defence of the profession. In parallel with the GCDN, a second body was created to oversee all scientific, educational and informative activities in human nutrition and dietetics: the Foundation of Dietitians-Nutritionists (FEDN). This dual framework is taken from the Canadian-American model: the two bodies complement each other and strengthen the profession in its struggle for recognition.

Currently it is estimated that there are about 9,000 dietitian-nutritionist graduates in Spain. However, regulation of the profession is still in the early stages. There are hardly any public posts and there is no action from the government to protect citizens from unqualified health practitioners or malpractice in nutrition. At the moment, compulsory registration is even being questioned, which would leave the profession entirely defenceless. The mission of the GCDN is to fight for the rights of these professionals and give them voice.

It is important to emphasize that the dietitians-nutritionists of the Autonomous Communities that do not yet belong to GCDN (Andalusia, Catalonia and Madrid) may became direct members of FEDN and receive services from the GCDN, whereas those of the Autonomous Communities that do belong to GCDN (Galicia, Asturias, Cantabria, Basque Country, Castilla y Leon, Navarra, Aragon, Valencia, Balearic Islands, Castilla La Mancha, Murcia, La Rioja and Extremadura) are direct members of FEDN without paying a different fee. Therefore this ensures that all dietitians-nutritionists from Spain can be represented by the GCDN and receive services from the FEDN.

Spain

The Work of The Foundation of Dietitians-Nutritionists (FEDN)



The main work of FEDN focuses on the management of scientific knowledge in human nutrition and dietetics, eg:

- The Analysis Centre for Scientific Evidence
- The Scientific Committee of 60 dietitians-nutritionists who have obtained posts through a
 competitive examination. Its purpose is to work on the basis of scientific evidence and
 consensus to act as one voice of the profession in Spain and the GCDN
- The Spanish Journal of Human Nutrition and Dietetics
- Working Groups: Collective Restoration, Public Health & Community Nutrition, Cuisine & Gastronomy, Health & Food Safety, Food & Culture, School of Dietetics Practice
- Specialization Groups: Nutrition & Dietetics in Physical Activity & Sport, Clinical Nutrition, Nutrition in Cancer, Nutrition in Chronic Kidney Disease, Nutrition in Geriatrics & Gerontology, Nutrition in Cystic Fibrosis and Projects.

FEDN is presently organizing the 17th International Congress of ICDA in Granada in September 2016 www.icdgranada2016.com and will organize the AIBAN Latin American Congress in Pamplona in July 2019.

FEDN is responsible for providing tools for dietitians-nutritionists to allow them to develop their professional practice at the highest level. For this purpose they count on the following:

- The Commission for Lifelong Training
- The online Easydiet software, which was designed for the dietetic management for dietitians-nutritionists
- The Congress Organization Committee
- Bulletins with food industry information for professionals

In 2014, FEDN and GCDN began two important projects for dietitians-nutritionists and for the general public:

- The Dietitian-Nutritionist International Day (24 November) with the aim not only of promoting the profile of dietitians-nutritionists, but also of addressing highly controversial issues related to food and the most prevalent diseases, and providing rigorous materials for professionals and citizens www.diamundialdietistanutricionista.org
- The NGO AlimentaAcción, www.alimentacion.org to promote cooperation and development in nutrition via our profession and generate knowledge about the subject.

FEDN has relationships with the food industry and the companies in this sector. For this reason, it has created a Technical Advisory Committee comprising 45 dietitians-nutritionists from all Spain, whose main tasks are to monitor and approve the signing of agreements between FEDN and third parties, ensuring independence and transparency.

Austria

Training on Virtual Patients for Dietitians in Europe: IMPECD develops innovative learning concept for dietetics



What people eat may have a significant impact on cardiovascular disease, diabetes and cancer. With nutritional therapy, dietitians make a valuable contribution to the preservation of health. However, the approaches to diagnosis and therapy in dietetics differ from country to country. The EU project IMPECD (Improvement of Education and Competences in Dietetics) is therefore developing uniform standards in the form of a freely accessible online course. The training will use 'virtual' patients. This innovative learning opportunity promotes quality in training of dietetic students and the dietetic profession as well as international exchange.

Dietetics is a young discipline in European universities. The IMPECD project will contribute to the discussion and development of a Europe-wide uniform basis for procedures and working methods in dietetics. This would enhance exchange and discussion and thus the quality of dietetic care as well as support and promote practical work with patients

European Cooperation on Virtual Clinical Case Studies

St. Pölten University of Applied Sciences Together with universities in Antwerp (B), Fulda (D), Groningen (NL) and Neubrandenburg (D) ten virtual clinical case studies are being developed based on real cases. The project will design a uniform process model for practical work and thereby establish a foundation for improved nutrition therapy in Europe. The uniform process model to be developed will also facilitate international exchange in the future, foster the implementation of international research projects, the comparison of project and therapy results, the choice of therapies and the cross-border mobility of professionals.

Lifelong Learning Through Free Online Course

For training with case studies, the Massive Open Online Course (MOOC) is being developed as part of the IMPECD project. MOOC will be freely accessible for universities after the completion of the project. As a contribution to lifelong learning, MOOC will also be made available for dietitians who have already completed their training. St. Pölten University of Applied Sciences supports the scientific project team didactically and technically in developing the online course.



The IMPECD project is financed by the European Union via the program "Erasmus + Strategic Partnership for Higher Education" and runs until September 2018.

For more information: https://impecd.fhstp.ac.at



Alexandra Kolm
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Students meet at the ENDietS Conference during the 17th International Congress of Dietetics!

The European Network of Dietetic Students (ENDietS) welcomes international dietetic students to the ENDietS Conference, which will be held on 6th September 2016 at the Palace of Congresses of Granada, in Spain.

Get the chance to meet the ENDietS board team and interact with students from all over the world one day before the 17th International Congress of Dietetics in Granada. ENDietS will be present to provide the students with special lectures and workshops.

Moreover, the ENDietS board team invites the students to join the ENDietS General Meeting at the same day. This is a great opportunity to get in touch with the board members and learn more about the activities of our students network. You can candidate for the board team and become a new "anchor" in ENDietS.

Note that you have the chance to join the ENDietS Conference, there are a few places left. The reduced student fee is 204€ and includes participation to both the ENDietS Conference (6 September 2016) and the 17th International Congress of Dietetics (7-10 September 2016).

Register now on: www.icdgranada2016.com/registrationPanel.asp

View the scientific program on: www.icdgranada2016.com/provisionnalProgram.asp

Get informed about ENDietS on: www.efad.org/student

We hope to see you in Granada!

Evangelia Tzorovili Conference Anchor - European Network of Dietetic Students Student - School of Heath Sciences and Education, Harokopio University, Greece



ISPOR NUTRITION ECONOMICS SPECIAL INTEREST GROUP

Measuring the Added Value Provided by Dietitians

Healthcare systems in Europe are facing challenges such as demographic change (aging, migration) and rising costs. In order to keep healthcare affordable, choices have to be made and it is therefore important to demonstrate the economic value of particular interventions, but also the economic value of disciplines such as dietetics that use health economics (HE) data to inform these choices.

This raises the fundamental question: how do we allocate limited health care resources when faced with unlimited wants in order to achieve the maximum health benefit? One of the ways to answer this question is by using an economic evaluation of alternative courses of action in terms of their costs and consequences. Such an evaluation is commonly called cost-benefit analysis (or sometimes cost-effectiveness or cost-utility). The analysis typically looks at the extra costs needed to achieve one extra unit of clinical outcome expressed as a ratio between the two. The cost-effectiveness ratio of a certain health care program can then be compared with the ratio found in other programs. This will show whether or not the program is achieving the maximum incremental (marginal) health benefit for a fixed amount of resources (costs).

For pharmaceuticals and other health technologies, including devices, it has become common practice to show their added value using HE data. Given the increasing pressure on policy makers and health care providers to obtain as much health benefit as possible within a limited budget, cost-effectiveness analysis is increasingly important. The time has now come for dietitians/nutritionists to demonstrate *their added value* within a complete patient treatment plan, in order to be a serious player in the era of competitive funding in health care, not just at the government level, but also at the institutional and patient level. There is already some HE data available that shows the added value of dietitians/nutritionists in their use of nutrition interventions. Although the general methods for performing HE evaluations can also be applied to (medical) nutrition, the specific characteristics of nutrition need special attention. Therefore a new area within the field of health economics has been developed: **Nutrition Economics**, represented by two international special interest groups founded in 2014:

- Special Interest Group Nutrition Economics within ISPOR (International Society for Pharmacoeconomics and Outcomes Research)
- Interest Group INPHORM (Impact of Nutrition on Public Health Outcomes Research & Measurement) within the HTAi organization (Health Technology Assessment international) www.htai.org/interest-groups/impact-of-public-health-interventions.html

These groups aim to develop a systematic approach in the field of nutrition outcomes research to assess the clinical, economic and quality of life outcomes on patient health for researchers and health care decision makers and in preventive nutrition interventions and daily food habits as part of lifestyle in the general (at risk) population, thus covering the total nutrition economics field.



Dr Karen Freijer CAPHRI, Maastricht University, The Netherlands Chair ISPOR Nutrition Economics SIG www.ispor.org/sigs/NutritionEconomics.aspx

Save the Date



Deadline for submissions for the next Newsletter: 31 August 2016 to: editor@efad.org

See Editorial Policy and Guidelines for Authors on the next page

www.efad.org
European Dietitians

Editorial Policy

The EFAD Editorial Board comprises the Honorary Vice-President, the Secretary General and one member of the Executive, with assistance from the non-executive Editor. The Board will decide the content of each Newsletter and their decision is final. Articles should reflect EFAD's core values: fairness, openness, non-discrimination, collaboration and independence. The Editorial Board welcomes suggestions from members for improving and developing the Newsletter. In order to reflect EFAD's mission statement, articles for the Newsletter should always refer to 'dietitians' or 'dietetics' in the text.

Guidelines for Authors

- Please read previous editions of the Newsletter available at: www.efad.org/everyone/3147/5/0/32
- Your article should be in English and emailed to me, Terry Hyde: editor@efad.org
- Your article should be about 500 words (2,500 characters with spaces), but can be up to 1000 words if it is particularly important.
- Please send your own photographs or ones that are copyright-free or free-to-use for noncommercial purposes.

Who is the audience?

This is the first and most important question that any editor or author must answer before they start work. I will edit all articles to meet the needs of a very wide audience: undergraduate students, dietitians, academics, Ministers of Health and senior figures at WHO European Region. The first language of most of our readers will not be English. Therefore, I will also edit to ensure that the writing is concise, the meaning is clear and the language is free of bias. I will use **plain English, modern English usage** and **open punctuation**.

What is plain English?

Some of the principles of plain English are:

- · use short words rather than long words
- write in short sentences rather than long ones
- use the active verb rather than the passive, eg 'I edit the Newsletter" not "The Newsletter is edited by me'
- use lists where possible
- avoid jargon, acronyms and abbreviations

In science and education, the last point is the most difficult to follow. All of our readers will know what EFAD and EU and UN means (and probably WHO), but how many will know what FNAP means? For more information on plain English, go to www.plainenglish.co.uk

What is modern English usage?

English is a living language in constant change; in particular it absorbs words from other languages and treats them as its own. New words arrive every day and others drop out of use. Existing words change their meanings or develop extra meanings. A few years ago, the only thing that could be stored in a **cloud** was water vapour, but now.... Spellings and constructions also change. So, in modern English usage the word 'lifelong' is written as one word (no space, no hyphen); similarly with the words 'online' and 'website'. Part of my job is to reflect these changes in usage and spelling etc. For more information on modern English usage, see Burchfield RW (2004) Fowler's Modern English Usage 3rd Ed Re-revised OUP Oxford.

What is Open Punctuation?

Open punctuation reduces the number of keystrokes needed to type a document. It does this by removing unnecessary punctuation and capital letters. So:

Ph.D.
$$\rightarrow$$
 PhD B.Sc. \rightarrow BSc e.g. \rightarrow eg Dr. \rightarrow Dr

..Doctors, Dietitians and Physiotherapists... → ...doctors, dietitians and physiotherapists...