Lifestyle Food Dimensions

Lifestyle foods can be defined by coupling widely available, affordable and tasty foods during the lifespan of people to enhance nutrition, general well-being and promote optimal health.

by Henk Hoogenkamp

Besides the influences of human genetic precondition that also regulates energy-efficiency, there are important changes occurring in the lifestyle of consumers in modern socio-cultural, demographic and occupational or professional settings. What has changed enormously in the past few decades are the different ways in which people consume food. In particular, there is an unmistakable trend towards food being consumed in a liquid form, with solid food being manipulated or modified. For example you can think of liquified vegetables, fruits, breakfast cereals and candy. Food out of a bottle might be convenient and fast, but there is also a hypothesis that the satiety of liquid food is significantly less than that of solid food.

Another major change in food intake is the way people eat food. The enormous popularity of fast food has gradually moved people away from eating meals with a spoon, fork and knife. The traditional way of eating meals with utensils is rapidly replaced by consuming handheld foods such as wraps, pizzas, burgers, fries, pies and the like. These handheld foods often contain high amounts of hidden fat, and many sources of hidden carbohydrates – but good tasting empty calories.

As such it becomes true that portion distortion magnifies eating handheld foods and snacks which also significantly invites to in between meal snacking and unneeded calorie intake.

Lifestyle Adjustments

An increasing number of children are skipping meals and replacing them with snacks. For many the day does not start with breakfast, but instead by eating while on the way to school. Snacking can be considered a form of malnutrition and if children are skipping major meals with a higher nutrient content, it can affect their ability to learn, including the development of the body to its full potential. It can also lead to behavioral problems. Even though during times of recession or other forms of setbacks, families have increasingly returned to eating at home, there remains a large group of people who have substituted the all-important dinner with snacking. Throughout the various cycles of life, people have different needs and food requirements, not only as distinct nutritional and dietary needs, but also to reflect group or individual health status, environment and social prestige. For example, formulating lifestyle foods, which cater to the young and energetic people, is crucial. These consumers want to feel that they are engaging in healthy practices through consumption and in a way that differs from other groups. Therefore, foods and beverages targeting this market must emphasize highly scientific benefits rather than adopting a “suitable-for-all” ethos and mainly serve as a building block in leading a healthier lifestyle.

Targeted Groups

Innovation is the lifeblood of lifestyle and no doubt foods will be increasingly segmented for targeted age groups; for the region from the region. Besides time-tested core traditional food, some of which in original unprocessed form, nutrition scientists and processing technologists are working on programs involving clinical studies in human nutrition as well as packaging development.

The efforts to constantly innovate and improve food by using novel ingredient processing techniques and widely used analytical test methods have resulted in significant gains. As such, foods will increasingly be fine-tuned and made available in forms and shapes containing nutrient and ingredient blends that meet special dietary needs required for active physical performance, bones, brains, eyes and immune systems.

Top Positioning of New “Active Health” Launches (West Europe, Jan-Apr 2011)
Health & Wellness

Social Health Obesity

The so-called social health obesity that increasingly affects not only mother and child, but also requires major changes in the way hospitals need to adapt and cope with growing healthcare issues. In the US, about one in five women is obese when they become pregnant, i.e. Body Mass Index (BMI >30). One of the major drawbacks for obese pregnancy is a record level of Caesarean sections and more birth defects and deaths for mothers and babies. Babies born to obese women are about three times as likely to die within the first month of birth, and obese women are nearly twice as likely to have a still birth. Obese women are also more likely to have high blood pressure, diabetes T2, anesthesia complications, hemorrhage, blood clots and strokes during pregnancy and childbirth. Even simple routine care like finding a vein to draw blood can be more difficult through thick layers of fatty tissue, not to mention difficulties using ultrasound technology when the three dimensional images of the fetus is obscured by excess fat.

Taste and flavor is and will always remain the primary criterion for food and beverages. It is considered the principle requirement for consumer acceptance. Being healthy in most cases is synonymous with being physically mobile and active well into old age.

Metabolic Syndrome

Metabolic syndrome is a cluster of disorders that often don’t spark any obvious symptoms. Frequently this syndrome is associated with years of overeating but besides adding weight, slow physical changes remain hidden and go undiagnosed until it is too late. A very simple and easy test is to measure the waist circumference: for men 101cm (40 inch) and women 91cm (36 inch). This test is not a diagnosis, but serves only as an indication of abdominal obesity that should be monitored and possibly addressed medically.

Especially the visceral belly fat deep under the abdominal muscles contains a more toxic type of fat than found in other areas of the body including subcutaneous fat. These toxic fats release substances that cause atherosclerosis or plaque build up in arteries. Abdominal obesity combined with chronic inflammation often causes the body to become insensitive to insulin. At least, that for now is the most likely explanation.

Stress and obesity are closely related. The stress hormone cortisol appears to trigger weight gain, particularly visceral fat in the belly region. Especially abdominal obesity, an apple-shaped body with a wide waist-line and villains such as elevated triglyceride levels, high blood pressure or excessive blood clotting can play havoc in blood vessel health. Stress hormones and insulin also triggers cravings such as indulging or uncontrollable intake high-carb and/or high-fat foods. Exercise is probably the best stress-buster because physical activities stimulate the brain’s production of endorphins – the neurotransmitters responsible for the indefinable runners’ high.

To reduce or prevent metabolic syndrome is a matter of making lifestyle changes. For starters, losing weight on a permanent basis while cutting down on fat and increasing consumption of fiber-rich foods, such as rice bran formulated products, are an important tool to proactively engage in effective and long lasting diet management.

Sarcopenia & Longevity

The formula to longevity is to keep living! Today there are a rapidly growing number of people who are outliving age expectations. These older seniors are healthier, better educated, socially active and diverse than ever before. Now that the Baby
Boomers are on the threshold of retirement, it is good to put a number on this group. For the US that means the number of seniors of 85 and older is projected to increase to 20 million by 2050, of which some 85,000 people are Centarians. Advances in medicine, greater emphasis on preventive care, and genetics all play a role in explaining longevity. Probably the most important aspect of getting old healthy is to keep the brain active. Creativity, healthy eating and exercise and contentment ideally need to be harmonized and that often translates into maintaining a full daily schedule of activities.

Age-related loss of muscle mass is a major reason that the elderly lose mobility and cannot live independently. The Greek termed this condition “sarcopenia.” Muscle weakening or withering can be significant: an 80 year-old might have 30 percent less muscle mass than a 20-year-old. Not to mention strength that declines even more than muscle mass. Weight lifting for 60-year-old men is some 30 percent lower than for 30-year-olds; for women the decline is 50 percent. In a way, sarcopenia follows on the heels of osteoporosis and the aging population who want to remain young as long as possible. Besides considerable savings on healthcare costs, a pro-active lifestyle and a nutrient-rich diet can be the corner stone of growing old healthy. The same endorsement will occur for food segments that target special need requirements such as people with multiple food allergies, gastrointestinal impairment, and metabolic diseases to support growth, health and wellness for people of all ages. In other words, “build when young, and maintain later in life.” The nutritional paradigms will require a different dimension and change away from calories towards, for example, healthy brain growth to optimizing mental health (i.e. omega 3 and 6) or cranberry support of urinary health for women (proanthocyanidins).

**Aging Challenge**

Healthcare is an important issue in growing populations. For example, Asia is the largest and fastest growing market for both baby food and geriatric foods. Aging populations around the world present an extra challenge for segmented lifestyle foods to address distinct dietary needs of people with serious health conditions like diabetes T2, cancer, lung disease and kidney disease.

These challenges will be formidable if one considers that by 2050 the number of people aged 60 years or older will triple to two billion. Two thirds of this population will reside in Asia. While there will be added pressure on healthcare costs, there will also be an increasing emphasis on lifestyle health, wellness and proper nutrition.}

There is also empirical evidence that as people age; they have the tendency to eat less protein foods. Mobility is a great gift and should be maintained as long as possible. Besides considerable savings on healthcare costs, a proactive lifestyle and a nutrient-rich diet can be the cornerstone of growing old healthy. The same endorsement will occur for food segments that target special need requirements such as people with multiple food allergies, gastrointestinal impairment, and metabolic diseases to support growth, health and wellness for people of all ages. In other words, “build when young, and maintain later in life.” The nutritional paradigms will require a different dimension and change away from calories towards, for example, healthy brain growth to optimizing mental health (i.e., omega 3 and 6) or cranberry support of urinary health for women (proanthocyanidins).