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The ALIMASSENS Collaborative Project

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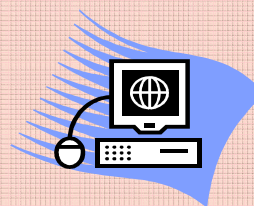


INTRODUCTION

The proportion of elderly individuals in industrialized countries is increasing along with the prevalence of chronic diseases, including obesity. We focused on nutrition, being a modifiable health behavior, by providing up-to-date information about dietary patterns (DP) and the corresponding sociodemographic correlates among the elderly.

METHODS

- **NutriNet-Santé e-cohort**
- **N= 6 686** older adults living in France (55.3% women)
- Mean age = **68.9 y**
- Dietary assessment via 3 Web-based **24-h dietary records**
- 22 food/beverage groups → extracted DP via factor analysis
- Sex-specific multivariable linear regression models



RESULTS

- **3 DP extracted: Healthy, Western, and Traditional**
- Healthy DP - fruit, vegetables, grains, nuts, fish, vegetable oils, etc. - positively associated with education and living alone, being former smoker (women), and negatively associated with being overweight, current smoker (men), age 75+ y, having hypertension, and obesity (women);
- Western DP - meat, appetizers, cheese, alcohol - positively associated with BMI (men) and being former/current smoker; negatively associated with age 75+ y (women) and living alone;
- Traditional DP - bread, potatoes, milk, vegetables, butter, stock - positively associated with age and negatively associated with being a former/current smoker, education (men), and residing in urban/semi-urban area.



CONCLUSION

- The healthy DP, rich in fruit, vegetables, whole grain products, vegetable oils, nuts, and fish without being low-fat, explained largest amount of variance in intake.
- Future studies could investigate additional correlates of DP, such as dental status and sensory capacities.
- Global-scale monitoring of dietary practices is critical for the development of well-targeted public health efforts aimed at reducing the incidence of noncommunicable diseases including obesity.