



The Role of Protein for Health

CSIRO Proteins for Food and Health Seminar Series

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www.csiro.au

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Lessons from longevity hotspots



- Protein intakes vary 10-25% of energy requirements
- One size does not fit all regarding effective strategies for management of health and wellbeing
- There is a need for personalized solutions!



Key functions of dietary protein

- Adequate protein intake is vital for building and repairing structural component of cells and tissues
 - Bone
 - Muscle
 - Antibodies
 - Enzymes
 - Hormone messengers
 - Transport & storage
- Excess protein is stored as body fat



Current protein intakes

TABLE 3. AVERAGE MEAL TIME PROTEIN DISTRIBUTION OF AUSTRALIAN MEN AND WOMEN

GENDER	AGE	BREAKFAST	LUNCH	DINNER	OTHER	TOTAL
Females	14-18	11.5	18.3	32.1	14.6	76.5
	19-70	11.2	20.6	34.1	12.8	78.7
	71+	11.2	20.7	30.5	9.2	71.5
Males	14-18	13.1	23.7	43.1	21.3	101.2
	19-70	15.7	27.7	44.6	19.0	107.0
	71+	15.4	23.6	34.4	9.2	82.6

Noakes, M. (2018) Protein Balance: New Concepts for Protein in Weight Management; CSIRO, Australia.



Current daily protein recommendations

Age	EAR	RDI
Men		
19-30 yr	52 g/day (0.68 g/kg)	64 g/day (0.84 g/kg)
31-50 yr	52 g/day (0.68 g/kg)	64 g/day (0.84 g/kg)
51-70 yr	52 g/day (0.68 g/kg)	64 g/day (0.84 g/kg)
>70 yr	65 g/day (0.86 g/kg)	81g/day (1.07 g/kg)
Women		
19-30 yr	37 g/day (0.60 g/kg)	46 g/day (0.75 g/kg)
31-50 yr	37 g/day (0.60 g/kg)	46 g/day (0.75 g/kg)
51-70 yr	37 g/day (0.60 g/kg)	46 g/day (0.75 g/kg)
>70 yr	46 g/day (0.75 g/kg)	57 g/day (0.94 g/kg)



Guidelines may not optimal for many

Protein intakes need to be personalised:

- Age
- Gender
- Actual body weight
- Physical activity
- General health/medications
- Weight loss

Female
71 kg
85-114 g/protein/day

1.1-1.6 g/kg/day for weight loss

Male
86 kg
103-138 g/protein/day
1.2-1.6 g/kg/day for weight loss



Evidence of health benefits of increased protein



Who benefits most from > 0.8 g/kg/day

Overweight/Obese aiming to reduce weight, optimise body composition, maintain strength/function & reduce disease

For Healthy Ageing: Individuals fighting sarcopenia/age related muscle loss and/or hospitalisation

People choosing vegetarian and mainly plant based diets



Key physiological effects of higher protein intakes for weight loss

- Reduces body weight, particularly fat mass.
- Retains fat-free mass during weight loss/ promotes accretion of lean mass during weight maintenance
- Retains bone mass during weight loss
- Increases fullness and reduces hunger and energy intake, at least in people aged ~ < 65 years but not > 65 years
- Curbs cravings – namely at breakfast
- Increases thermogenesis and blunts the fall in resting energy expenditure during weight loss
- Increases strength when combined with resistance exercise

Wycherley T P et al. AJCN 2012; Leidey H et al. AJCN 2015;
Paddon-Jones AJCN 2015; Geizenaar C et al.



For Overweight/Obese Adults (~20 – 62 years)

Nutrition, Metabolism & Cardiovascular Diseases (2014) 24, 224–235



Nutrition, Metabolism & Cardiovascular Diseases

journal homepage: www.elsevier.com/locate/nmcd

SYSTEMATIC REVIEW AND META-ANALYSIS

Long term weight maintenance after advice to consume low carbohydrate, higher protein diets – A systematic review and meta analysis

P.M. Clifton ^{a,*}, D. Condo ^{a,b}, J.B. Keogh ^a

- 30% calorie restricted diets for > 1 yr
- ~1.4 g of Protein/ kg/d vs ~1 g of Protein/kg/d
 - 0.44 kg > reduction in fat mass
 - FFM preserved
 - 0.17 mmol/L > reduction in triglycerides
 - 0.22 mU/L > reduction in insulin
 - = improvements in lipids, blood pressure, glucose control, inflammation

Clifton PM et al. 2013



For Overweight/Obese Adults –European Diogenes Study

- Largest study comparing LP vs HP diets for weight-loss maintenance after 1 year of weight loss.
 - 938 adults.
 - the parents completed an initial 8-week energy restriction period.
- High protein low glycemic index vs Low protein diet
 - less weight regain (mean difference of -0.93 kg)
 - improved many metabolic risk factors

Larsen et al., 2010a; Larsen et al., 2010b; Damsgaard et al., 2013; Papadaki et al., 2014.



Adults > ~60 plus years need even more



Special Article

Evidence-Based Recommendations for Optimal Dietary Protein Intake in Older People: A Position Paper From the PROT-AGE Study Group

Jürgen Bauer MD ^{a,*}, Gianni Biolo MD, PhD ^b, Tommy Cederholm MD, PhD ^c, Matteo Cesari MD, PhD ^d, Alfonso J. Cruz-Jentoft MD ^e, John E. Morley MD, BCf, Stuart Phillips PhD ^f, Cornel Sieber MD, PhD ^g, Peter Stelte MD, PhD ^h, Daniel Teta MD, PhD ⁱ, Renuka Visvanathan MBBS, PhD ^j, Elena Volpi MD, PhD ^k, Yves Boirie MD, PhD ^m

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Key Recommendations

- ~1-1.4 g/kg of BW/ day for **healthy**
- ~1.2-1.6 g/kg BW/day **for pre-frail/frail**
- ~0.8 g/kg BW/day **for those with GFR < 30 ml/min**



Increased Protein Found to Prevent

- Preserve muscle protein synthesis after hospitalisation
- Increase lean mass, particularly when combined with resistance exercise
- Improve some aspects of physical function (i.e. namely grip and gait speed) & quality of life

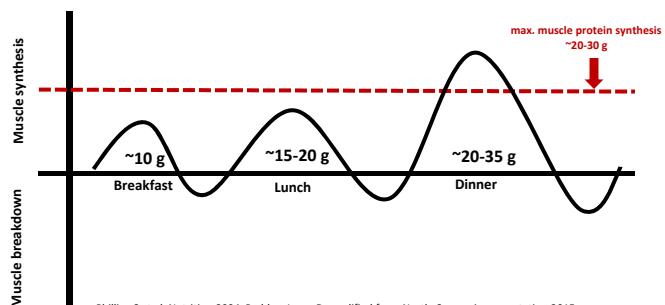


Does timing of protein matter?



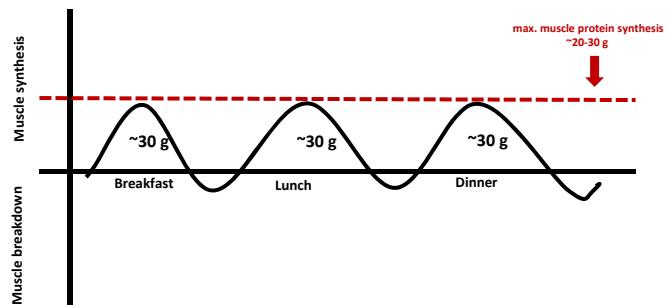
Protein distribution – does it matter?

'Westerners' have unbalanced protein distribution



Protein distribution – does it matter?

Aim for a balanced protein distribution and have protein after resistance training for maximal protein synthesis

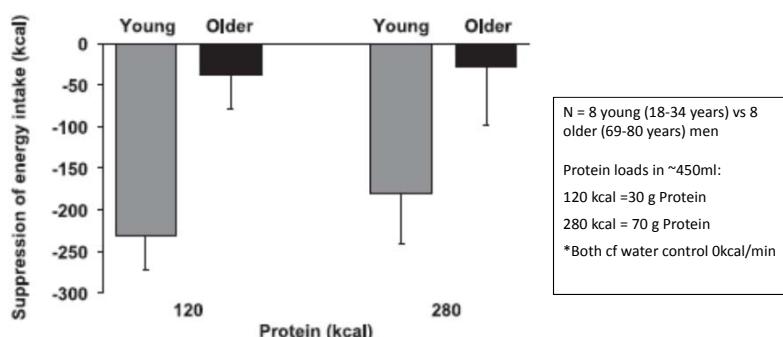


Phillips S et al. Nutrition 2004; Paddon-Jones D. modified from Nestle Symposia presentation 2015



Weaker suppression of energy intake with higher protein in healthy old compared to young men

Giezenaar C et al. AJP-Regul Integr Comp Physiol 2015



N = 8 young (18-34 years) vs 8 older (69-80 years) men

Protein loads in ~450ml:

120 kcal = 30 g Protein

280 kcal = 70 g Protein

*Both cf water control 0kcal/min

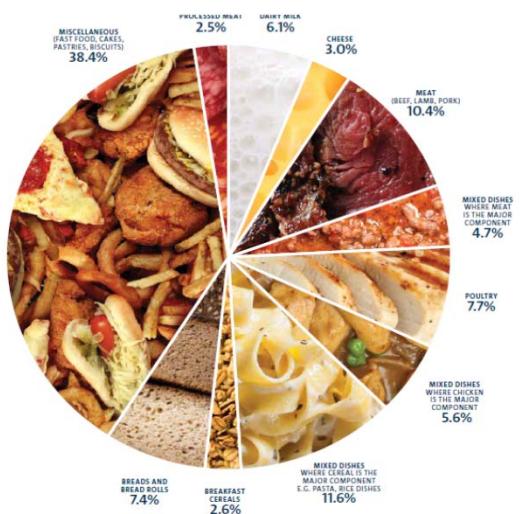
But in both groups ~30 g protein per meal is also optimal for appetite regulation



Does source of protein matter?



How Australians consume their protein – needs correction!!

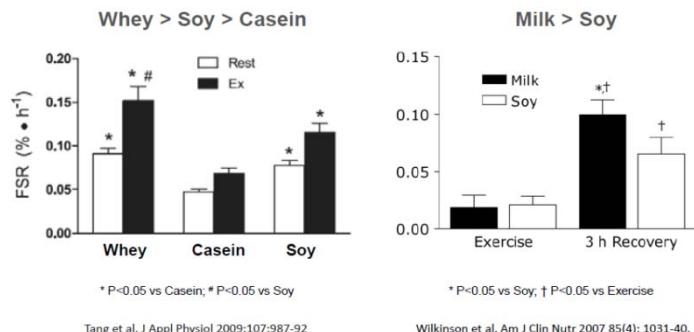


Opportunities

- Reduce indulgence foods
- Create healthier meats, cereals and grain based food
- Fortify some core foods with protein
- More plant based proteins



Anabolic effects of some proteins are better than others



Published randomised clinical trials are heavily biased to investigation of dairy proteins



Opportunities for the food industry

- Overweight/obese, elderly or hospitalised adults have great potential health benefits from increased protein intake.
- Evidence indicates need >1.1 to 1.6 g/kg/d for above populations
 - aim for ~30 g of protein at every eating occasion
 - protein intake at breakfast and lunch meals need most attention
- Timing of protein intake should be considered on an individual basis
- Variety of high-quality proteins
 - dairy, eggs, fish, lean meat, legumes and pulses
 - Fortified products including oral nutritional supplements may required
 - Dairy-based protein supplements appear most effective for enhancing muscle mass/strength



Opportunities for the food industry

- Protein-dense meals & snacks:
 - sustainable, ethical, affordable
 - appetising, convenient
 - increase variety plant- or flexitarian-protein foods
 - Provide array of other nutrients, vitamins, minerals, trace elements
- For frail/hospitalised older adults:
 - minimise the calories and volume of each meal/snack
 - protein + resistant starch + healthy fatty acids

Thank-you



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