

Method: We asked those children (males and females aged between 10 and 15 years) ‘what we mean by Mediterranean diet?’. Then we proposed a scenario: ‘you are the director of a film stage in which a family, mother and father with their sons are eating at home; they live in fifties at the seaside and the father is a fisherman; now you put them around the table of their kitchen and write what we have to put in to realize this scene; if possible, explain also what kind of foods there were in pantry and in refrigerator’.

Results: Seventy-nine children: nobody answered in a correct way to the question regarding Md. Only twenty-

eight (about 35%) put on the kitchen’s table something according to Md: fish, bread, season vegetables, fruit and in some cases a simple dish of spaghetti with tomato sauce, water and red wine and olive oil. The others really only tried to put on that table all kinds of possible foods they know.

Conclusions: Only few children recognize Md: they do not know either blue fish and its properties or vegetables and fruits. They do not think about simple bread and olives or pressed cheese at all. We recognize there is great need of education with practical examples, trying to teach nutritional properties of food in a more complete way to young people.

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65 – Front-of-pack logo v. Guideline Daily Amounts: what’s the better tool to promote suitable choices of packaged products in children according to health professionals?

TD Spagnoli¹, M Caputo², R Magliola², M Audenino² and L Cesari¹

¹ASL Turin 3 Service of Nutrition and Food Hygiene, Collegno, Turin, Italy: ²Piedmont Regional Department for Health Promotion, Turin, Italy

Introduction: A lot of tools, such as Front-of-Pack nutritional Logos and Guideline Daily Amounts (GDA), are available on labels in several countries to help consumers in choosing packaged foods. We assessed, according to health professionals, which tool could better help parents in the choice of snacks to prevent overweight in children.

Method: We performed focus groups on health professionals of the Departments of Preventive Nutrition (SIAN Services) in the whole Piedmont (an Italian region) and on paediatricians of a randomized district in Piedmont (Pinerolo). We compared GDA and logos placed on the labels from the United Kingdom (traffic-light), Finland (heart), Sweden (key), New Zealand (thick), Canada (health check), France (nutritional cursor) and The Netherlands (health choice).

Results: Forty-eight out of fifty-one health professionals (94%) were interviewed: thirty-four SIAN workers (11/13 regional services were represented) and fourteen paediatricians. In all 60% of interviewed professionals (29/48)

chose the traffic-light, 21% (10/48) the French-cursor, 19% (9/48) another logo; none chose the GDA. The prevalent explanations were clearness and understanding of the logo: it seemed more effective in communication than GDA because it was simpler and it was a picture, so could be easily seen and understood by everyone, even by people who have reading troubles. Moreover, among the different logos, the traffic-light seemed the most effective because it is universally understandable, even by children.

Conclusions: In Italy, the Confederation of Food-Industries (Federalimentare) promotes the spreading of GDA on packaged foods. However, data from health professionals are in agreement with results from other studies, suggesting that the GDA are less efficient tools than the logo.

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66 – Health effects of lifestyle interventions in obese children and adolescents study (HELIOS) randomised controlled trial

S Makkes¹, J Halberstadt¹, CM Renders¹, JE Bosmans¹, OH van der Baan-Slootweg² and JC Seidell¹

¹Department of Health Sciences and the EMGO Institute for Health and Care Research, VU University Amsterdam, The Netherlands: ²Koepel Behandelcentra Chronisch Zieken (KBCZ), Heideheувel, Hilversum, The Netherlands