

embracing your health

Nutrition 102 – Class 1

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Welcome to Nutrition 102

👤 Live class from Washington, DC

👤 June 18th

👤 Webinar classes

👤 June 28th, July 12th, July 19th,

July 26th, August 2nd

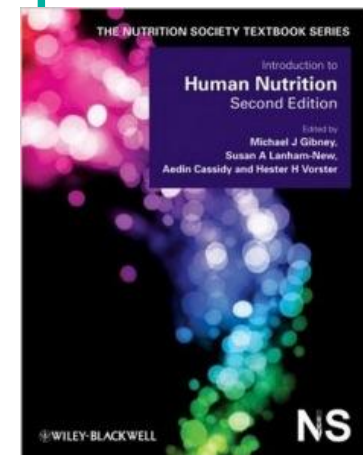
Archived

👤 All classes for 1 year

“Introduction to Human Nutrition”
second edition

Edited by Michael J. Gibney,
Susan A. Lanham-New, Aedin
Cassidy, and Hester H. Vorster

**May be purchased online
but is not required for the
class.**



Nutrition 102 Classes

- Week 1 – Vitamins A and D
- Week 2 – Vitamins E , K, C and Bioflavonoids
- Week 3 – B Vitamins
- Week 4 – Minerals and Trace Elements
- Week 5 – Minerals and Trace Elements
- Week 6 – Food additives, preservatives, artificial sweeteners, and measuring food intake

Priorities for Today's Session

Define vitamins

Examine Vitamins A and D

- What it is

- Source

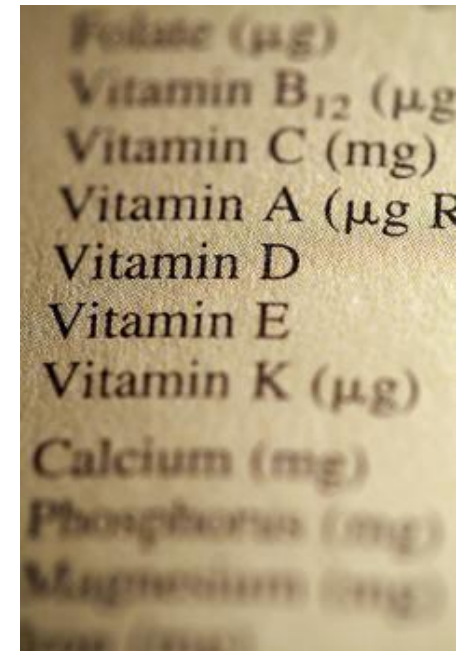
- Function

- Requirement

- Absorption

 - Deficiency

 - Toxicity



What Are Vitamins

- ❖ Chemical group of compounds
- ❖ Organic
- ❖ Required in very small amounts
- ❖ Fat soluble
- ❖ Water soluble



Vitamin A

- First vitamin to be discovered
- 2 groups
 - Preformed Vitamin A
 - Retinol, retinaldehyde, and retinoic acid
 - 50 Carotenoids
 - Beta-carotene



Sources for Vitamin A

Preformed Vitamin A

- Best source is liver
- Animal sources such as eggs, meat and dairy products



Carotenoids

- Best sources are green, yellow, and red fruits and vegetables
- Liver, margarine, milk and milk products



Function of Preformed Vitamin A

• Role in vision

- As the prosthetic group of the light sensitive proteins in the retina

• Role in regulation of gene expression and tissue differentiation

- Retinoic acid is essential for the responses to Vitamin D, thyroid hormone and long chain PUFA derivatives

Function of Carotenoids

• Precursors of Vitamin A

• Antioxidant action

• Lower incidence of cancer and cardiovascular disease

Prudent upper levels of Vitamin A

Age Group	Upper limit of intake (ug/day)	Reference intakes (ug/day)
Infants	900	350-375
1 – 3 years	1800	400
4 – 6 years	3000	400-500
6 – 12 years	4500	500-700
13 – 20 years	6000	600-700
Adult men	9000	600-1000
Adult women	7500	600-800
Pregnant women	3000-3300	700

Retinol Absorption

- 70-90% absorbed
- Absorbed from the small intestine dissolved in lipid
- Very low fat intake (less than 10% of energy from fat), impairs absorption of both retinol and carotene
- Low fat diets are associated with Vitamin A deficiency

Absorption for Carotenoids

❖ Biological availability and absorption varies between 5-60%

- ❖ Nature of food
- ❖ Cooked or raw food
- ❖ Amount of fat in meal



Vitamin A Deficiency

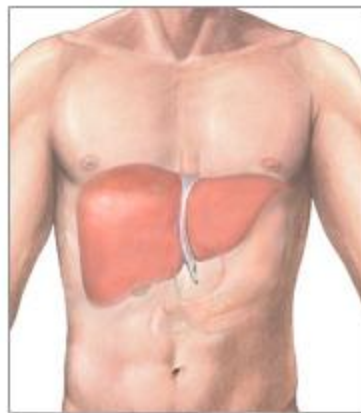
- Worldwide, major public health problem
- Most preventable cause of blindness
- Mild deficiency leads to increased susceptibility to a variety of infectious diseases – impairs immune response



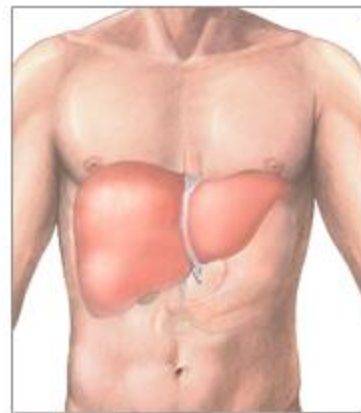
Vitamin A Toxicity

- ❖ Limited capacity to metabolize vitamin A
- ❖ Excessive intake accumulates in the liver and other tissues
- ❖ Leads to liver and bone damage, hair loss, vomiting, and headaches

Normal liver



Enlarged liver due to hepatomegaly



Chronic Toxicity of Vitamin A

- Prolonged and regular intake of more than 7.5-9 mg/day by adults
 - CNS
 - Liver
 - Bones
 - Skin
 - Impaired responsiveness to Vitamin D

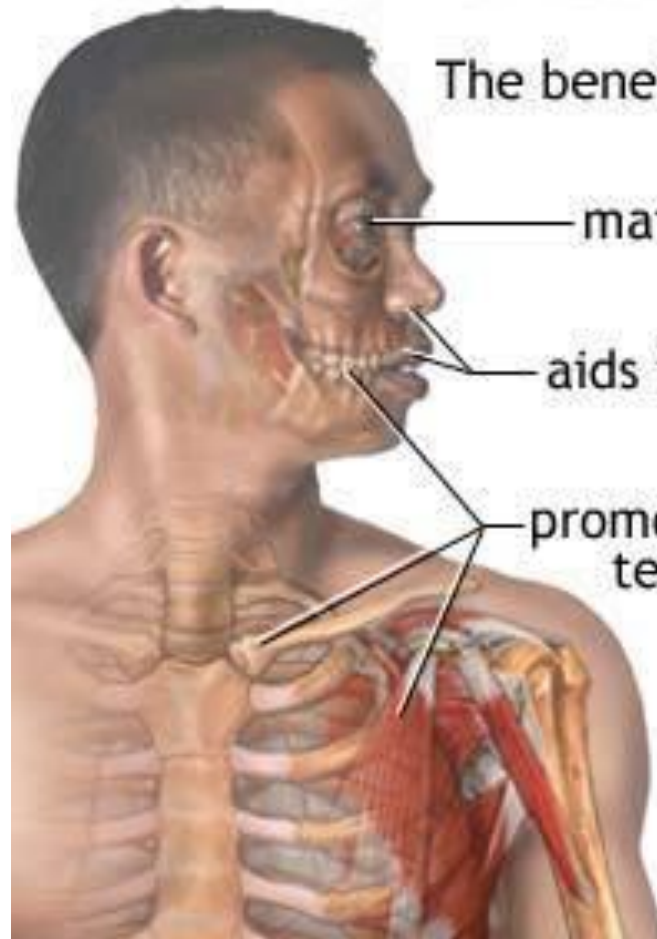
Vision Impairment

- Initially , loss of sensitivity to green light
- Next, impairment to adapt to dim light
- Then, inability to see all in dim light: night blindness
- Severe → xerophthalmia: keratinization of the cornea, followed by ulceration – irreversible damage to the eye that causes blindness



vitamin **A**

The benefits of vitamin A:



maintains health of specialized tissues such as the retina

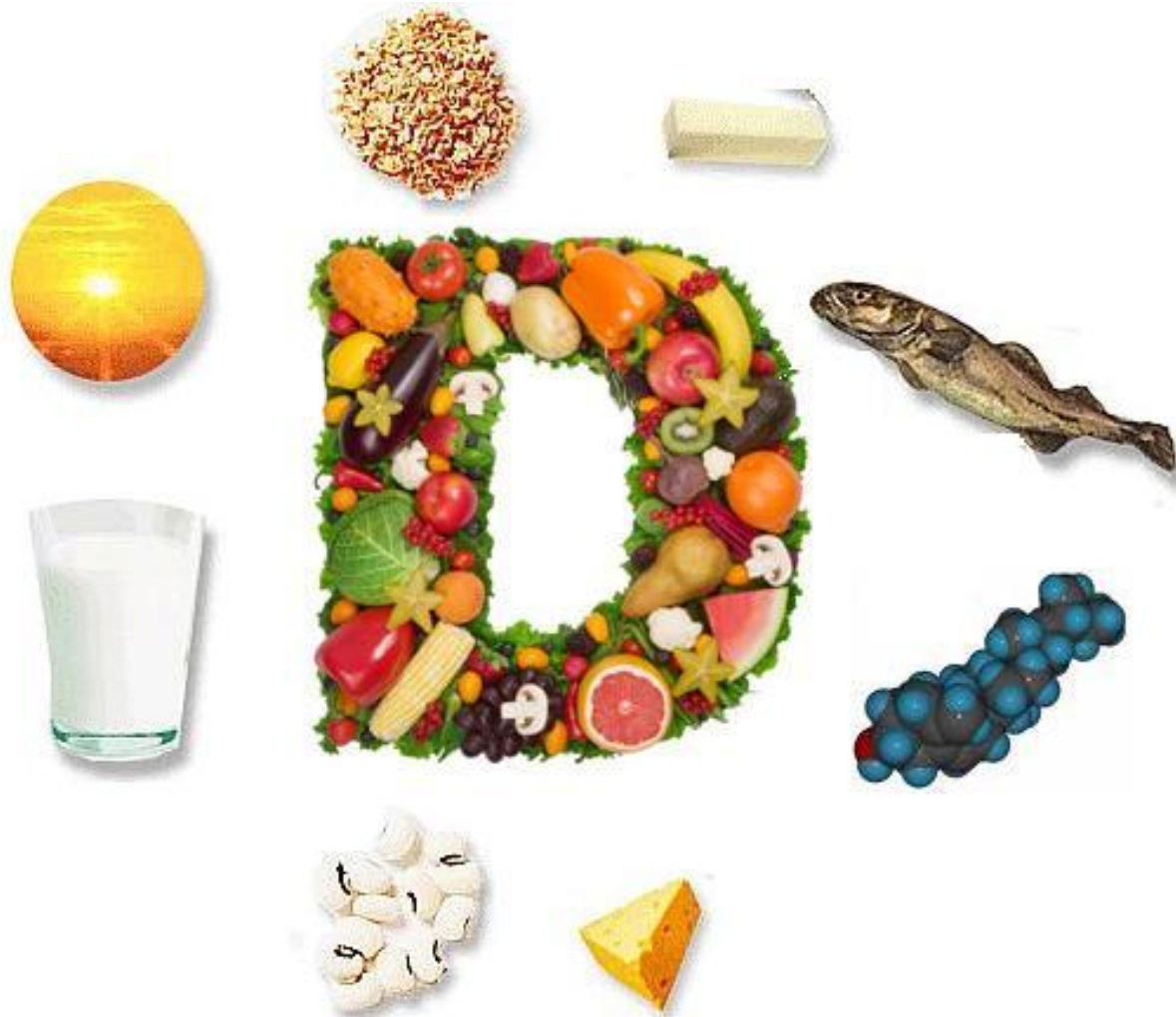
aids in growth and health of skin and mucous membranes

promotes normal development of teeth, soft and skeletal tissue

Adult RDA: 1000 μ g RE

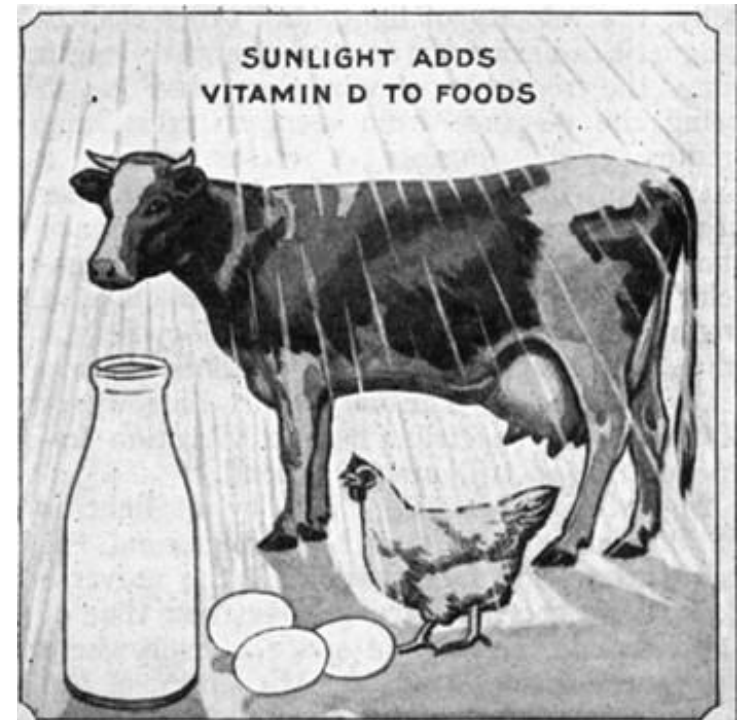
Fat-soluble

 ADAM.



Vitamin D

- Vitamin D1 – irradiation of ergosterol
- Vitamin D2 – ergocalciferol (some enriched foods)
- Vitamin D3 – normal dietary form of Vitamin D is cholecalciferol (calciol)



Sources for Vitamin D

- Synthesized in the skin when sunlight exposure is adequate
- Food sources: oily fish, eggs, liver, butter, fortified milk containing ergocalciferol



Vitamin D Function

- Regulation of calcium absorption and homeostasis
- Mediated by nuclear receptors that regulate gene expression



Vitamin D Requirements

- ❏ Difficult to determine since major source is synthesis in the skin
- ❏ Increased sunlight exposure improves Vitamin D status without risk of toxicity, but sunlight exposure is a cause of skin cancer



Adequate Intake (AI) for Vitamin D

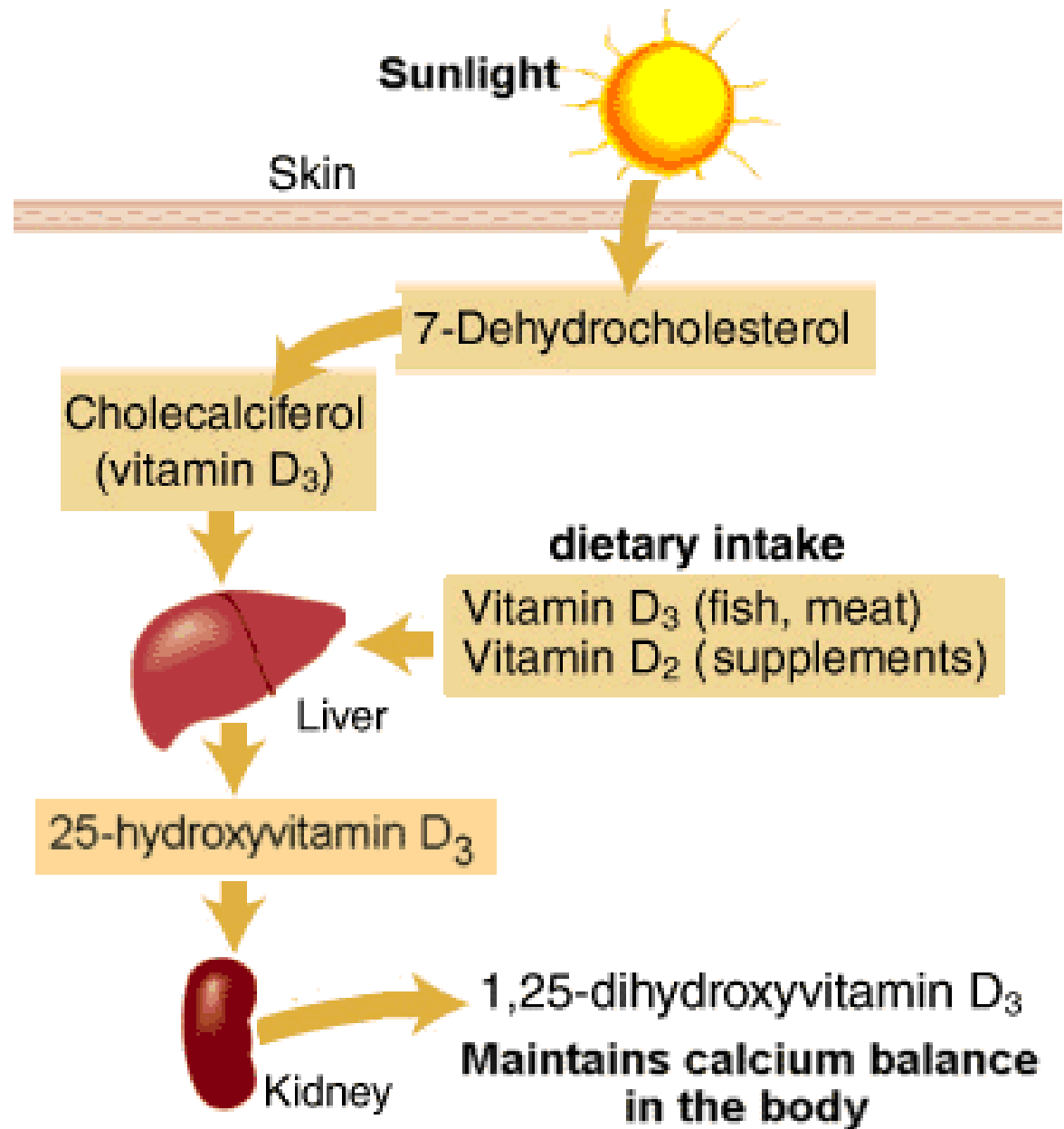
Life Stage	Age	Males mcg/day (IU/day)	Females mcg/day (IU/day)
Infants	0-12 months	5 mcg (200 IU)	5 mcg (200 IU)
Children	1-13 years	5 mcg (200 IU)	5 mcg (200 IU)
Adolescents	14-18 years	5 mcg (200 IU)	5 mcg (200 IU)
Adults	19-50 years	5 mcg (200 IU)	5 mcg (200 IU)
Adults	51-70 years	10 mcg (400 IU)	10 mcg (400 IU)
Adults	>70 years	15 mcg (600 IU)	15 mcg (600 IU)
Pregnancy	all ages	—	5 mcg (200 IU)
Breast-feeding	all ages	—	5 mcg (200 IU)

Abbreviations: mcg = microgram, IU = international unit

Vitamin D Absorption



- Absorbed in lipid micelles and incorporated into chylomicrons
- People on a low-fat diet will absorb little of such dietary Vitamin D as is available







Climate Effect on Absorption of Vitamin D

Temperate Climates

-  Plasma concentration of Vitamin D is highest at the end of summer and lowest at the end of winter
-  Summer – considerable amount of UV light even on a cloudy day and can penetrate thin clothes

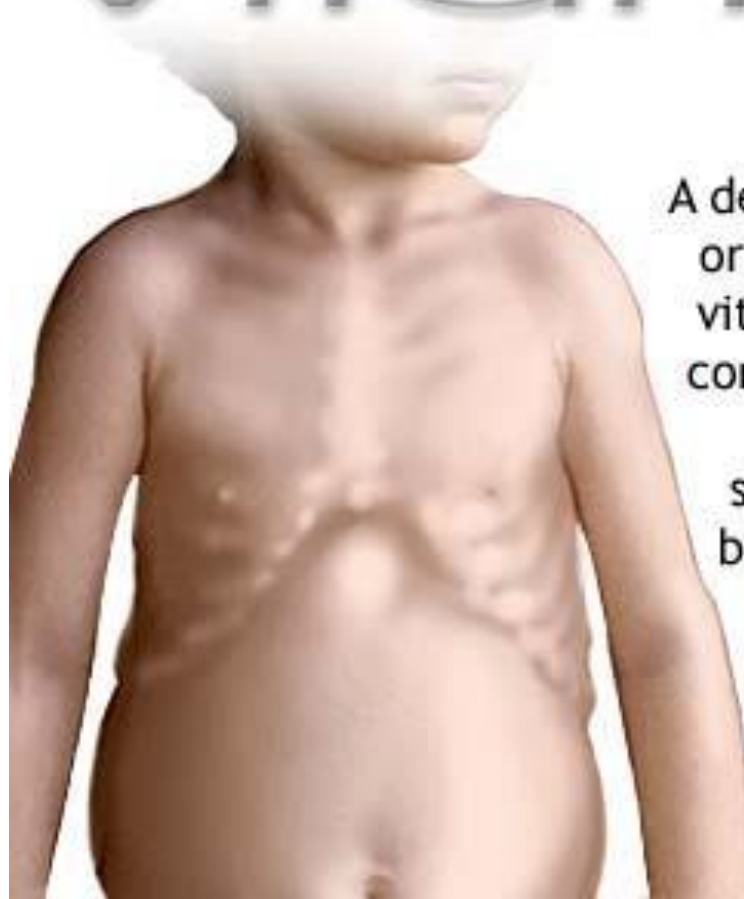


Northerly Climates

-  Polluted, industrial cities with little sunlight may not provide enough UV light to meet Vitamin D needs
-  Need to rely on dietary sources of Vitamin D



Vitamin D



A deficiency of vitamin D or an inability to utilize vitamin D may lead to a condition called rickets, a weakening and softening of the bones brought on by extreme calcium loss

Low Vitamin D Status




- ❏ Impaired glucose intolerance
- ❏ Insulin resistance and non-insulin dependent diabetes mellitus
- ❏ Obesity and the low grade chronic inflammation associated with (especially abdominal) obesity
- ❏ Factor in etiology of some cancers

Vitamin D Deficiency

Rickets

-  Toddler and adolescent disease
-  Bow-legs or knock knees
-  Can lead to collapse of ribcage and pelvic bone deformities

Osteomalacia

-  Adult disease especially older people
-  Demineralization of bone
-  Highest risk are women with little sunlight exposure and several pregnancies

Vitamin D Toxicity

❏ Vitamin D poisoning

❏ elevated plasma concentration of calcium

❏ Leads to contraction of blood vessels

❏ dangerously high blood pressure

❏ Also leads to calcinosis

❏ calcification of soft tissues including kidney, heart, lungs, and blood vessel walls

Vitamin D



Vitamin D promotes the body's absorption of calcium, essential to development of healthy bones and teeth

DRI: 5 μ g

Fat-soluble

 ADAM.

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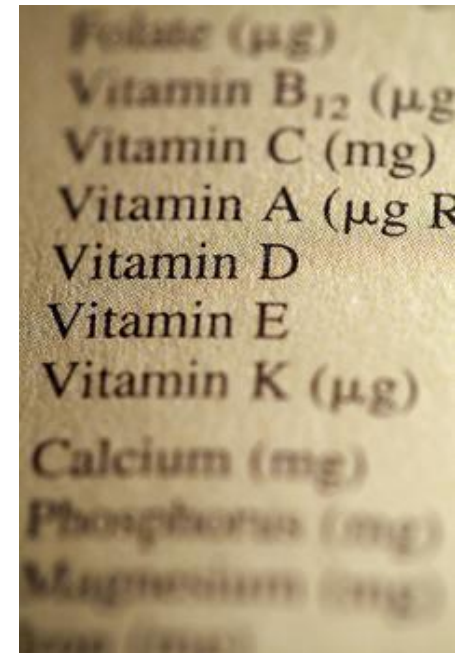
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Questions, Comments





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