



HNT0209 - Dietética

RECOMENDAÇÕES NUTRICIONAIS PARA O PLANEJAMENTO DIETÉTICO DE INDIVÍDUOS

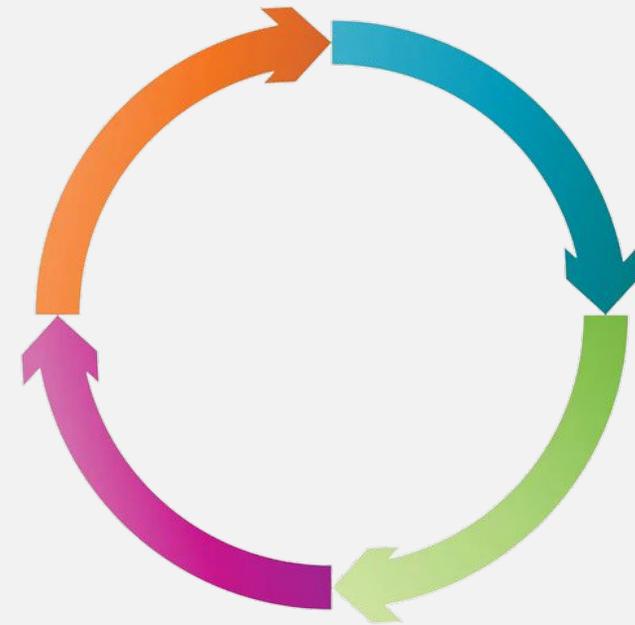
Fernanda Baeza Scagliusi

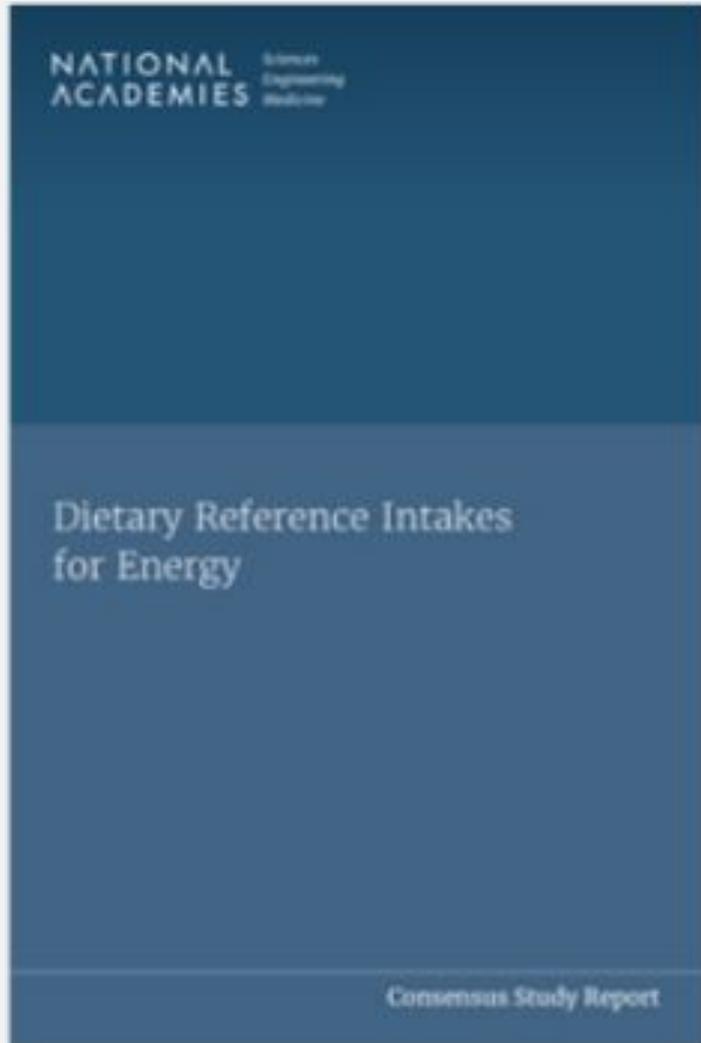
2023

PLANEJAMENTO DIETÉTICO

Elaboração de um cardápio ou dieta, isto é, uma lista de alimentos e preparações culinárias que serão consumidas ao longo de um ou mais dias, que promova a saúde do indivíduo ao qual se destina, ao mesmo tempo em que preencha as necessidades socioculturais e subjetivas, seja viável economicamente, sustentável e prazerosa.

- 1. Avaliação nutricional**
- 2. Diagnóstico nutricional**
- 3. Planejamento dietético**
- 4. Reavaliações e acompanhamento**





Dietary Reference Intakes for Energy (2023)

DETAILS

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CONTRIBUTORS

Committee on the Dietary Reference Intakes for Energy; Food and Nutrition Board; Health and Medicine Division; National Academies of Sciences, Engineering, and Medicine

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Dietary **DRI** Reference Intakes

**The Essential
Guide to
Nutrient
Requirements**



Jennifer J. Otten, Jennifer Pitz Hellwig, Linda D. Meyers,
Editors

INSTITUTE OF MEDICINE
OF THE NATIONAL ACADEMIES

ASPECTOS NUTRICIONAIS

- **Objetivo:** preencher as necessidades nutricionais
- **Operacionalização pelas recomendações nutricionais**
- DRIs – Ingestões dietéticas de referência

Histórico:

- Canadá: 1938
- EUA: 1941

Revisão/expansão a partir de 1994

Publicações DRIs entre 1997 e 2019

Última atualização:
2023

DIETARY REFERENCE INTAKES

Developed by the Institute of Medicine (IOM), the Dietary Reference Intakes (DRIs) are nutrient reference values that support many program, policy, and regulatory initiatives. They serve as a guide for good nutrition and provide the scientific basis for the development of food guidelines in both the United States and Canada – making it important that they remain up-to-date.

PROVIDE NUTRIENT STANDARDS FOR:



REQUIREMENTS



EXCESSIVE LEVELS

RECOMMENDATIONS INCLUDE:



FIBER



PROTEIN,
FATS,
& CARBS



VITAMINS
& MINERALS



WATER



CALORIES AND PHYSICAL ACTIVITY

DRI_s – INGESTÕES DIETÉTICAS DE REFERÊNCIA

- **Aplicabilidade a populações em geral**
- **Grupos de estágios de vida:**
 - 7 diferentes grupos, divisão por sexo
 - Bebês: 0 meses a 2 anos
 - Crianças e adolescentes: 3 a 18 anos
 - Adultos: ≥ 19 anos
 - Gestação
 - Lactação: aleitamento exclusivo (0 - 6 meses pós-parto) e aleitamento parcial (7-12 meses pós-parto)
- **Pesos e alturas de referência**

ASPECTOS NUTRICIONAIS: ENERGIA

- **Valor energético total (VET):**
 - não seja insuficiente e nem excessivo
- **Parâmetro para avaliar a ingestão de energia: peso corporal**
- **Dificuldades com os métodos de avaliação do consumo alimentar: sub-relato**

ASPECTOS NUTRICIONAIS: ENERGIA

- Parâmetro da DRI
 - **Necessidade estimada de energia – EER**
- Reflete o gasto energético de um indivíduo de acordo com seu sexo, idade, altura, peso corporal e nível de atividade física
- *Há diferentes fórmulas para **crianças, adolescentes, gestantes e nutrízes***

ASPECTOS NUTRICIONAIS: ENERGIA

Homens:

Inativo: $EER = 753,07 - (10,83 \times \text{idade}) + (6,50 \times \text{altura}) + (14,10 \times \text{peso})$

Pouco ativo: $EER = 581,47 - (10,83 \times \text{idade}) + (8,30 \times \text{altura}) + (14,94 \times \text{peso})$

Ativo: $EER = 1004,82 - (10,83 \times \text{idade}) + (6,52 \times \text{altura}) + (15,91 \times \text{peso})$

Muito ativo: $EER = -517,88 - (10,83 \times \text{idade}) + (15,61 \times \text{altura}) + (19,11 \times \text{peso})$

- *Na qual:* idade em anos; peso em kg; altura em centímetros

ASPECTOS NUTRICIONAIS: ENERGIA

Mulher:

Inativo: $EER = 584,90 - (7,01 \times \text{idade}) + (5,72 \times \text{altura}) + (11,71 \times \text{peso})$

Pouco ativo: $EER = 575,77 - (7,01 \times \text{idade}) + (6,60 \times \text{altura}) + (12,14 \times \text{peso})$

Ativo: $EER = 710,25 - (7,01 \times \text{idade}) + (6,54 \times \text{altura}) + (12,34 \times \text{peso})$

Muito ativo: $EER = 511,83 - (7,01 \times \text{idade}) + (9,07 \times \text{altura}) + (12,56 \times \text{peso})$

- *Na qual:* idade em anos; peso em kg; altura em centímetros

ASPECTOS NUTRICIONAIS: ATIVIDADE FÍSICA

- **Nível sedentário:** atividades da vida diária (AVD) incluindo trabalhos domésticos de esforço leve a moderado, caminhadas no cotidiano, ficar sentado por várias horas
- **Nível pouco ativo:** AVD + 60-80 minutos de atividade diária moderada
- **Nível ativo:** AVD + pelo menos 30-50 minutos de atividade diária moderada + 85 minutos de atividade vigorosa
- **Nível muito ativo:** AVD + pelo menos 120 minutos de atividade vigorosa

ASPECTOS NUTRICIONAIS: ATIVIDADE FÍSICA

	Tipos/ Descrição	Frequência	Intensidade	Duração
Deslocamento	A pé Ônibus sentado	5 x/semana 4 x/semana	leve leve	5 minutos 40 minutos
Trabalho				
Exercício físico				
Atividade física não programada				

TABLE S-2 Summary Table of EER Equations by Age, Sex, Physical Activity, and Energy Cost of Growth: Children and Adolescents

Age Group	Sex	PAL Category	EER Equation (kcal/d)
0 to 2.99 months	M	—	$EER = -716.45 - (1.00 \times \text{age}) + (17.82 \times \text{height}) + (15.06 \times \text{weight}) + 200$
	F	—	$EER = -69.15 + (80.0 \times \text{age}) + (2.65 \times \text{height}) + (54.15 \times \text{weight}) + 180$
3 to 5.99 months	M	—	$EER = -716.45 - (1.00 \times \text{age}) + (17.82 \times \text{height}) + (15.06 \times \text{weight}) + 50$
	F	—	$EER = -69.15 + (80.0 \times \text{age}) + (2.65 \times \text{height}) + (54.15 \times \text{weight}) + 60$
6 months to 2.99 years	M	—	$EER = -716.45 - (1.00 \times \text{age}) + (17.82 \times \text{height}) + (15.06 \times \text{weight}) + 20$
	F	—	$EER = -69.15 + (80.0 \times \text{age}) + (2.65 \times \text{height}) + (54.15 \times \text{weight}) + 20/15^d$
3 to 13.99 years	M	Inactive	$EER = -447.51 + (3.68 \times \text{age}) + (13.01 \times \text{height}) + (13.15 \times \text{weight}) + 20/15/25^b$
		Low active	$EER = 19.12 + (3.68 \times \text{age}) + (8.62 \times \text{height}) + (20.28 \times \text{weight}) + 20/15/25$
		Active	$EER = -388.19 + (3.68 \times \text{age}) + (12.66 \times \text{height}) + (20.46 \times \text{weight}) + 20/15/25$
	F	Very active	$EER = -671.75 + (3.68 \times \text{age}) + (15.38 \times \text{height}) + (23.25 \times \text{weight}) + 20/15/25$
		Inactive	$EER = 55.59 - (22.25 \times \text{age}) + (8.43 \times \text{height}) + (17.07 \times \text{weight}) + 15/30^e$
		Low active	$EER = -297.54 - (22.25 \times \text{age}) + (12.77 \times \text{height}) + (14.73 \times \text{weight}) + 15/30$
		Active	$EER = -189.55 - (22.25 \times \text{age}) + (11.74 \times \text{height}) + (18.34 \times \text{weight}) + 15/30$
Very active	$EER = -709.59 - (22.25 \times \text{age}) + (18.22 \times \text{height}) + (14.25 \times \text{weight}) + 15/30$		

TABLE S-2 Continued

Age Group	Sex	PAL Category	EER Equation (kcal/d)
14 to 18.99 years	M	Inactive	$EER = -447.51 + (3.68 \times \text{age}) + (13.01 \times \text{height}) + (13.15 \times \text{weight}) + 20$
		Low active	$EER = 19.12 + (3.68 \times \text{age}) + (8.62 \times \text{height}) + (20.28 \times \text{weight}) + 20$
		Active	$EER = -388.19 + (3.68 \times \text{age}) + (12.66 \times \text{height}) + (20.46 \times \text{weight}) + 20$
	F	Very active	$EER = -671.75 + (3.68 \times \text{age}) + (15.38 \times \text{height}) + (23.25 \times \text{weight}) + 20$
		Inactive	$EER = 55.59 - (22.25 \times \text{age}) + (8.43 \times \text{height}) + (17.07 \times \text{weight}) + 20$
		Low active	$EER = -297.54 - (22.25 \times \text{age}) + (12.77 \times \text{height}) + (14.73 \times \text{weight}) + 20$
		Active	$EER = -189.55 - (22.25 \times \text{age}) + (11.74 \times \text{height}) + (18.34 \times \text{weight}) + 20$
		Very active	$EER = -709.59 - (22.25 \times \text{age}) + (18.22 \times \text{height}) + (14.25 \times \text{weight}) + 20$

NOTES: kcal/d = kilocalories per day; PAL = physical activity level; EER = Estimated Energy Requirement. Age is in years, weight is in kilograms, and height is in centimeters.
^a Energy cost of growth for girls: 6 to 11.99 months: 20 kcal/d; 12 to 35.99 months: 15 kcal/d.

TABLE S-3 Summary Table of EER Equations Based on TEE Prediction by Age, Sex, and Physical Activity: Adults

Age Group	Sex	PAL Category	EER Equation (kcal/d)
19+ years	M	Inactive	$EER = 753.07 - (10.83 \times \text{age}) + (6.50 \times \text{height}) + (14.10 \times \text{weight})$
		Low active	$EER = 581.47 - (10.83 \times \text{age}) + (8.30 \times \text{height}) + (14.94 \times \text{weight})$
		Active	$EER = 1,004.82 - (10.83 \times \text{age}) + (6.52 \times \text{height}) + (15.91 \times \text{weight})$
	F	Very active	$EER = -517.88 - (10.83 \times \text{age}) + (15.61 \times \text{height}) + (19.11 \times \text{weight})$
		Inactive	$EER = 584.90 - (7.01 \times \text{age}) + (5.72 \times \text{height}) + (11.71 \times \text{weight})$
		Low active	$EER = 575.77 - (7.01 \times \text{age}) + (6.60 \times \text{height}) + (12.14 \times \text{weight})$

TABLE S-3 Continued

Age Group	Sex	PAL Category	EER Equation (kcal/d)
		Active	$EER = 710.25 - (7.01 \times \text{age}) + (6.54 \times \text{height}) + (12.34 \times \text{weight})$
		Very active	$EER = 511.83 - (7.01 \times \text{age}) + (9.07 \times \text{height}) + (12.56 \times \text{weight})$

NOTES: kcal/d = kilocalories per day; PAL = physical activity level; EER = Estimated Energy Requirement; TEE = total energy expenditure. For weight stable adults, $EER (kcal/d) = TEE (kcal/d)$. Age is in years, weight is in kilograms, and height is in centimeters.

TABLE S-4 Summary Table of EER Equations for Pregnant Women During the Second and Third Trimesters of Pregnancy

Life Stage	PAL Category	EER Equation (kcal/day)
2nd and 3rd trimester of pregnancy ^d	Inactive	$EER = 1,131.20 - (2.04 \times \text{age}) + (0.34 \times \text{height}) + (12.15 \times \text{weight}) + (9.16 \times \text{gestation}) + \text{energy deposition}$
	Low active	$EER = 693.35 - (2.04 \times \text{age}) + (5.73 \times \text{height}) + (10.20 \times \text{weight}) + (9.16 \times \text{gestation}) + \text{energy deposition}$
	Active	$EER = -223.84 - (2.04 \times \text{age}) + (13.23 \times \text{height}) + (8.15 \times \text{weight}) + (9.16 \times \text{gestation}) + \text{energy deposition}$
	Very active	$EER = -779.72 - (2.04 \times \text{age}) + (18.45 \times \text{height}) + (8.73 \times \text{weight}) + (9.16 \times \text{gestation}) + \text{energy deposition}$

NOTES: For pregnancy: EER (kcal/d) = TEE (kcal/d) + energy deposition (kcal/d). Energy deposition/mobilization (kcal/d) estimated for underweight (UW), normal weight (NW), overweight (OW), and obese (OB) pregnant women during the 2nd and 3rd trimesters of pregnancy: + 300 kcal/d for UW; + 200 kcal/d for NW; + 150 kcal/d for OW; -50 kcal/d for OB. EERs are in kilocalories/day, age is in years, height is in centimeters, weight is in kilograms, gestation is in weeks, energy deposition is in kilocalories/day.

^dFor the 1st trimester of pregnancy, the nonpregnant TEE prediction equation should be used. It is assumed that energy deposition/mobilization is negligible and is therefore ignored.

TABLE S-5 Summary Table of EER Equations for Women and Girl Exclusively Breastfeeding 0 to 6 Months Postpartum

Age Group	PAL Category	EER Equation (kcal/day)
Women, 19 years and above	Inactive	$EER = 584.90 - (7.01 \times \text{age}) + (5.72 \times \text{height}) + (11.71 \times \text{weight}) + \text{energy cost of milk production} - \text{energy mobilization}$
	Low active	$EER = 575.77 - (7.01 \times \text{age}) + (6.60 \times \text{height}) + (12.14 \times \text{weight}) + \text{energy cost of milk production} - \text{energy mobilization}$
	Active	$EER = 710.25 - (7.01 \times \text{age}) + (6.54 \times \text{height}) + (12.34 \times \text{weight}) + \text{energy cost of milk production} - \text{energy mobilization}$
	Very active	$EER = 511.83 - (7.01 \times \text{age}) + (9.07 \times \text{height}) + (12.56 \times \text{weight}) + \text{energy cost of milk production} - \text{energy mobilization}$
Girls, < 19 years	Inactive	$EER = 55.59 - (22.25 \times \text{age}) + (8.43 \times \text{height}) + (17.07 \times \text{weight}) + \text{energy cost of milk production} - \text{energy mobilization}$
	Low active	$EER = -297.54 - (22.25 \times \text{age}) + (12.77 \times \text{height}) + (14.73 \times \text{weight}) + \text{energy cost of milk production} - \text{energy mobilization}$
	Active	$EER = -189.55 - (22.25 \times \text{age}) + (11.74 \times \text{height}) + (18.34 \times \text{weight}) + \text{energy cost of milk production} - \text{energy mobilization}$
	Very active	$EER = -709.59 - (22.25 \times \text{age}) + (18.22 \times \text{height}) + (14.25 \times \text{weight}) + \text{energy cost of milk production} - \text{energy mobilization}$

NOTES: For exclusively breastfeeding 0 to 6 months postpartum: EER (kcal/d) = TEE (kcal/d) + energy cost of milk production (kcal/d) - energy mobilization (kcal/d). Energy cost of milk production estimated for women and girls exclusively breastfeeding 0 to 6 months postpartum: 540 kcal/d. Energy mobilization estimated for women and girls exclusively breastfeeding 0 to 6 months postpartum: 140 kcal/d. EERs are in kilocalories/day, age is in years, height is in centimeters, weight is in kilograms, energy cost of milk production is in kilocalories/day, and energy mobilization is in kilocalories/day.

TABLE S-6 Summary Table of EER Equations for Women and Girls Partially Breastfeeding 7 to 12 Months Postpartum

Age Group	PAL Category	EER Equation (kcal/day)
Women, 19 years and above	Inactive	$EER = 584.90 - (7.01 \times \text{age}) + (5.72 \times \text{height}) + (11.71 \times \text{weight}) + \text{energy cost of milk production}$
	Low active	$EER = 575.77 - (7.01 \times \text{age}) + (6.60 \times \text{height}) + (12.14 \times \text{weight}) + \text{energy cost of milk production}$
	Active	$EER = 710.25 - (7.01 \times \text{age}) + (6.54 \times \text{height}) + (12.34 \times \text{weight}) + \text{energy cost of milk production}$
	Very active	$EER = 511.83 - (7.01 \times \text{age}) + (9.07 \times \text{height}) + (12.56 \times \text{weight}) + \text{energy cost of milk production}$
Girls, < 19 years	Inactive	$EER = 55.59 - (22.25 \times \text{age}) + (8.43 \times \text{height}) + (17.07 \times \text{weight}) + \text{energy cost of milk production}$
	Low active	$EER = -297.54 - (22.25 \times \text{age}) + (12.77 \times \text{height}) + (14.73 \times \text{weight}) + \text{energy cost of milk production}$
	Active	$EER = -189.55 - (22.25 \times \text{age}) + (11.74 \times \text{height}) + (18.34 \times \text{weight}) + \text{energy cost of milk production}$
	Very active	$EER = -709.59 - (22.25 \times \text{age}) + (18.22 \times \text{height}) + (14.25 \times \text{weight}) + \text{energy cost of milk production}$

NOTES: For partially breastfeeding 7 to 12 months postpartum: EER (kcal/d) = TEE (kcal/d) + energy cost of milk production (kcal/d). Energy cost of milk production estimated for women and girls partially breastfeeding 7 to 12 months postpartum: 380 kcal/d. EERs are in kilocalories/day, age is in years, height is in centimeters, weight is in kilograms, and energy cost of milk production is in kilocalories/day.

ASPECTOS NUTRICIONAIS: ENERGIA PARA PESSOAS TRANS

Usar fórmula não generificada:

- Dieta hipocalórica: 20-25 kcal/kg de peso corporal;
- Dieta isocalórica: 25 – 30 kcal/kg de peso corporal;
- Dieta hipercalórica: 30-35 kcal/kg de peso corporal.



ASPECTOS NUTRICIONAIS

Acceptable macronutrient distribution ranges (AMDR)

Intervalos de distribuição aceitável de macronutrientes

- intervalo para ingestão de fontes de energia associado a risco reduzido de doenças crônicas, com provisão garantida de nutrientes essenciais
- porcentagens do valor energético total (%VET): relativas
- limite inferior e limite superior

RECOMENDAÇÕES NUTRICIONAIS: MACRONUTRIENTES

DRI_s – AMDR_s

Energia a partir de macronutrientes

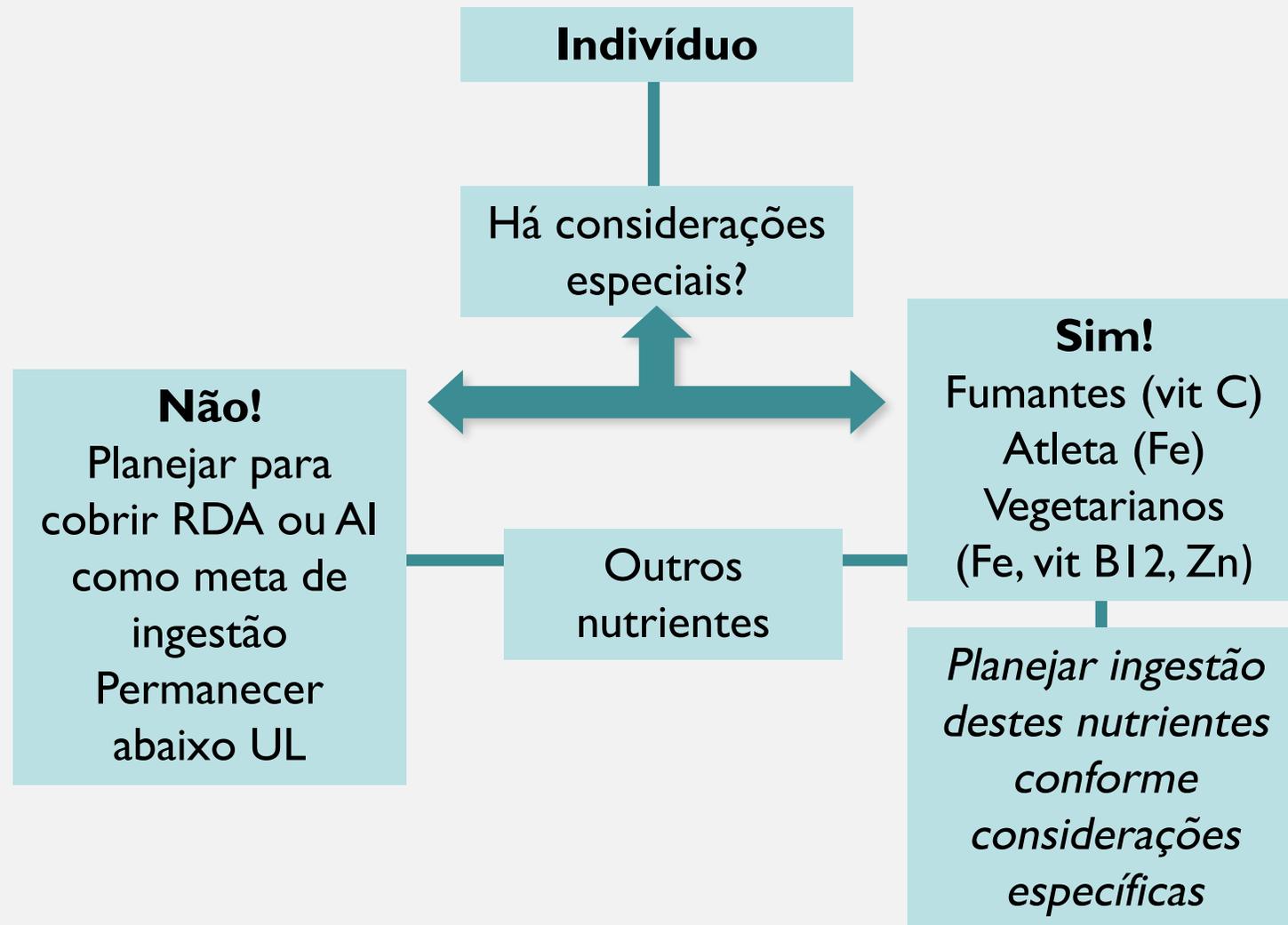
Fatores de Atwater

- Carboidratos: 4 kcal/g
- Proteínas: 4 kcal/g
- Lipídeos: 9 kcal/g
- Álcool: 7 kcal/g --densidade 0,789 □ ~5,6 kcal/mL

LIP	CHO	PROT	SAT	AÇ
20 – 35%	45 – 65%	10 – 35%	mínimo	< 25%

ASPECTOS NUTRICIONAIS

- Garantir que o risco de ingestão excessiva ou deficiente seja **aceitavelmente baixo**
- Usar como meta a RDA e, na ausência desta, a AI:
 - **risco baixo de inadequação**
- Planejar a ingestão abaixo dos valores de UL:
 - **baixo risco de ingestão excessiva**



ASPECTOS NUTRICIONAIS

Fumantes:

- Aumento do estresse oxidativo e do *turnover* de vit C.



Adicional diário de 35 mg*

*Observado baixa excreção de metabólitos urinários.

ASPECTOS NUTRICIONAIS

Vegetarianos:

Tabela 14: Recomendação de ingestão de ferro para vegetarianos e onívoros

Sexo (idade)	Onívoro	Vegetariano
Sexo Masculino (acima de 19 anos)	8 mg	16mg
Sexo Feminino (19 a 50 anos)	18 mg	36 mg

Tabela 19: Recomendação de ingestão de zinco para onívoros e vegetarianos

Sexo (idade)	Onívoro	Vegetariano
Sexo Masculino (acima de 14 anos de idade)	11 mg	16,5 mg
Sexo Feminino (acima de 19 anos)	8 mg	12 mg



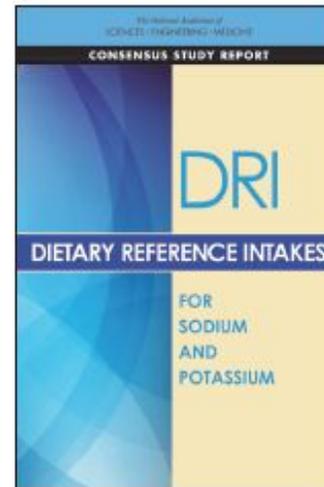
Consensus Study Report HIGHLIGHTS

March 2019

Dietary Reference Intakes for Sodium and Potassium

Potassium and sodium are interrelated, essential nutrients that play vital roles in the body to maintain physiological homeostasis. Both nutrients have been linked to risk of chronic disease, particularly cardiovascular disease. Additionally, a possible association of sodium intake with other adverse health outcomes has been suggested. The coexistence of essentiality with a relationship to adverse health effects, including chronic disease, called for a new approach to establishing intake recommendations for potassium and sodium within the context of the Dietary Reference Intakes (DRIs).

The DRIs are a set of reference values developed jointly for the United States and Canada by the National Academies of Sciences, Engineering, and Medicine. The DRI model, which was developed in recognition of the need for a safe and adequate range of intakes, had intended that evidence on chronic disease risk be incorporated in the process. How-



Chronic disease reduction intakes (CDRRs)

CDRR is established using evidence of the beneficial effect of reducing sodium intake on cardiovascular disease risk, hypertension risk, systolic blood pressure, and diastolic blood pressure. Reduction of sodium intakes above the sodium CDRR is expected to reduce chronic disease risk within the apparently healthy population.

Most U.S. and Canadian population groups consume sodium above both the AI and CDRR levels. There is no concern of sodium inadequacy in the population. Intakes above the CDRR increase the risk of chronic disease in the population. Reducing sodium intake has a greater effect on adults with hypertension than on adults with normal blood pressure, but the benefits of reducing sodium intake toward the sodium CDRR apply to both groups. There is evidence that reducing sodium intake below the CDRR can lower systolic and diastolic blood pressure, but the effect on chronic disease risk cannot be characterized at this time.

TABLE 1: POTASSIUM DIETARY REFERENCE INTAKES, BY AGE, SEX, AND LIFE-STAGE GROUP

Life-Stage Group	AI (mg/d)	UL	CDRR
Infants			
0–6 months	400	ND ^b	ND ^c
7–12 months	860 ^a	ND ^b	ND ^c
Children			
1–3 years	2,000 ^a	ND ^b	ND ^c
4–8 years	2,300 ^a	ND ^b	ND ^c
Males			
9–13 years	2,500 ^a	ND ^b	ND ^c
14–18 years	3,000 ^a	ND ^b	ND ^c
19–30 years	3,400 ^a	ND ^b	ND ^c
31–50 years	3,400 ^a	ND ^b	ND ^c
51–70 years	3,400 ^a	ND ^b	ND ^c
>70 years	3,400 ^a	ND ^b	ND ^c
Females			
9–13 years	2,300 ^a	ND ^b	ND ^c
14–18 years	2,300 ^a	ND ^b	ND ^c
19–30 years	2,600 ^a	ND ^b	ND ^c
31–50 years	2,600 ^a	ND ^b	ND ^c
51–70 years	2,600 ^a	ND ^b	ND ^c
>70 years	2,600 ^a	ND ^b	ND ^c
Pregnancy			
14–18 years	2,600 ^a	ND ^b	ND ^c
19–30 years	2,900 ^a	ND ^b	ND ^c
31–50 years	2,900 ^a	ND ^b	ND ^c
Lactation			
14–18 years	2,500 ^a	ND ^b	ND ^c
19–30 years	2,800 ^a	ND ^b	ND ^c
31–50 years	2,800 ^a	ND ^b	ND ^c

TABLE 2: SODIUM DIETARY REFERENCE INTAKES, BY AGE, SEX, AND LIFE-STAGE GROUP

Life-Stage Group	AI (mg/d)	UL	CDRR
Infants			
0–6 months	110 ^a	ND ^b	ND ^c
7–12 months	370	ND ^b	ND ^c
Children			
1–3 years	800 ^a	ND ^b	Reduce intakes if above 1,200 mg/day ^d
4–8 years	1,000 ^a	ND ^b	Reduce intakes if above 1,500 mg/day ^d
Males			
9–13 years	1,200 ^a	ND ^b	Reduce intakes if above 1,800 mg/day ^d
14–18 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day ^d
19–30 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day
31–50 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day
51–70 years	1,500 ^a	ND ^b	Reduce intakes if above 2,300 mg/day
>70 years	1,500 ^a	ND ^b	Reduce intakes if above 2,300 mg/day
Females			
9–13 years	1,200 ^a	ND ^b	Reduce intakes if above 1,800 mg/day ^d
14–18 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day ^d
19–30 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day
31–50 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day
51–70 years	1,500 ^a	ND ^b	Reduce intakes if above 2,300 mg/day
>70 years	1,500 ^a	ND ^b	Reduce intakes if above 2,300 mg/day
Pregnancy			
14–18 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day ^d
19–30 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day
31–50 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day
Lactation			
14–18 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day ^d
19–30 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day
31–50 years	1,500	ND ^b	Reduce intakes if above 2,300 mg/day

Vamos mexer nas tabelas das DRIs?

This report contains the collective views of an international group of experts and does not necessarily represent the decisions or the stated policy of the World Health Organization or of the Food and Agriculture Organization of the United Nations

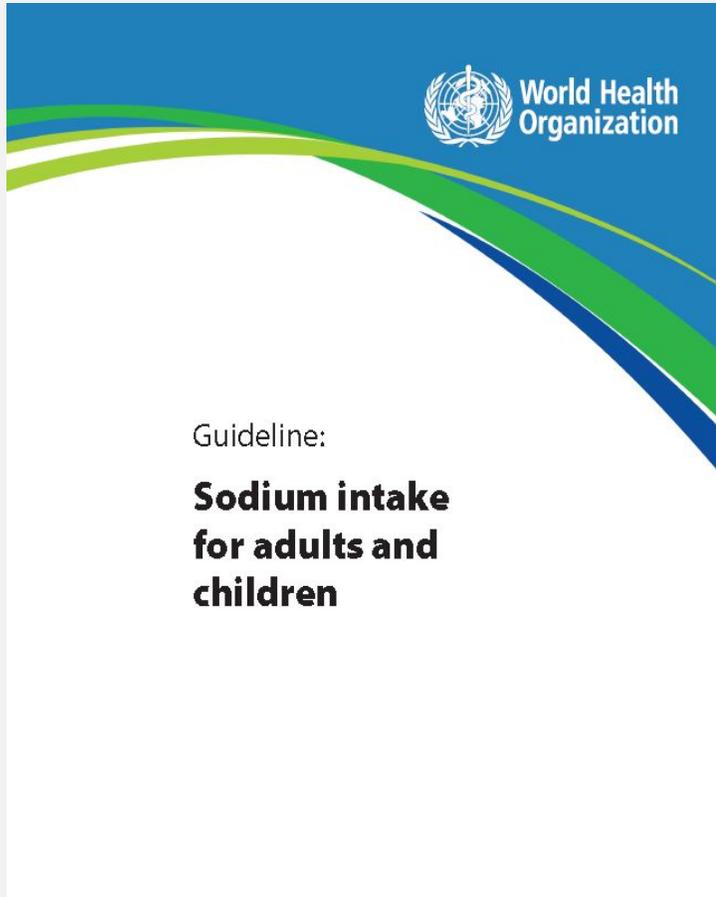
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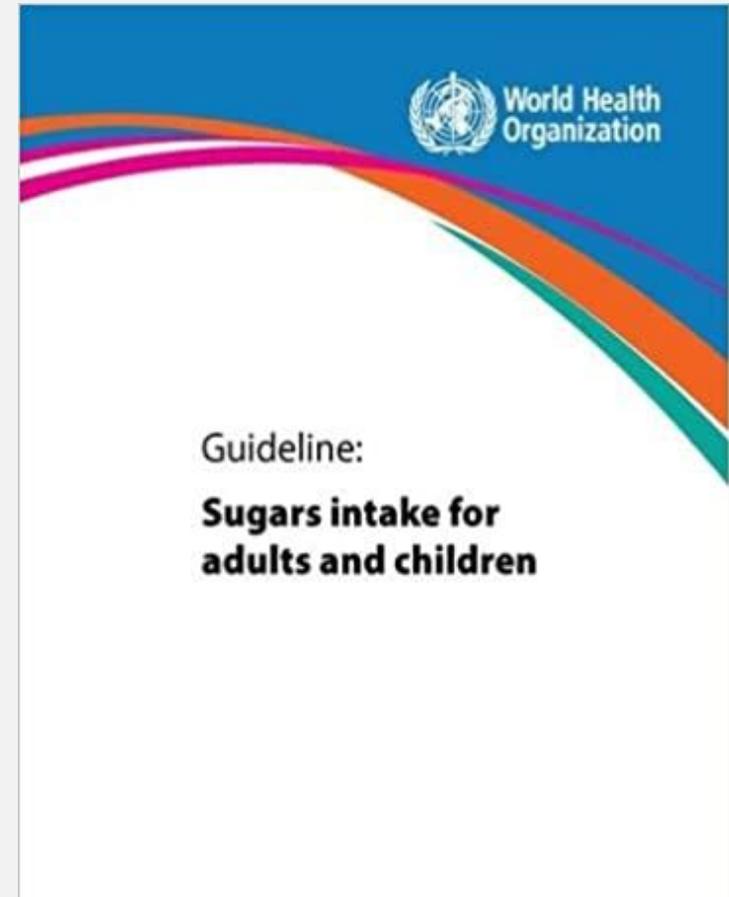
**DIET, NUTRITION AND
THE PREVENTION OF
CHRONIC DISEASES**

Report of a
Joint WHO/FAO Expert Consultation





2012



2015

RECOMENDAÇÕES NUTRICIONAIS: MACRONUTRIENTES

OMS



RECOMENDAÇÕES NUTRICIONAIS: MACRONUTRIENTES

OMS

CHO	PROT
55 – 75%	10-15%

RECOMENDAÇÕES NUTRICIONAIS: MACRONUTRIENTES

OMS

LIP	SAT	POLI	MONO
15 – 30%	< 10%	6 – 11%	completar

Para homens
pode ser de 15 a
35%

RECOMENDAÇÕES NUTRICIONAIS: OMS

- **Açúcares livres**
 - Recomendação: <10% VET
 - Redução adicional [condicional]: <5% VET
- **Frutas e hortaliças: ≥ 400 g/d**
- **Potássio e sódio**

Nutrientes	Consumo	Recomendação
Potássio	Deve ser aumentado	3510 mg/d
Sódio	Deve ser diminuído	<2000 mg/d

Sal: máximo 5 g/d

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RECOMENDAÇÕES NUTRICIONAIS: DGA

- **Açúcares livres**
 - Recomendação: <10% VET
 -
- **Gordura saturada:** até 10% do VET
- **Sódio:** no máximo até o valor das CDRRs (das DRIs) por faixa etária

TAREFA 3

1. Considerando o período atual da vida de Julia em São Paulo, preencha o quadro sobre sua prática de atividade física.
2. Considerando a resposta anterior, quais seriam seus coeficientes de atividade física (nome) e seu EER?
3. Segundo as DRIs, quais seriam as recomendações de ingestão de macronutrientes para Julia?
4. Segundo a OMS, quais seriam as recomendações de ingestão de macronutrientes para Julia?
5. Segundo as DRIs, quais seriam as recomendações de ingestão de sódio para Julia?
6. Segundo a OMS, quais seriam as recomendações de ingestão de sódio para Julia?

Domínios da atividade física	Tipo	Frequência	Duração	Intensidade
Deslocamento				
Ocupação				
Atividade física programada				
Atividade física não programada				



OBRIGADA!