

Survey on the nutritional profile of children and adolescents with autism spectrum disorders (ASD) in Europe (Germany and Spain), the United States (EU), and Puerto Rico (PR)

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Abstract:

Introduction: The prevalence of autism spectrum disorder (ASD) in European countries ranges from 4.4 to 19.7 per 1,000 in ages 7-9 years and in the United States, the prevalence is estimated at 16.8 per 1,000 8-year-old children. This study is done to determine food intake and to indicate the foods that children with ASD consume daily or never consume.

Methods: Ten children and adolescents diagnosed with ASD between the ages of 5-17 years residing in Europe and the United States (US) were included in the study. The study evaluated the basic demographic characteristics and anthropometric measures of the children, tastes and preferences, and their frequency of daily consumption of foods included in the different food groups.

Results: The mean age was 10.6 years and the male sex predominated with 80%. The evaluation of the anthropometric measurements determined that 50% of the study population was obese according to the criteria of the World Health Organization (WHO). The nutritional evaluation showed that 50% of the children never consume vegetables, 10% never consume milk and dairy products, 50% never consume fresh fruit, 10% never consume meat (meat, chicken, or fish), 20% of children drink only between 1 and 2 glasses of water a day, 40% never consume fish. 70% of families reported that their children had gone through a period of food selectivity and 40% reported that their children's eating habits change depending on where they are.

Conclusion: In conclusion, children and adolescents with ASD may be at risk of nutritional deficiencies, but the results obtained cannot be generalized to the population of children with ASD, further studies on this subject are necessary.



Biography:

Mrs Zuleika Aponte Torres gained hid Phd at University of Puetro Rico School of Medicine, Chile. Highly skilled professional with experience in: Health economics, outcomes Research, epidemiology, Health Technology Assessment, pharmacoepidemiology, drug safety and risk management, study design, medical writing, regulatory consulting, data analysis and reporting, rare disease research, nutritional epidemiology. Epidemiologist Team Lead for the methods and analytics team. Provide medical facilities, states, regions, and the nation with data collection and reporting capabilities needed to: Identify infection prevention problems by facility, state, or specific quality improvement project, benchmark progress of infection prevention efforts, comply with state and federal public reporting mandates, and ultimately, drive national progress toward elimination of Healthcare-associated Infections (HAIs).

Publication of speakers:

 Weiner, Lindsey & Fridkin, Scott & Aponte, Zuleika & Avery, Lacey & Coffin, Nicole & Dudeck, Margaret & Edwards, Jonathan & Jernigan, John & Konnor, Rebecca & Soe, Minn & Peterson, Kelly & Mcdonald, Lawrence. (2016). Vital Signs: Preventing Antibiotic-Resistant Infections in Hospitals – United States, 2014. MMWR. Morbidity and Mortality Weekly Report. 65. 10.15585/mmwr. mm6509e1er.

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