Body Rox[™]& Usanimals[™]

Essentials For Teens & Kids!

Growing healthy kids and teens

Often, the hectic pace of 21st century living means finding time to prepare home-cooked meals all of the time difficult. Yet good nutrition is a must for healthy growth and development and good health that lasts.

SO WHAT MAKES A HEALTHY DIET?

Product of the Month

The National Health and Medical Research Councils (NHMRC) suggest that children and young people be encouraged to:

Eat plenty of vegetables, legumes and fruits. Packed with protective plant pigments, minerals and fibre, fruits and veggies also provide vitamin C for healthy blood. Orange-coloured produce is converted into a form of vitamin A in the body, a must for immunity.

Opt for plenty of cereals. Include foods such as breads, rice, pasta and noodles, preferably wholegrain such as porridge oats and brown rice. Very young children don't need large amounts of fibre so a mix of white bread/wheat products and wholemeal products is fine. Wholegrains are rich in B vitamins which the body needs to release energy at the cell level. They also contain iron. Boost the amount of iron that the body absorbs from wholegrains by always offering a source of vitamin C with meals. Try fresh fruits such as citrus fruits or kiwi or vegetables such as tomatoes. Vitamin C can't be stored by the body so vitamin C-rich foods are needed daily.

Eat protein-containing foods. Fish, lean meat, eggs and legumes like peas and beans and/or alternatives provide protein to help build cells and nurture growth and development.

Include dairy products and/or alternatives. These are calcium-rich and important for healthy bones and teeth. Children under two years have small tummies and need the concentrated calories and fat-soluble vitamins A and D in whole milk. Children over two can take reduced-fat milk. Encourage older children and teens to opt for reduced-fat varieties. Calcium-enriched soya products can be used in place of or in addition to cow's milk products.

Drink water. Make water the drink of choice or offer milk. Pure unsweetened fruit juice can be rich in vitamin C but it is acidic and too many juices (and fizzy drinks) can erode (scrape away at) tooth enamel. The enamel that protects children's teeth is much thinner than adult tooth enamel so children's teeth are more susceptible to dental cavities. Studies suggest that children are drinking too many sugary drinks and juices too often and not enough water.

Key nutrients for kids

In Australia and New Zealand, children may be short on a number of nutrients. These include:

Vitamin D

Given the amount of sunshine in Australia and New Zealand, you would think that most of our children get plenty of what is aptly known as the sunshine vitamin. But you'd be wrong!

One study published in the *Medical Journal of Australia* found Vitamin D deficiency to be a significant problem in Australia amongst known high-risk groups. The scientists called for public health measures to prevent, identify and treat vitamin D deficiency.

Vitamin D helps the body absorb calcium and most is produced by the action of sunlight on the skin; around 10 per cent comes from foods. A shortage of vitamin D can lead to bone deformities such as rickets in children. Babies may also be short on vitamin D if their mother's level during pregnancy was low and according to how much sunlight and vitamin D-rich food the baby gets.

Packed with protective plant pigments, minerals and fibre, fruits and veggies also provide vitamin C for healthy blood.







MENT 84 TABLET

Product Month

Vitamin B12

This large, complex vitamin is needed for healthy blood and the development and growth of the brain. Some breastfed babies may not get enough vitamin B12 if their mother is low on it and this is especially the case if the mother is vegan or has problems with absorbing nutrients. Find vitamin B12 in dairy products, meat, fortified cereals and yeast extract such as Marmite (but not Vegemite).

Iron

This mineral is a component of the blood pigment haemoglobin which carries oxygen to every cell in the body. Your child may be short on iron if he or she drinks too much milk (which is very low in iron) and doesn't eat much else. Children having a growth spurt (the blood becomes diluted and more iron is needed to make up new red blood cells) can be low on iron. Iron deficiency can affect memory, concentration and physical performance. Find iron in meat, liver, wholegrains and pulses.

Calcium

Calcium is the mineral that gives bones and teeth their strength. In 2007, the Children's Nutrition and Physical Activity Survey showed that calcium was a key nutrient of concern – almost 60 per cent of children aged 9-16 years were not meeting the estimated average calcium requirement (EAR) in Australia. Find calcium in dairy products, calcium-enriched soya products including some tofu and in canned salmon.

Zinc

Essential for wound healing, growth and development, zinc is involved in a number of enzyme systems. Zinc deficiency reduces young children's ability to fight infections.

Together with vitamin B6, zinc helps to metabolise (use) essential fatty acids including eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA).

Find zinc in liver, seafood, meat, eggs, dairy products, wholemeal cereals, white beans and nuts.

lodine

An essential component of thyroid hormones, iodine is vital for growth and development. Iodine deficiency in early childhood is linked with poor educational performance.

Studies suggest a lower intake of iodine today compared with past generations which could be due to a number of reasons. For example, eating too many processed foods (many manufacturers don't use iodised salt), and a possible reduction of iodine levels in soil. The move away from iodine-based disinfectants by the dairy industry means there is less iodine in dairy products now, too. So, mild iodine deficiency is common in Australia particularly the southern parts.

Could your child do with some added nutrition?

A nutritional supplement may be suggested if your child:

- Doesn't eat well balanced meals made from fresh ingredients. Eats lots of fast foods or foods that are full of fat and or sugar. The occasional take away is fine but it's important not to eat fast foods regularly.
- Doesn't eat a wide variety of foods or is a fussy eater.
- Is very active and plays physically demanding sports regularly.
- Is a strict vegetarian i.e. does not eat any eggs or milk. If your child is vegan, an iron supplement or a B12 supplement may be required, too.
- Has food allergies such as cow's milk intolerance (may need extra calcium).
- Drinks a lot of fizzy drinks, which can leach vitamins and minerals from the body.
- Has a chronic medical condition such as asthma or digestive problems. Check with your doctor before starting your child on any supplements.

If your child could benefit from a vitamin and mineral supplement, a food supplement such as **Usanimals**[™] could be a good option.

OVERWEIGHT EQUALS UNDERNOURISHED?

One study of school children in New South Wales showed that 17.1 per cent of children were overweight and 5.8 per cent were obese. It seems that overweight children may actually be malnourished!

A recent study found many obese children were one to two centimetres shorter than their counterparts. The findings suggest that the types of food eaten by overweight children provide fats and calories but may not provide enough of the vital nutrients needed for healthy growth and development. So, as well as offering a healthy mixed diet, child-size portions are important – around a third or a quarter of a healthy adult-sized portion is about right.

Iron deficiency can affect memory, concentration and physical performance. Find iron in meat, liver, wholegrains and pulses.





Usanimals™

Product

Month

Any parent will tell you that taste is important when it comes to children's foods and supplements, too; try a chewable tablet if your child doesn't like taking tablets or liquid.

USANA's **Usanimals**[™] is a balanced formula that supports healthy growth and development in children. It provides an excellent range of the essential vitamins, minerals and antioxidants your child needs for healthy immune function and energy levels, bone support and growth and development.

- Provides a balanced formula of vitamins, minerals, and antioxidants for children aged two to 12 years
- Supports immune health with vitamins D and C, selenium and zinc
- Contains calcium, magnesium and vitamin D for strong bones, muscles, joints and teeth
- · Contains B group vitamins with iron and iodine which support energy production for an active lifestyle
- · Contains zinc and iodine to nurture normal overall growth and development
- · Easy-to-eat chewables with fun animal shape prints
- Is free of artificial flavours and sweeteners
- Suitable for vegetarians.

Keep vitamin supplements away and out of reach of children.

*Vitamin supplements should not replace a balanced diet. USE ONLY AS DIRECTED. ALWAYS READ THE LABEL. This product contains selenium which is toxic in high doses. A daily dose of 150 µg for adults of selenium from dietary supplements should not be exceeded. Contains sugars. Choking hazard – not suitable for infants or toddlers less than 2 years old.

Teenage health

Call it pushing the boundaries or a sign of increasing independence, it's normal for teenagers to gradually make more personal choices and that includes choosing what they eat.

While there is no simple test for nutritional deficiencies in children and teenagers, things to look out for include: irritability, sleep problems, slow wound healing and frequent colds and flu. The teenage years are also ones of massive change – physically with sexual maturation and skin changes, too. A daily nutrition supplement may help to bolster teens' changing needs.

Some of the key nutrients that teenagers could be low on are:

Iron

Iron deficiency is a risk, especially for girls once they begin to menstruate. Good sources include beef and other red meats, turkey, pork, spinach, beans, and prunes.

Zinc

The Australian Bureau of Statistics reports that zinc intake is below the recommended daily intake (RDI) for three quarters of girls aged 12-18 years.

Calcium

Until the early twenties, the body continues to add calcium to bones, making them dense and strong. Getting enough calcium is critical to the production of strong healthy bones, particularly in periods of rapid growth. One major study found girls aged 14–16 years appear to be most at risk of not meeting their dietary requirements for calcium (82–89 per cent did not meet the estimated average requirement (EAR)). Similarly, 44 per cent of boys aged 14–16 years did not reach their EAR for calcium.

Magnesium

Another nutrient found to be potentially at risk – over half of teens (56 per cent) did not meet the EAR for magnesium.

Antioxidants

The majority of school students don't consume enough vegetables. These, together with fruits, are bursting with health-giving antioxidants. Antioxidants such as quercetin (found in apples grapes and cabbages), green tea, and proanthocyanidins from grape seed extract can help to protect youthful skin from oxidative stress.

Offer a Usanimals[™] tablet at the end of a meal – it contains fat-soluble vitamins like vitamin D and fat-soluble vitamins can only be absorbed with food. It also helps the body to metabolise essential omega-3 fats.







USANA's Body Rox™ for your teen

Body Rox[™] is a comprehensive and convenient formula of essential vitamins, minerals, and antioxidants specifically formulated for teenagers. **Body Rox**[™]:

- Provides everyday support for overall health, normal healthy immunity and skin
- Contains B group vitamins to support normal energy production and stamina
- Contains calcium and magnesium for healthy bones and teeth
- Contains lutein to support healthy eyes
- · Helps compensate for teens' erratic eating habits
- Suitable for vegetarians.

**Vitamin supplements should not replace a balanced diet. USE ONLY AS DIRECTED. ALWAYS READ THE LABEL. This product contains selenium which is toxic in high doses. A daily dose of 150 µg for adults of selenium from dietary supplements should not be exceeded.



References

Incidence of vitamin D deficiency rickets among Australian children: an Australian Paediatric Surveillance Unit study. Craig F Munns, et al on behalf of the APSU Vitamin D Study Group. Med J Aust 2012; 196 (7): 466-468. Accessed on 18 5 2012. Available from: https://www.mja.com.au/journal/2012/196/7/ incidence-vitamin-d-deficiency-rickets-amongaustralian-children-australian

2007 Australian National Children's Nutrition and Physical Activity Survey – Main Findings. The Commonwealth Department of Health and Ageing, the Department of Agriculture, Fisheries and Forestry, and the Australian Food and Grocery Council. The National Health and Medical Research Council (NH&MRC), Nutrient Reference Values for Australia and New Zealand. Canberra: Australian Government Publishing Services 200. Accessed on 18 May 2012. Available from: http://www.health.gov.au/internet/ main/publishing.nsf/Content/phd-nutrition-childrenssurvey-methodology

Aggarwal R, Sentz J, Miller MA, 2007, Role of Zinc Administration in Prevention of Childhood Diarrhea and Respiratory Illnesses: A Meta-analysis, Pediatrics, 119:1120-1130 Accessed on 18 May 2012. Available from: http://origem.info/FIC/pdf/ AggarwalSentzMiller_Pediatrics.pdf

Are Australian children iodine deficient? Results of the Australian National Iodine Nutrition Study. Mu Li, et al. Med J Aust 2006; 184 (4): 165-169. Accessed on 10 May 2012. Available from: https://www.mja.com. au/journal/2006/184/4/are-australian-children-iodinedeficient-results-australian-national-iodine

SPANS 2012 NSW Schools Physical Activity and Nutrition Survey. Accessed on 18 May 2012. Available from: (http://www.health.nsw.gov.au/pubs/2011/pdf/ spans_2010_summary.pdf)

Letter to the Editor. MJA Vol 179 7 July 2003. Accessed on 18 May 2012. Available from: http://apcen.edfac.usyd. edu.au/staff/odeaj/documents/letters_070703-3.pdf

4802.0 - National Nutrition Survey: Selected Highlights, Australia, 1995. Accessed on 18 May 2012. Available from: http://www.abs.gov.au/ausstats/abs@. nsf/mf/4805.0

2007 Australian National Children's Nutrition and Physical Activity Survey. Accessed on 18 May 2012. Available from: http://www.health.gov.au/internet/ main/publishing.nsf/content/66596E8FC68FD1A3CA2 574D50027DB86/\$File/childrens-nut-phys-survey.pdf

