## Canada's revolutionary new food guide

arlier this year the federal government released a revised and dramatically different version of Canada's Food Guide. This is the ninth iteration of a document that has played a central role in informing what health professionals, the media, and the government tell Canadians about what foods to eat and how to eat it. Initially referred to as Canada's Official Food Rules, the 1942 document was released during wartime rationing, and it was intended to prevent nutritional deficiencies and improve the health of Canadians. The concept of food groups was introduced and specific amounts of foods from each group were suggested for daily consumption.

This information was promulgated through the media and government publications, and later editions were incorporated into school curricula across the country. Limited amounts of processed foods were available before the 1960s and consumption of whole grains and other whole foods were specifically encouraged through the food guide. The 1961 edition reflected the beginning of a revolution in food processing, storage, and transportation, and the widespread availability of processed, canned, and packaged convenience foods. The 1977 revision was colorfully illustrated and brochurelike. The involvement of stakeholders from the food and agricultural industries in this edition paralleled the dramatic shift in Canadians' diets toward more highly processed foods.

By 1992 the food guide was considered the bible of nutrition, with 24 million copies distributed nationwide. Canada's Food Guide

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had become the nutritional backdrop for Cana-

in this pivotal document. Prior to the release of the 2007 edition, this criticism became palpable for what was perceived by some as a wholesale adoption of unhealthy, highly processed foods and beverages in the face of an emerging epidemic of obesity and other diseases that were heavily influenced by di-

etary factors. In one CMAJ article, the 2007 guide was referred to as an "obesogenic recipe for dramatic increases in premature death."1 Yoni Freedhoff, a well-known obesity medicine physician, called it "Canada's Food Guide to

In the years leading up to the 2019 edition, influential elements of the government began to recognize the need to promote major shifts in the diets of Canadians. The 2016 Senate Standing Committee report, Obesity in Canada, stated that "Canada's Food Guide has been at best ineffective, and at worst enabling, with respect to the rising levels of unhealthy weights and diet-related chronic diseases in Canada."3 The committee recommended that the Minister of Health immediately undertake a complete revision of the guide in order for it to better reflect the current state of scientific evidence: "The revised food guide must: Be evidencebased; Apply meal-based rather than nutrientbased principles; Effectively and prominently describe the benefits of fresh, whole foods com-

processed foods; and Make strong statements about restricting consumption of highly processed foods."3 In this report the committee recommended that the Minister of Health revise the food guide on the guidance of an advisory body that "comprises experts in relevant areas of study, including but not limited to nutrition, medicine, metabolism, biochemistry, and biology; and does not include representatives of the food or agriculture industries."3 Remarkably, the health minister acted on all of these recommendations, and the current Canada's Food Guide gradually came to life.

> eating plate" concept,4 the 2019 guide focuses on eating whole, unprocessed foods, and has a large emphasis on healthy food behaviors like eating mindfully, cooking from scratch at home, enjoying wholesome food, and eating meals with others. Although it has been heavily criticized by the

Based on the "healthy

food industry and a few health care professionals, most of us on the front lines of obesity medicine consider it one of the premier triumphs of democracy, science, and common sense. In my practice, Canada's Food Guide and its many associated resources now play a central role in helping me guide patients toward an enjoyable diet based on real food, perhaps for the first time in their lives.

—Michael Lvon, MD

## References

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