The Fetal Programming of Food Preferences

Dr. Patricia Silveira
Professor, Departamento de Pedriatia, Faculdade de Medicina, Universidade Federal do Rio Grande do Sul

Dr. Andre Portella
Professor, Departamento de Pediatria, Universidade Federal de Ciências Médicas de Porto Alegre, Porto Alegre, RS, Brazil

Thursday, May 14th, 2015
11am-12:15 pm EST

For more information contact:
Dr. Chris Lannon
Managing Director, MCCHE
E: chris.lannon@mcgill.ca T: +1.514.398.3326

Abstract
Adverse conditions during pregnancy, such as chronic diseases (e.g. infections, hypertension), exposure to certain drugs (e.g. tobacco), and malnutrition can lead to fetal growth impairment resulting in low birth weight newborns. These low birth weight newborns, as well as high birth weight newborns (often resulting from gestational diabetes), have increased risk for developing chronic non-communicable diseases (e.g. obesity, type II diabetes, cardiovascular disease) long term. Our group describes evidence that altered fetal growth leads to the programming of food preferences and feeding behaviour. We also explore the mechanisms responsible for the association between altered fetal growth and specific food preferences, as well as variables that can moderate this association. The findings point to a persistent alteration in food preferences in individuals exposed to fetal growth restriction or overgrowth, which possibly contributes to the development of chronic non-communicable diseases in adult life.

The McGill Centre for Convergence of Health and Economics (MCCHE) is a world leader in promoting the development of a novel integrative approach to the study of nutrition-related global health challenges. The MCCHE believes that these challenges are best addressed with a collaborative, integrated, trans-disciplinary approach. The Global Obesity Roadmap project is part of MCCHE’s broader research into developing a model of motivated choice and transformative innovation for obesity prevention and control.