

Overview on Dietary Reference Values for the EU population as derived by the EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA)

The term Dietary Reference Value (DRV) is an umbrella term for the complete set of nutrient reference values which include, among others, concepts like the Population Reference Intakes, the Average Requirements, Adequate Intakes and Reference Intake ranges for macronutrients (EFSA NDA Panel, 2010), which indicate the amount of an individual nutrient that people need for good health depending on their age and gender.

In its opinions, EFSA used four types of DRVs:

- The **Population Reference Intake** (**PRI**), which is the level of (nutrient) intake that is adequate for virtually all people in a population group. On the assumption that the individual requirements for a nutrient are normally distributed within a population and the interindividual variation is known, the PRI is calculated on the basis of the AR plus twice its standard deviation (SD). This will meet the requirements of 97.5% of the individuals in the population.
- The **Average Requirement** (**AR**), which is the level of (nutrient) intake estimated to satisfy the physiological requirement or metabolic demand, as defined by the specified criterion for adequacy for that nutrient, in half of the people in a population group, given a normal distribution of requirement.
- The Adequate Intake (AI), which is the value estimated when a PRI cannot be established because an AR cannot be determined. An Adequate Intake is the average observed or experimentally determined approximations or estimates of nutrient intake by a population group (or groups) of apparently healthy people that is assumed to be adequate. The practical implication of an AI is similar to that of a PRI, i.e. describe the level of intake that is considered adequate for health reasons. The terminological distinction relates to the different way in which these values are derived and to the resultant difference in the "firmness" of the value.
- The **Reference Intake range (RI)**, which is the intake range for macronutrients, expressed as % of the energy intake. These apply to ranges of intakes that are adequate for maintaining health and associated with a low risk of selected chronic diseases.

The work done by EFSA in this area was based on a request from the European Commission, which asked EFSA to update previous European advice (SCF, 1993), taking into account new scientific evidence and recent recommendations issued at national and international level.

This document provides an overview about the outcome of EFSA's scientific deliberations. The detailed reasoning for establishing individual values can be found in the related opinions of the NDA Panel. Links to the respective opinions are included in Table 7 of this document.



Table 1: Summary of Average Requirements (AR) for **energy** and Population Reference Intakes (PRIs) for **protein**

4					AR for (MJ	Energ (a)/d)	y			
$Age^{(b)}$				it (c)	a			it		nt
				=1.4 ^(c)		=1.6 ^(c)	PAL=			=2.0 ^(c)
	M	F	M	F	M	F	M	F	M	F
7 mo	2.7	2.4								
8 mo	2.8	2.5								
9 mo	2.9	2.6								
10 mo	3.0	2.7								
11 mo	3.1	2.8								
1 y			3.3	3.0						
2 y			4.3	4.0						
3 y			4.9	4.6		- -				
4 y			5.3	4.9	6.0	5.6	6.8	6.3		
5 y			5.6	5.2	6.4	5.9	7.2	6.7		
	6 y 5.9 5.5 6.7 6.3 7.6 7.1									
7 y			6.3	5.8	7.2	6.7	8.1	7.5		
8 y			6.7	6.2	7.6	7.1	8.6	7.9		
9 y			7.0	6.6	8.1	7.5	9.1	8.4	10.1	0.7
10 y					8.1	7.6	9.1	8.6	10.1	9.5
11 y					8.5	8.0	9.6	9.0	10.7	10.0
12 y					9.1	8.4	10.2	9.4	11.4	10.5
13 y					9.8	8.8	11.0	9.9	12.2	11.0
14 y					10.5	9.1	11.8	10.2	13.1	11.4
15 y					11.3	9.3	12.7	10.5	14.1	11.7
16 y					11.9	9.5	13.4	10.6	14.9	11.8
17 y					12.3	9.5	13.8	10.7	15.4	11.9
18-29 y			9.8	7.9	11.2	9.0	12.6	10.1	14.0	11.2
30-39 y			9.5	7.6	10.8	8.7	12.2	9.8	13.5	10.8
40-49 y			9.3	7.5	10.7	8.6	12.0	9.7	13.4	10.7
50-59 y			9.2	7.5	10.5	8.5	11.9	9.6	13.2	10.7
60-69 y			8.4	6.8	9.6	7.8	10.9	8.8	12.1	9.7
70-79 y			8.3	6.8	9.5	7.7	10.7	8.7	11.9	9.6
				Pre	gnancy					
1 st trimeste	er					+ ().29 ^(d)			
2^{nd} trimester $+1.1^{(d)}$										
3 rd trimest	er					+ 2	2.1 ^(d)			
				La	ctation					
0-6 mo <i>po</i> .	st partu	m				+ 2	2.1 ^(d)			

А	day: F	female	M	male:	mο	months:	PAI	nhy	vsical	activity	level.	v	vears
u,	uay, I	, iciliaic	, IVI.	, maic.	mo.	monuis.	I AL,	pm	ysicai	activity	/ IC VCI,	у,	ycars

 $^{^{(}a)}$ 1 MJ = 238.83 kcal

	PRI							
	Prot							
Age	(g/kg bw ^(e)	per day)						
	M	₩.						
0.5	1.3	F						
0.5 y								
1 y	1.1							
1.5 y	1.0							
2 y	0.9							
3 y	0.9							
4 y	0.8							
5 y	0.8							
6 y	0.8							
7 y	0.91							
8 y	0.92 0.92							
9 y								
10 y	0.9							
11 y	0.91	0.90						
12 y	0.90	0.89						
13 y	0.90	0.88						
14 y	0.89	0.87						
15 y	0.88	0.85						
16 y	0.87	0.84						
17 y	0.86	0.83						
18-59 y	0.8							
≥ 60 y	0.8	33						
	Pregnancy							
1 st trimester	$+1 g^{(f)}$							
2 nd trimester		$+9 g^{(t)}$						
3 rd trimester		$+28 g^{(f)}$						
	Lactation							
0-6 mo <i>post</i>	partum	$+19 g^{(f)}$						
>6 mo post partum +13 g ⁽								

bw, body weight; F, female; M, male; y, years

⁽b) ARs for energy are calculated by multiplying estimates of resting energy expenditure (REE), derived from predictive equations, with PAL values. For estimating REE in adults, anthropometric data from representative national surveys in EU Member States were used. ARs for energy were not calculated for adults ≥ 80 years because of a lack of anthropometric data from EU countries for this age group.

PAL values of 1.4, 1.6, 1.8 and 2.0 reflect low active (sedentary), moderately active, active and very active lifestyles (EFSA NDA Panel, 2013).

 $^{^{(}d)}$ in addition to the AR for energy of non-pregnant women

⁽e) to be multiplied by reference body weights to calculate values in g/day

in addition to the PRI for protein of non-pregnant women



Summary of Reference Intake Ranges (RI) for total fat and carbohydrates and Adequate Intakes (AIs) for fatty acids, dietary fibre and water Table 2:

Age group (years)	Total fat (E%) ^(a)	SFA	LA (E%) ^(b)	ALA (E%) ^(b)	EPA+DHA (mg/d) ^(b)	DHA (mg/d) ^(b)	TFA	Age group (years)	Total carbohydrates (E%) ^(a)	Dietary fibre (g/d) ^(b)	Age group (years)	Wat (L/d) ⁶ M	
7-11 mo ^(d)	40 ^(b)	ALAP	4	0.5		100	ALAP				6-12 mo	0.8-	1.0
1	35-40	ALAP	4	0.5		100	ALAP	1-3	45-60	10	1	1.1-	1.2
2-3	35-40	ALAP	4	0.5	250		ALAP				2-3	1.3	3
4-17	20-35	ALAP	4	0.5	250			4-6	45-60	14	4-8	1.0	6
								7-10	45-60	16	9-13	2.1	1.9
								11-14	45-60	19	14-17	2.5	2.0
								15-17	45-60	21			
≥ 18	20-35	ALAP	4	0.5	250		ALAP	≥ 18	45-60	25	≥ 18	2.5	2.0
	-	-	-	-	_	Pre	gnancy	-		-	-	-	
	20-35	ALAP	4	0.5	250	+100-200 ^(e)	ALAP						2.3
						Lac	ctation						
	20-35	ALAP	4	0.5	250	+100-200 ^(e)	ALAP						2.7

ALA; α-linolenic acid; ALAP, as low as possible; d, day; DHA, docosahexaenoic acid; E% percentage of energy intake; EPA, eicosapentaenoic acid; F, female; L, liter; LA, linoleic acid; M,

mo, months, SFA, saturated fatty acids; TFA, trans-fatty acids

⁽a) RI

⁽b) AI

⁽c) includes water from beverages of all kind, including drinking and mineral water, and from food moisture (d) i.e. the second half of the first year of life (from the beginning of the 7th month to the 1st birthday) (e) in addition to combined intakes of EPA and DHA of 250 mg/day



Population Reference Intakes (PRIs) and Adequate Intakes (AIs) for minerals^{1,2} - MALES Table 3:

Age group (years)	Calcium (mg/d)	Age group (years)	Fluoride (mg/d)	Iodine (µg/d)	Manganese (mg/d)	Molybdenum (μg/d)	Phosphorus (mg/d)	Potassium (mg/d)	Selenium (µg/d)	Age group (years)	Iron (mg/d)	Age group (years)	Copper (mg/d)	Magnesium (mg/d)	Age group (years)	LPI (mg/d)
7–11 mo ^(a)	280	7–11 mo ^(a)	0.4	70	$0.02-0.5^{(b)}$	10	160	750	15	7–11 mo ^(a)	11	7–11 mo ^(a)	0.4	80	7–11 mo ^(a)	(c) 2.9
1–3	450	1–3	0.6	90	0.5	15	250	800	15	1–6	7	1–2	0.7	170	1–3	(c) 4.3
4–10	800	4–6	1.0	90	1.0	20	440	1,100	20			3–9	1.0	230	4–6	(c) 5.5
		7–10	1.5	90	1.5	30	440	1,800	35	7–11	11	10–17	1.3	300	7–10	(c) 7.4
11–17	1,150	11–14	2.2	120	2.0	45	640	2,700	55						11–14	(c) 10.7
		15–17	3.2	130	3.0	65	640	3,500	70	12–17	11				15–17	(c) 14.2
18–24	1,000	≥ 18	3.4	150	3.0	65	550	3,500	70	≥ 18	11	≥ 18	1.6	350	≥ 18	3 00 9.4
≥ 25	950															600 11.7
																900 14.0
																1,200 16.3

d, day; LPI, level of phytate intake; mo, months

⁽a) i.e. the second half of the first year of life (from the beginning of the 7th month to the 1st birthday)

(b) In view of the wide range of manganese intakes that appear to be adequate, a range is set for the AI of this age group

(c) The fractional absorption of zinc considered in setting PRIs for children was based on data from mixed diets expected to contain variable quantities of phytate; therefore, no adjustment for phytate intake has been made

¹ For chromium, setting an AI or a PRI was considered not appropriate ² The evaluation for sodium and chloride is ongoing



Population Reference Intakes (PRIs) and Adequate Intakes (AIs) for minerals^{3,4} - FEMALES Table 4:

Age group (years)	Calcium (mg/d)	Age group (years)	Fluoride (mg/d)	Iodine (μg/d)	Manganese (mg/d)	Molybdenum (µg/d)	Phosphorus (mg/d)	Potassium (mg/d)	Selenium (µg/d)	Age group (years)	Iron (mg/d)	Age group (years)	Copper (mg/d)	Magnesium (mg/d)	Age group (years)	LPI (mg/d)	(mg/d)
7–11 mo ^(a)	280	7–11 mo ^(a)	0.4	70	$0.02 – 0.5^{(b)}$	10	160	750	15	7–11mo ^(a)	11	7–11 mo ^(a)	0.4	80	7–11 mo ^(a)	(c)	2.9
1–3	450	1–3	0.6	90	0.5	15	250	800	15	1–6	7	1–2	0.7	170	1–3	(c)	4.3
4–10	800	4–6	0.9	90	1.0	20	440	1,100	20			3–9	1.0	230	4–6	(c)	5.5
		7–10	1.4	90	1.5	30	440	1,800	35	7–11	11	10–17	1.1	250	7–10	(c)	7.4
11–17	1,150	11–14	2.3	120	2.0	45	640	2,700	55						11–14	(c)	10.7
		15–17	2.8	130	3.0	65	640	3,500	70	12–17	13				15–17	(c)	11.9
18-24	1,000	≥ 18	2.9	150	3.0	65	550	3,500	70	≥ 18	(1)	≥ 18	1.3	300	≥ 18	300	7.5
≥ 25	950									Premenopausal	16 ^(d)					600	9.3
										Postmenopausal	11					900	11.0
																1,200	12.7
		1 -					·		egnanc	ey .	(d)	1			1		(0)
18–24	1000		2.9	200	3.0	65	550	3,500	70		16 ^(d)		1.5	300			+1.6 ^(e)
≥ 25	950																
		,							ctatio	n	(T	n .			1		
18–24	1000		2.9	200	3.0	65	550	4,000	85		16 ^(d)		1.5	300			+2.9 ^(e)
≥ 25	950	hytata intaka:															

d, day; LPI, level of phytate intake; mo, months

⁽a) i.e. the second half of the first year of life (from the beginning of the 7th month to the 1st birthday)

(b) In view of the wide range of manganese intakes that appear to be adequate, a range is set for the AI of this age group

(c) The fractional absorption of zinc considered in setting PRIs for children was based on data from mixed diets expected to contain variable quantities of phytate; therefore, no adjustment for phytate intake has been made

³ For chromium, setting an AI or a PRI was considered not appropriate

⁴ The evaluation for sodium and chloride is ongoing



 $^{\rm (d)}$ The PRI covers the requirement of approximately 95 % of premenopausal women $^{\rm (e)}$ In addition to the PRIs for non-pregnant, non-lactating women



Table 5: Population Reference Intakes (PRIs) and Adequate Intakes (AIs) for vitamins - MALES

Age group (years)	a-Tocopherol (mg/d)	Age group (years)	Biotin (µg/d)	Choline (mg/d)	Cobalamin (μg/d)	Folate (µg DFE/d) ^(a)	Niacin (mg NE/MJ) ^(b)	Pantothenic acid (mg/d)	Riboflavin (mg/d)	Thiamin (mg/MJ)	Vitamin A (µg RE/d) ^{(©}	Vitamin B6 (mg/d)	Vitamin C (mg/d)	Vitamin D (µg/d)	Vitamin K (µg/d) ^(f)
7–11 mo ^(d)	5	7–11 mo ^(d)	6	160	1.5	80	1.6	3	0.4	0.1	250	0.3	20	10	10
1–2	6	1–3	20	140	1.5	120	1.6	4	0.6	0.1	250	0.6	20	15 ^(e)	12
3–9	9	4–6	25	170	1.5	140	1.6	4	0.7	0.1	300	0.7	30	15 ^(e)	20
		7–10	25	250	2.5	200	1.6	4	1.0	0.1	400	1.0	45	15 ^(e)	30
10–17	13	11–14	35	340	3.5	270	1.6	5	1.4	0.1	600	1.4	70	15 ^(e)	45
		15–17	35	400	4.0	330	1.6	5	1.6	0.1	750	1.7	100	15 ^(e)	65
≥ 18	13	≥ 18	40	400	4.0	330	1.6	5	1.6	0.1	750	1.7	110	15 ^(e)	70

d, day; mo, months

⁽a) DFE: dietary folate equivalents. For combined intakes of food folate and folic acid, DFEs can be computed as follows: μg DFE = μg food folate + (1.7 x μg folic acid)

⁽b) NE: niacin equivalent (1 mg niacin = 1 niacin equivalent = 60 mg dietary tryptophan) (c) RE: retinol equivalent, 1 μ g RE equals 1 μ g of retinol, 6 μ g of β -carotene and 12 μ g of other provitamin A carotenoids (d) i.e. the second half of the first year of life (from the beginning of the 7th month to the 1st birthday)

⁽e) Under conditions of assumed minimal cutaneous vitamin D synthesis. In the presence of endogenous cutaneous vitamin D synthesis, the requirement for dietary vitamin D is lower or may be even zero

⁽f) based on phylloquinone only



Table 6: Population Reference Intakes (PRIs) and Adequate Intakes (AIs) for **vitamins – FEMALES**

Age group (years)	a-Tocopherol (mg/d)	Age group (years)	Biotin (µg/d)	Choline (mg/d)	Cobalamin (µg/d)	Folate (µg DFE/d) (a)	Niacin (mg NE/MJ) ^(b)	Pantothenic acid (mg/d)	Riboflavin (mg/d)	Thiamin (mg/MJ)	Vitamin A (µg RE/d) ^{(©}	Vitamin B6 (mg/d)	Vitamin C (mg/d)	Vitamin D (µg/d)	Vitamin K (µg/d) ^(f)
7–11 mo ^(d)	5	7–11 mo ^(d)	6	160	1.5	80	1.6	3	0.4	0.1	250	0.3	20	10	10
1–2	6	1–3	20	140	1.5	120	1.6	4	0.6	0.1	250	0.6	20	15 ^(e)	12
3–9	9	4–6	25	170	1.5	140	1.6	4	0.7	0.1	300	0.7	30	15 ^(e)	20
		7–10	25	250	2.5	200	1.6	4	1.0	0.1	400	1.0	45	15 ^(e)	30
10–17	11	11–14	35	340	3.5	270	1.6	5	1.4	0.1	600	1.4	70	15 ^(e)	45
		15–17	35	400	4.0	330	1.6	5	1.6	0.1	650	1.6	90	15 ^(e)	65
≥ 18	11	≥ 18	40	400	4.0	330	1.6	5	1.6	0.1	650	1.6	95	15 ^(e)	70
		•				Pre	gnancy								
	11		40	480	4.5	600	1.6	5	1.9	0.1	700	1.8	105	15 ^(e)	70
						La	ctation								
	11		45	520	5.0	500	1.6	7	2.0	0.1	1,300	1.7	155	15 ^(e)	70

d, day; mo, months

⁽a) DFE: dietary folate equivalents. For combined intakes of food folate and folic acid, DFEs can be computed as follows: µg DFE = µg food folate + (1.7 x µg folic acid)

⁽b) NE: niacin equivalent (1 mg niacin = 1 niacin equivalent = 60 mg dietary tryptophan)

⁽c) RE: retinol equivalent, 1 μg RE equals 1 μg of retinol, 6 μg of β-carotene and 12 μg of other provitamin A carotenoids

⁽d) i.e. the second half of the first year of life (from the beginning of the 7th month to the 1st birthday)

⁽e) Under conditions of assumed minimal cutaneous vitamin D synthesis. In the presence of endogenous cutaneous vitamin D synthesis, the requirement for dietary vitamin D is lower or may be even zero

⁽f) based on phylloquinone only



 Table 7:
 Links to Scientific Opinions on dietary reference values

General principles	Energy, macronutrients and water
http://www.efsa.europa.eu/en/efsajournal/pub/1458	Energy: http://www.efsa.europa.eu/en/efsajournal/pub/3005
	Fats: http://www.efsa.europa.eu/en/efsajournal/pub/1461
	Carbohydrates and dietary fibre: http://www.efsa.europa.eu/en/efsajournal/pub/1462
	Protein: http://www.efsa.europa.eu/en/efsajournal/pub/2557
	Water: http://www.efsa.europa.eu/en/efsajournal/pub/1458
Vitamins	Minerals
Alpha-tocopherol: http://www.efsa.europa.eu/en/efsajournal/pub/4149.htm	Calcium: http://www.efsa.europa.eu/en/efsajournal/pub/4101.htm
Choline: https://www.efsa.europa.eu/en/efsajournal/pub/4484.htm	Chromium: http://www.efsa.europa.eu/en/efsajournal/pub/3845.htm
Cobalamin: http://www.efsa.europa.eu/en/efsajournal/pub/4150.htm	Copper: http://www.efsa.europa.eu/en/efsajournal/pub/4253
Biotin: http://www.efsa.europa.eu/en/efsajournal/pub/3580.htm	Fluoride: http://www.efsa.europa.eu/en/efsajournal/pub/3332.htm
Folate: http://www.efsa.europa.eu/en/efsajournal/pub/3893.htm	Iodine: http://www.efsa.europa.eu/en/efsajournal/pub/3660.htm
Niacin: http://www.efsa.europa.eu/en/efsajournal/pub/3759.htm	Iron: http://www.efsa.europa.eu/it/efsajournal/pub/4254
Pantothenic acid: http://www.efsa.europa.eu/en/efsajournal/pub/3581.htm	Magnesium: http://www.efsa.europa.eu/it/efsajournal/pub/4186.htm
Thiamin: https://www.efsa.europa.eu/en/efsajournal/pub/4653.htm	Manganese: http://www.efsa.europa.eu/en/efsajournal/pub/3419.htm
Riboflavin: https://www.efsa.europa.eu/en/efsajournal/pub/4919	Molybdenum: http://www.efsa.europa.eu/en/efsajournal/pub/3333.htm
Vitamin A: http://www.efsa.europa.eu/en/efsajournal/pub/4028.htm	Phosphorus: http://www.efsa.europa.eu/en/efsajournal/pub/4185.htm
Vitamin B6: https://www.efsa.europa.eu/en/efsajournal/pub/4485.htm	Potassium: https://www.efsa.europa.eu/en/efsajournal/pub/4592.htm
Vitamin C: http://www.efsa.europa.eu/en/efsajournal/pub/3418.htm	Selenium: http://www.efsa.europa.eu/en/efsajournal/pub/3846.htm
Vitamin D: http://www.efsa.europa.eu/en/efsajournal/pub/4547.htm	Zinc: http://www.efsa.europa.eu/en/efsajournal/pub/3844.htm
Vitamin K: http://www.efsa.europa.eu/en/efsajournal/pub/4780.htm	



References

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EFSA NDA Panel (EFSA Panel on Dietetic Products Nutrition and Allergies), 2013. Scientific Opinion on Dietary Reference Values for energy. EFSA Journal 2013;11(1):3005, 112 pp. doi:10.2903/j.efsa.2013.3005

SCF (Scientific Committee for Food), 1993. Nutrient and energy intakes for the European Community. Reports of the Scientific Committee for Food, 31st Series. Food - Science and Technique, European Commission, Luxembourg, 248 pp.