

Development of the FiberScreen: a short questionnaire to estimate fiber intake in healthy adults

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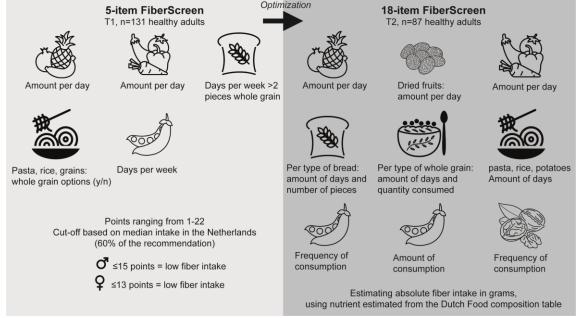
Background

Eligibility criteria for dietary fiber interventions often include a low fiber intake, which requires dietary screening during recruitment. However, current methods are unnecessary extensive and burdensome for both researcher and participant.

Therefore, we aimed to develop and validate a fiber screening questionnaire (FiberScreen) with a short completion time.

Methods

This was part of a high-fiber intervention study. The FFQ and FiberScreen were performed twice, during screening (n=131) and at 3-month follow-up (n=87). The FiberScreen was optimized in between two measurements (*Figure 1*).



Results

- **T1:** 5-item FiberScreen score = 8.5 ± 3.1 points vs FFQ = 22.6 ± 8.0 g of fiber, which correlated moderately, r=.356, p<.000. Correlations between food categories ranged between r=.126 and r=.374
- **T2**: 18-item FiberScreen = 24.5 ± 6.0 g, FFQ = 23.7 ± 6.6 g of fiber, p=.138, with a strong correlation r=.705, p<.001, see *Table 1*

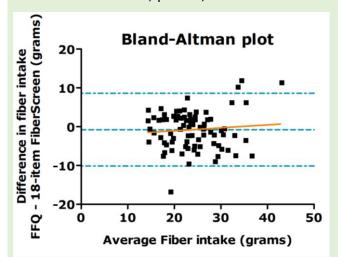


Figure 2 Bland-Altman plot between the 18-item FiberScreen and the FFQ, n=87

Table 1 Comparison between the FFQ and the 18-item FiberScreen in n=87 healthy adults, T2

	Pearsons r	Δ
Total dietary fiber	.705*	-0.77 ± 4.8
Fruit	.707*	0.60 ± 1.7*
Vegetables	.457*	0.14 ± 1.5
Whole grain	.603*	0.59 ± 2.9
Pasta/rice/potatoes	.505*	-1.60 ± 1.2*
Legumes	.731*	0.27 ± 1.4
Nuts and seeds	.469*	-5.24 ± 2.1*
* Indicatos significanco n < OF		

^{*} Indicates significance, p <.05

Bland-Altman plot (*Figure 2*) showed good agreement between the two questionnaires, although the 95% limit of agreement was quite wide (-10.2-8.62 g of fiber). The difference between the questionnaires was not different for a different average intake ($\beta=0.08\pm0.09$, p=.401)

Completion time: 18-item FiberScreen = 4.19 ± 2.03 min, FFQ = estimated 45-60 min.

Conclusion

The 18-item FiberScreen is a valid short method to screen and rank participants' fiber intake.

