Global Recommendations for EPA and DHA Intake (Rev 16 April 2014)

Country/Region	Organization	Org. Type	Target Population	Recommendation
Global	World Health Organization (WHO)[1]	Authoritative Body	General adult population	▪ n-3 PUFAs: 1-2% of energy/day
	Food and Agriculture Organization of the United Nations (FAO)[2]	Authoritative Body	0-6 months	▪ DHA: 0.1-.018%E
			6-24 months	▪ DHA: 10-12 mg/kg bw
			2-4 years	▪ EPA + DHA: 100-150 mg
			4-6 years	▪ EPA + DHA: 150-200 mg
			6-10 years	▪ EPA + DHA: 200-250 mg
			Pregnant/Lactating Women	▪ EPA + DHA: 0.3 g/d of which at least should be 0.2 g/d
	International Society for the Study of Fatty Acids and Lipids (ISSFAL)	Expert Scientific Organization	General adult population for cardiovascular health[3]	▪ at least 500 mg/day of EPA+DHA
			Pregnant/Lactating Women[4]	▪ DHA: 200 mg/day
	NATO Workshop on ω-3 and ω-6 Fatty Acids[5]	Workshop	General Adult Population	▪ 300-400 mg EPA+DHA/day
	World Association of Perinatal Medicine[6]	Working Group	Pregnant and Lactating Women	▪ 200 mg DHA/ day
			Infants, when breastfeeding is not possible	▪ 0.2-0.5% wt total fat
	World Gastroenterology Organisation[7]	Expert Scientific Organization	General Adult Population	▪ 3-5 servings/wk of fish
Australia	National Heart Foundation of Australia[8]	Expert Scientific Organization	General adult population to lower risk of CHD	▪ 500 mg EPA + DHA per day, obtained through fish, fish oil capsules, or enriched foods & drinks
			Patients with documented CHD	▪ 1000 mg EPA + DHA per day, obtained through fish, fish oil capsules, or enriched foods & drinks
			Patients with hypertriglyceridemia	▪ 1200mg of EPA + DHA per day, obtained through fish, fish oil

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				capsules or enriched foods & drinks as first-line therapy ▪ Increase to 4000 mg of EPA +DHA per day, as needed.
	Australian & New Zealand Health Authorities (Department of Health & Ageing, National Health & Medical Research Council)[9]	Authoritative Bodies	Infants (0-12 mo)	▪ 0.5 g n-3 polyunsaturated fats/day adequate intake
			Boys & Girls (1-3 yrs)	▪ 40 mg total LC n-3 (DHA+EPA+DPA) / day adequate intake
			Boys & Girls (4-8 yrs)	▪ 55 mg total LC n-3 (DHA+EPA+DPA) / day adequate intake
			Boys & Girls (9-13 yrs)	▪ 70 mg total LC n-3 (DHA+EPA+DPA) / day adequate intake
			Boys (14-18 yrs)	▪ 125 mg total LC n-3 (DHA+EPA+DPA) / day adequate intake
			Girls (14-18 yrs)	▪ 85 mg total LC n-3 (DHA+EPA+DPA) / day adequate intake
			Men (19+ yrs)	▪ 160 mg total LC n-3 (DHA+EPA+DPA) per day adequate intake
			Women (19+ yrs)	▪ 90 mg total LC n-3 (DHA+EPA+DPA) / day adequate intake
			Pregnancy (14 -18 yrs)	▪ 110 mg total LC n-3 (DHA+EPA+DPA) / day
			Pregnancy (19-50 yrs)	▪ 115 mg total LC n-3 (DHA+EPA+DPA) / day
			Lactating (14-18 yrs)	▪ 140 mg LC n-3 (DHA+EPA+DPA) / day

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			Lactating (19-50 yrs)	▪ 145 mg LC n-3 (DHA+EPA+DPA) / day
			Men-Suggested dietary target to reduce chronic disease risk	▪ 610mg LC n-3 (DHA+EPA+DPA) / day
			Women-Suggested dietary target to reduce chronic disease risk	▪ 430mg LC n-3 (DHA+EPA+DPA) / day
	Defence Science and Technology Organisation, Australian Government Department of Defence[10]	Authoritative Body	Male soldiers	▪ 610mg EPA+DPA+DHA/ day
			Female soldiers	▪ 430mg EPA+DPA+DHA / day
Europe	Expert Workshop of the European Academy of Nutritional Sciences[11]	Expert Scientific Organization	General Adult Population	▪ People who do not eat fish should consider obtaining 200 mg EPA + DHA from other sources
	European Food Safety Authority[12]	Authoritative Body	General Adult Population	▪ 250mg EPA+DHA /day
			Pregnant & Lactating Women	▪ 100-200 mg DHA / day in addition to general adult requirements
			Children 7-24 months	▪ 100 mg DHA / day
			Children 2-18 years	▪ 250mg EPA+DHA /day
	The PeriLip and EARNEST projects of the European Commission[4]	Expert Scientific Organization	Pregnant & Lactating Women	▪ 200mg DHA/day
	Fifth Joint Task Force of the European Society of Cardiology and Other Societies on Cardiovascular Disease Prevention in Clinical Practice (constituted by representatives of nine societies and by invited experts)[13]	Expert Scientific Organization	General Adult Population for Cardiovascular Disease Risk Reduction	▪ Fish at least twice a week, one of which to be oily fish.
	Task Force on	Expert		• Increase consumption of omega-

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	the Management of ST-Segment Elevation Acute Myocardial Infarction of the European Society of Cardiology[14]	Scientific Organization		3 fatty acid (oily fish) • Supplementation with 1 g of fish oil in patients with a low intake of oily fish ▪ omega-3 supplements should be considered in patients who do not tolerate statins, especially if TG >150 mg/dL (1.7 mmol/L)
	Task Force for the management of dyslipidaemias of the European Society of Cardiology (ESC) and the European Atherosclerosis Society (EAS)[15]	Expert Scientific Organization	General Adult Population for Cardiovascular Disease Risk Reduction	▪ At least two or three portions of fish per week
			Secondary prevention of CVD	▪ 1 g/day n-3 unsaturated fats, which is not easy to derive exclusively from natural food sources, and use of nutraceutical and/or pharmacological supplements may be considered
France	AFFSA[16]	Authoritative Body	General Adult Population	▪ 500 mg EPA + DHA / day ▪ 250 mg EPA / day ▪ 250 mg DHA / day
			Metabolic Syndrome-Diabetes-Obesity Risk Reduction	▪ 500 mg EPA + DHA / day
			Cardiovascular Risk Reduction	▪ 500-750 mg EPA + DHA / day
			Breast & Colon Cancer Risk Reduction	▪ 500 mg EPA + DHA / day
			Neuropsychiatric Risk Reduction	▪ >200-300 mg EPA + DHA / day
			Age-Related Macular Degeneration Risk Reduction	▪ 500 mg EPA + DHA / day
			Infants (0-6 months)	▪ 0.32% of fats from DHA ▪ EPA < DHA

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			Infants & Toddlers (6 months to 3 years)	▪ 70mg DHA /day
			Children (3-9 years)	▪ 125mg DHA /day ▪ 250mg EPA+DHA /day
			Adolescents (9 to 18 years)	▪ 250mg DHA /day ▪ 250mg EPA+DHA /day
			Pregnant & Lactating Women	▪ 250mg DHA /day ▪ 250mg EPA+DHA day
Austria	Austrian Society for Nutrition[17]	Expert Scientific Organization	General adult population	▪ 250mg LCPUFA / day for primary prevention of CVD
			General adult population	▪ 0.5% of energy total n-3 PUFA intake
			CHD Patients	▪ 1g LCPUFA / day for secondary prevention of CVD
			Pregnant & nursing women	▪ At least 200mg DHA / day
Germany	German Society for Nutrition[17]	Expert Scientific Organization	General adult population	▪ 250mg LCPUFA / day for primary prevention of CVD
			General adult population	▪ 0.5% of energy total n-3 PUFA intake
			CHD Patients	▪ 1g LCPUFA / day for secondary prevention of CVD
			Pregnant & nursing women	▪ At least 200mg DHA / day
	Healthy Start - Young Family Network[25, 45, 57]	Expert Scientific Organization	Pregnant women	• to supply the recommended 200mg/day of DHA, consume 2 servings/wk of marine fish, including at least one serving of fatty sea fish (such as mackerel, Herring, sardines, salmon) ▪ pregnant women who do not regularly consume fish, the use of supplements with the Omega-3 fatty acid DHA is recommended
Switzerland	Swiss Society for Nutrition Research	Expert	General adult population	▪ 250mg LCPUFA / day for primary

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	/ Swiss Nutrition Association[17]	Scientific Organization		prevention of CVD
			General adult population	▪ 0.5% of energy total n-3 PUFA intake
			CHD Patients	▪ 1g LCPUFA / day for secondary prevention of CVD
			Pregnant & nursing women	▪ At least 200mg DHA / day
Belgium	Superior Health Council of Belgium[18]	Authoritative Body	Pregnant & nursing women	▪ 250mg DHA / day
			General adult population (primary cardioprevention)	▪ Two servings of fatty fish/wk
			secondary cardioprevention	▪ 1g EPA+DHA per day
Netherlands	Health Council of the Netherlands	Authoritative Body	0-5 months[19]	▪ ▪ DHA: 20 mg/kg/day
			6-11 months[19]	▪ N-3 fatty acids from fish: 15-20 mg/kg/day
			1-18 years old[19]	▪ N-3 fatty acids from fish: 15-20 mg/kg/day
			19 years +[19]	▪ N-3 fatty acids from fish: 20 mg/kg/day
			Pregnant women[19]	▪ N-3 fatty acids from fish: 20 mg/kg/day
			Lactating women[19]	▪ N-3 fatty acids form fish: 20 mg/kg/day
			Adults[20]	• n-3 fatty acids from fish: 450 mg/day
Scandinavia	Nordic Council of Ministers[21]	Authoritative Body	6-11 months	▪ n-3 fatty acids should contribute at least 1 E%
			12-23 months	▪ n-3 fatty acids should contribute at least 0.5 E%
			Adults and children from 2 yrs of age	▪ n-3 fatty acids should contribute at least 1.0 E%
			Pregnant & Lactating Women	▪ 1 E% from n-3 fatty acids of which 200 mg/d should be DHA
United Kingdom	British Nutrition Foundation[22]	Expert	Adults, 19-50 yrs	▪ one to two portions of oil-rich

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		Scientific Organization		fish per week, which will provide around 2-3g of the very long chain *n-3* fatty acids ▪ weekly intake of 1.5g of EPA + DHA
	Committee on Medical Aspects of Food Policy (COMA)[23]	Authoritative Body	Adults	▪ at least two portions of fish, of which one should be oily, weekly ▪ n-3 PUFA intake: 0.2 g/day
	Scientific Advisory Committee on Nutrition (SACN)[24]	Authoritative Body	Adults	▪ at least two portions of fish, of which one should be oily, weekly ▪ n-3 PUFA intake: 0.45 g/day
	National Institute for Health and Clinical Excellence (May 2008)[26]	Authoritative Body	People at high risk of or with CVD	▪ consume at least two portions of fish per week, including a portion of oily fish
	Joint British Societies[27]	Expert Scientific Organization	General Adult Population	▪ Regular intake of fish and other sources of omega 3 fatty acids (at least two servings of fish per week)
	Irish Heart Foundation[54]	Expert Scientific Organization	General Adult Population	▪ 200 mg/day long-chain fatty acids
	National Collaborating Center for Primary Care[28]	Expert Scientific Organization	General Adult Population	▪ At least two servings of omega-3 fatty acid containing fish per week
			People with Established CVD	▪ At least two servings of omega-3 fatty acid containing fish per week week)
Italy	Italian Ministry of Health[52]	Authoritative Body	Pregnant and Nursing Women	▪ Vegan women should consume foods rich in DHA
Spain	Spanish Society of Intensive Care Medicine and Coronary Units and Spanish Society of Parenteral and Enteral Nutrition[29]	Expert Scientific Organization	Individuals with acute coronary syndrome and patients with chronic heart failure	▪ Administration of 1 g/day of omega-3 (EPA+DHA) in the form of fish oil can prevent sudden death in the treatment of acute

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				coronary syndrome and can also help to reduce hospital admission for cardiovascular events in patients with chronic heart failure
	Spanish Society of Intensive Care Medicine and Coronary Units and Spanish Society of Parenteral and Enteral Nutrition[30]	Expert Scientific Organization	patients with acute lung injury (ALI) or acute respiratory distress syndrome (ARDS)	▪ An enteral diet enriched with ω-3 diet fatty acids may have a beneficial effects
Brazil	Brazilian Society of Cardiology[31]	Expert Scientific Organization	Patients with coronary artery disease	▪ supplementation of 1 g / day of omega-3 (EPA + DHA) capsules
United States	Institute of Medicine[32]	Authoritative Body	Boys & Girls 1-3 yrs	▪ ALA: 0.7 g/day of which ~ 10% EPA+DHA
			Boys & Girls 4-8 yrs	▪ ALA: 0.9 g/day of which ~ 10% EPA+DHA
			Boys 9-13 yrs	▪ ALA: 1.2 g/day of which ~ 10% EPA+DHA
			Boys 14-18 yrs	▪ ALA: 1.6 g/day of which ~ 10% EPA+DHA
			Girls 9-13 yrs	▪ ALA: 1.0 g/day of which ~ 10% EPA+DHA
			Girls 14-18 yrs	▪ ALA: 1.1 g/day of which ~ 10% EPA+DHA
			Adult men ≥ 19 yrs	▪ ALA: 1.6 g/day of which ~ 10% EPA+DHA
			Adult women ≥ 19 yrs	▪ ALA: 1.1 g/day of which ~ 10% EPA+DHA
	American Diabetes Association[55]	Expert Scientific Organization	Individuals with diabetes	Eat fish (particularly fatty fish) at least two times (two servings) per week.

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	Academy of Nutrition and Dietetics (formerly American Dietetics Association)	Expert Scientific Organization	General Adult Population[56]	▪ 500 mg EPA+DHA per day
			Varied[53]	Those with increased requirements (e.g., pregnant and lactating women or those with diseases associated with poor essential fatty acid status) or those at risk for poor conversion (e.g., people with diabetes) may benefit from direct sources of long-chain n-3 fatty acids, such as DHA-rich microalgae
	March of Dimes[34]	Expert Scientific Organization	Pregnant and Nursing Women	▪ 200 mg DHA/day
	National Heart, Lung, and Blood Institute, National Cholesterol Education Program[35]	Authoritative Body	Persons with CHD or multiple risk factors for CHD	▪ Supported AHA recommendation to include fish as part of a CHD risk reduction diet. Higher dietary intakes of n-3 PUFAs are an option for reducing CHD risk
	Omega-3 Fatty Acids Subcommittee, assembled by the Committee on Research on Psychiatric Treatments of the American Psychiatric Association (APA)[36]	Expert Scientific Organization	Adults	▪ Eat fish >/= 2X/wk
			Patients with mood, impulse control, or psychotic disorders	▪ 1 g EPA + DHA / day
	American Heart Association	Expert Scientific Organization	All adults without CHD[37]	▪ Eat fish (particularly fatty fish) at least two times a week; include oils and foods rich in ALA
			General adult population[58]	▪ Fish with 500 mg or more of EPA+DHA per 85 g (3 oz cooked) can apply for the AHA Heart-Check food certification program at heartcheckmark.org.
			Patients with CHD[37]	▪ Consume approximately 1 g/day of EPA+DHA preferably from oily

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				fish. EPA+DHA supplements could be considered in consultation with the physician
			Patients with high triglycerides[37]	▪ 2-4 g/day EPA+DHA as capsules under a physician's care
			Patients with high triglycerides[51]	• …increasing consumption of marine-based omega-3 products,…, will further optimize triglyceride-lowering efforts.
			Cardiovascular Disease Risk Reduction in Women[38]	▪ Consume fish, especially oily fish, at least twice a week ▪ Consumption of omega-3 fatty acids in the form of fish or in capsule form may be considered in women with hypercholesterolemia and/or hypertriglyceridemia for primary and secondary prevention
			Patients with Coronary and Other Atherosclerotic Vascular Disease[39]	• For all patients, it may be reasonable to recommend omega-3 fatty acids from fish or fish oil capsules (1 g/d) for CVD risk reduction

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	U.S. Dept of Agriculture and U.S. Department of Health and Human Services[40]	Authoritative Body	General adult population	▪ Increase the amount and variety of seafood consumed by choosing seafood in place of some meat and poultry
			Pregnant or breastfeeding women	▪ consume at least 8 and up to 12 ounces of a variety of seafood per week
	Executive Office of the President[50]	Authoritative Body	General population	• Dietary Guidelines and Food Guide Pyramid should be revised to emphasize the benefits of…increasing consumption of foods rich in omega-3 fatty acids
	Agency for Healthcare Research and Quality[49]	Authoritative Body	General population	• Fish and fish oil supplements reduce the risk of cardiovascular disease
	American Academy of Pediatrics[41]	Expert Scientific Organization	Nursing Women	• The mother's diet should include an average daily intake of 200 to 300 mg of the ω-3 long-chain PUFAs (DHA) to guarantee a sufficient concentration of

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				preformed DHA in the milk. Consumption of 1 to 2 portions of fish (e.g., herring, canned light tuna, salmon) per week will meet this need. The concern regarding the possible risk from intake of excessive mercury or other contaminants is offset by the neurobehavioral benefits of an adequate DHA intake and can be minimized by avoiding the intake of predatory fish (e.g., pike, marlin, mackerel, tile fish, swordfish). Poorly nourished mothers or those on selective vegan diets may require a supplement of DHA as well as multivitamins
Canada	Minister of National Health and Welfare, Canada[42]	Authoritative Body	General adult population	• 1.2-1.6 g/day total n-3 PUFAs (ALA, EPA, DHA)
	Dietitians of Canada[33]	Expert Scientific Organization	General adult population	• 500 mg n-3 long-chain PUFAs/day
India	Cardiology Society of India[59]	Expert Scientific Organization	For patients with high triglycerides and patients after MI for secondary prevention	• Omega-3 acid ethyl esters (2-4g/day)
Japan	Ministry of Health, Labour and Welfare[43]	Authoritative Body	General adult population	• >1g EPA+DHA per day
			0-5 months – boys and girls	• 0.9g total omega-3 per day
			6-11 months- boys and girls	• 0.9g total omega-3 per day
			1-2 years – Boys and Girls	• 0.9g total omega-3 per day

Country/Region	Organization	Org. Type	Target Population	Recommendation
			3-5 years – Boys and Girls	• 1.2g total omega-3 per day
			6-7 years – Boys	• 1.6g total omega-3 per day
			(6-7 years) –Girls	• 1.3g total omega-3 per day
			8-9 years – Boys	• 1.7g total omega-3 per day
			8-9 years – Girls	• 1.5g total omega-3 per day
			10-11 years – Boys	• 1.8g total omega-3 per day
			10-11 years – Girls	• 1.7g total omega-3 per day
			12-14 years – Boys and Girls	• 2.1g total omega-3 per day
			15-17 years – Boys	• 2.5g total omega-3 per day
			15-17 years – Girls	• 2.1g total omega-3 per day
			Adults (18-29 years) – Men	• 2.1g total omega-3 per day
			18-29 years – Women	• 1.8g total omega-3 per day
			30-49 years – Men	• 2.2g total omega-3 per day
			30-49 years – Women	• 1.8g total omega-3 per day
			50-69 years – Men	• 2.4g total omega-3 per day
			50-69 years – Women	• 2.1g total omega-3 per day
			Over 70 years – Men	• 2.2g total omega-3 per day
			Over 70 years – Women	• 1.8g total omega-3 per day
			Pregnant Women	• 1.9g total omega-3 per day
			Nursing Women	• 1.7g total omega-3 per day
Malaysia	Ministry of Health	Authoritative Body	Acute ST Segment Elevation Myocardial Infarction[46]	• Increased intake of omega 3 – fatty acids (1g daily) is beneficial. • Eat fish at least twice a week.
			Women with CHD[47]	• omega-3-fatty-acids (>1gm/day) have been found to be beneficial
			Management of Dyslipidemia[48]	• A dose of 3-9 gm/day to lower TG levels

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				• A dose of 0.75-1 gm/day as secondary prevention to prevent sudden death
Israel	Israel Heart Society[44]	Expert Scientific Organization	For people with high risk or secondary prevention	• 1000 mg EPA + DHA/day as supplement for people who don't eat fish
			For the general public or primary prevention	• 500-1000 mg EPA + DHA/day as fish

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