American Society for Nutrition
Excellence in Nutrition Research and Practice

May 16, 2022

Janet M. de Jesus, MS, RD
Office of Disease Prevention and Health Promotion
Office of the Assistant Secretary
Department of Health and Human Services
1101 Wootton Parkway, Suite 420
Rockville, Maryland 20852

RE: Request for Comments on Scientific Questions to Be Examined to Support the Development of the Dietary Guidelines for Americans, 2025-2030 (Docket No. HHS-OASH-2022-0005-0001)

Dear Ms. De Jesus:

The American Society for Nutrition (ASN) appreciates the opportunity to comment on the proposed topics and scientific questions that will be considered during the development of the upcoming 2025-2030 edition of the *Dietary Guidelines for Americans* (*DGAs*). ASN has more than 8,000 members around the world, working throughout government, clinical practice, academia, and industry, and conducting research to achieve the ASN vision of "A Healthier World Through Evidence-Based Nutrition".

ASN appreciates the focus on diet and health outcomes across the lifespan given the scientific evidence that highlights the significant impact nutrition has on many chronic diseases, as well as COVID-19, and the importance of a solid nutritional foundation at an early age to lower the risk of and prevent the onset of many chronic diseases and conditions which begin early in life. ASN appreciates the ongoing focus on dietary patterns and a total diet approach given the complex interactions of all foods and beverages consumed and their overall impact on health. ASN applauds HHS and USDA for including a new focus on weight loss and management in adults since nearly half the adult population now struggle with obesity. It is important that the *DGAs* are applicable to most Americans, and unfortunately more than 70% of Americans are overweight or obese, and the prevalence of severe obesity has increased over the past two decades[1]. A continued focus on food energy (calorie) reduction and chronic disease and obesity prevention should be emphasized.

ASN notes that alcoholic beverages will be examined in a separate effort led by HHS. Although alcoholic beverages have unique considerations, they can have a significant role on an individual's nutrition and health. Alcoholic beverages tend to be high in calories and make up a substantial portion of the beverages consumed by many Americans. Some

[1] Dietary Guidelines Advisory Committee. 2020. Scientific Report of the 2020 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Agriculture and the Secretary of Health and Human Services.

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overconsume alcoholic beverages – the CDC notes that a small percentage of adults who drink account for half of the 35 billion total drinks consumed by US adults each year[2]. Alcoholic beverages impart calories with little to no essential nutrients and may contribute to diet-related chronic diseases. For that reason, ASN encourages the review of alcoholic beverages to be conducted concurrently with the work of the Dietary Guidelines Advisory Committee (DGAC) and that dietary guidance on consumption be included in the final report of the DGAC on dietary recommendations. In addition, ASN strongly suggests that at least one individual with expertise in nutrition be considered for inclusion on the team to separately review alcoholic beverages. ASN also seeks additional details on HHS and USDA's separate work on nutrition and climate change, including how and when this topic will be addressed. Nutrition expertise is essential for consideration of climate change and ASN urges strong representation of nutrition scientists and researchers and others with expertise in nutrition for this separate review.

It is crucial that HHS and USDA have committed to review all scientific questions with a health equity lens to ensure that resulting guidance in the *DGAs* is inclusive of the diversity of the US population and relevant to all Americans regardless of racial, ethnic, socioeconomic status (SES), and cultural backgrounds. ASN does note however that many of the proposed questions do not address race, ethnicity, culture, or SES. ASN suggests that additional questions be added with a focus on health equity and ultimately achieving dietary recommendations across all ages, racial and ethnic populations, and income levels. Various factors such as age, SES, race, ethnicity, and culture should be considered to the greatest extent possible based on the information provided in the scientific literature and data, as these factors greatly impact a person's dietary pattern, eating behavior and eating habits. It important to consider this as dietary guidance is most effective when it is practical and actionable for most Americans.

With that in mind, the *DGAs* have an opportunity to go beyond advising Americans solely on what to eat and can also touch on the knowledge, skills, and attitudes that individuals need to change their behavior to improve eating habits and overall nutrition. ASN applauds that one topic of proposed questions addresses *strategies* related to diet quality and weight management. The need to balance nutrients, foods, and behaviors to achieve a healthful eating pattern should be highlighted, and it is important for the Committee to encourage strategies that support behavior change, leading to healthy eating consistent with the *DGAs*. It is important for the Committee to consider the impact of the food environment and food system on diet quality and weight management, as well as provide strategies to support behavior change.

ASN also supports the proposed topic of Dietary Patterns Across Life Stages. ASN encourages the inclusion of dietary recommendations for healthy aging as the aging population of America expands. By the year 2030, 1 in every 5 Americans will be retirement age. By 2034, 77 million Americans will be over the age of 65[3]. Although modern medicine has increased the lifespan,

[2] https://www.cdc.gov/chronicdisease/resources/publications/factsheets/alcohol.htm

the incidence of disease has not decreased as we age. We need to better understand the nutritional requirements of an 85-year-old versus a 65-year-old to know what dietary patterns, foods and nutrients promote health best at each age and dietary guidance should reflect this so that the aging population may stay healthy and active longer. Aging adults have specific diet-related concerns. For example, older adults are at risk of malnutrition: the lack of adequate protein, calories, and other nutrients needed for tissue maintenance or repair. Malnutrition can lead to sarcopenia. By the sixth decade of life, nearly 25% of the population has substantial muscle atrophy or sarcopenia[4]. For these reasons, ASN proposes the inclusion of specific questions to address the aging population past 65 years of age, particularly given the rapidly growing population of individuals 80 years of age and up, such as the following:

This comment proposes new scientific questions. The rationale for inclusion is listed above.

- ASN Suggested Questions:

- How well do dietary patterns meet nutrient recommendations for older adults ages 65+, 75+, and 85+?
- What modifications to dietary patterns are effective in preventing or reversing declines in muscle mass or bone density for older adults ages 65+, 75+ and 85+?
- What is the evidence of the relationship of the amount, quality, and timing of dietary protein intake (types/sources and amounts) by older adults ages 65+, 75+, and 85+ and healthy body composition including muscle mass?
- Does the evidence support changes in dietary patterns to increase older adults' ages 65+, 75+, and 85+ protein needs, enhance quality of their protein intake, and modify the meal spacing/timing of their protein intake?
- What is the evidence of the relationship of fiber intake by older adults ages 65+, 75+, and 85+ and improved digestion and gut health?
- What is the relationship between specific micronutrient supplements consumed by adults ages 65+, 75+, and 85+ and 1) micronutrient status; 2) body composition; 3) neurocognitive health; and 4) adverse effects to replete individuals?

In addition, for the topic of Dietary Patterns Across Life Stages, ASN recommends that the Committee continue to provide dietary pattern guidance by referring to the foods and nutrients that comprise healthy dietary patterns, such as high in fruits and vegetables, rather than emphasizing any one dietary pattern such as Mediterranean-style, Dietary Approaches to Stop Hypertension (DASH), vegetarian/ vegan, etc., that may not resonate broadly with many Americans. It is important that the Committee continue to provide recommendations on low-carbohydrate and high-fat diets as well as frequency of eating, as these diet styles continue to

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[3] https://www.census.gov/newsroom/press-releases/2018/cb18-41-population-projections.html

[4] Han A et al. Diagnostic Criteria and Clinical Outcomes in Sarcopenia Research: A Literature Review. J Clin Med. 2018 8;7(4):70. doi: 10.3390/jcm7040070.

be popular and practiced by many American consumers and the scientific literature may have evolved since the last DGAC. It is also important to provide strategies for Americans to shift and improve their dietary patterns in order to come closer to achieving what is supported by the latest scientific evidence and the *DGAs*.

ASN Comments on Select Proposed Scientific Questions Below

- ASN suggests changes to the following proposed scientific question:
  What is the relationship between consumption of dietary patterns with varying amounts of ultra-processed foods and growth, size, body composition, risk of overweight and obesity, and weight loss and maintenance?
- ASN rationale for changes:
  ASN notes that the term "ultra-processed foods" has differing definitions[5,6] in the literature and therefore the term may mean different things to consumers and other stakeholders. It is important that HHS and USDA provide a science-based definition for the term ultra-processed foods in order for this question to be accurately considered by the Committee. ASN also notes that healthy dietary patterns are defined by the amounts, types, and frequency of consumption, as well as the quality of foods and nutrients that are included and limited. ASN encourages the Committee to consider nutrient quality and density, amounts and frequency of consumption of ultra-processed foods as well when investigating these relationships.

- ASN suggests changes to the following proposed scientific question:
  What is the relationship between 1) timing of introduction, and 2) types and amounts of complementary foods and beverages and: growth, size, body composition, and risk of overweight and obesity? iron and zinc status?
- ASN rationale for changes:
  ASN suggests that this question be expanded to look at the relationship between complementary foods and micronutrient status more broadly, to investigate the relationship with additional micronutrients beyond just iron and zinc. In particular, vitamin D, calcium, dietary fiber, choline, magnesium, and potassium are of public health importance and should be considered. The question may also be expanded to investigate the relationship with long-term health outcomes as well. The Committee may also investigate the relationship of various approaches to CFB introduction, such as baby-led weaning vs other approaches and risk of overweight and obesity.

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[5] Monteiro, C.A., Cannon, G., Lawrence, M., Costa Louzada, M.L. and Pereira Machado, P. 2019. Ultra-processed foods, diet quality, and health using the NOVA classification system. Rome, FAO.
[6] https://foodinsight.org/ultraprocessed-foods-and-mortality/

ASN-Suggested Proposed Scientific Questions Related to Specific Dietary Pattern Components Below

- ASN Suggested Question:
  What is the relationship between specific micronutrients including choline consumed during birth to 24 months of age and neurocognitive development, as well as other protective health benefits?
- ASN Suggested Question:
  In addition to added sugars, ASN suggests that the DGAC also consider the relationship between food and beverage sources of non-nutritive sweeteners and sugar substitutes consumed and health outcomes.

ASN strongly encourages the overall systematic review of the totality of the evidence to be considered as new topics and scientific questions are determined. Nutrition, like all sciences, evolves with new research and information. We fully recognize that there may be a lack of evidence, limitations in the evidence or insufficient evidence for one or more specific questions, but strongly encourage that scientific judgement be used based on the assessment of the totality of the evidence to determine guidance to advance and improve public health.

ASN welcomes the opportunity to serve as a resource to both HHS and USDA as you move forward with the evaluation of the latest nutrition science. The ASN membership has a wealth of expertise in nutrition science across the entire research spectrum from basic science to health policy, from discovery to application. ASN offers our assistance in identifying subject matter experts on select topics, when necessary, throughout the development process. ASN has 18 Research Interest Sections to draw from, with experts in such topical areas as Maternal, Perinatal and Pediatric Nutrition; Aging and Chronic Disease; Diet and Cancer; Obesity; Community and Public Health Nutrition; and Nutritional Epidemiology, to name a few.

Sincerely,

Paul M. Coates, Ph.D.
ASN President, 2021-2022