July 11, 2019

Dietary Guidelines Advisory Committee
U.S. Department of Agriculture
U.S. Department of Health and Human Services
Washington, DC 22025


Via Electronic Submission

Dear Members of the 2020-25 Dietary Guidelines Advisory Committee:

The Consumer Federation of America (CFA) appreciates the opportunity to submit these comments to the Dietary Guidelines Advisory Committee (DGAC) in response to its request for comments regarding the “2020-25 Dietary Guidelines for Americans.” These comments address the DGAC’s procedures for preparing guidance “based on the preponderance of the scientific and medical knowledge which is current at the time the report is prepared,”1 including the first protocols posted for the 2020 advisory committee evidence reviews.

CFA is an association of nearly 300 non-profit consumer organizations that was established in 1968 to advance the consumer interest through research, advocacy and education. Member organizations include local, state, and national consumer advocacy groups, senior citizen associations, consumer cooperatives, trade unions and food safety organizations. CFA’s Food Policy Institute was created in 1999 and engages in research, education and advocacy on food safety, food and agricultural policy, agricultural biotechnology, and nutrition.

An open and transparent process, grounded in science and insulated from political meddling, should govern the creation of the dietary guidelines. The administration’s takeover of the topic and question generation process marks a discouraging milestone away from evidence-based decision-making. Until 2005, the DGAC, rather than the politicized agencies, wrote the actual dietary guidelines for Americans. The agencies’ ultimate authority over the content of the guidelines allowed the previous administration, for example, to cull the topic of “sustainability” from the 2015 Guidelines. Nevertheless, for the 2015 Guidelines, the DGAC’s charter still included the duty to “examine the current Dietary Guidelines for Americans,”2 which allowed the Committee to “determine topics for which new scientific evidence is likely to be available that may inform revisions to the current guidance or suggest new guidance.”3 By contrast, this DGAC’s charter limits the committee to “examine the evidence on the topics and questions

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1 7 U.S.C. 5341(a)(2).
identified by the Departments.” In other words, the duty to define the scope of the dietary guidelines review process has now moved under the authority of the U.S. Department of Agriculture (USDA) and the U.S. Department of Health and Human Services (HHS).

This change in the process departs from the 2017 recommendations of the National Academies of Sciences, Engineering, and Medicine (NASEM). In its report on the dietary guidelines process, the NASEM noted that “[a]nalytic frameworks also are needed to guide topic selection,” and recommended the formation of a “Dietary Guidelines Planning and Continuity Group” made up of “federal staff and nonfederal experts.” That group would select the topics for the DGAC to consider, and “would be responsible for disclosing in a brief report the criteria and logic for the list of topics and associated research questions recommended.” Rather than follow that approach, however, the agencies have simply announced topics, with no accompanying explanation.

The DGAC should resist politicization of the dietary guidelines process by interpreting its questions broadly

The content of the topics suggests that political considerations, rather than science, took precedent in determining the direction of the DGAC’s work. Not surprisingly, sustainability is out, as are questions related to fast food’s impact on obesity and diet related disease. The topics also fail to make any reference to food insecurity. On topics such as food safety and physical activity, the agencies include a note that appears to indicate that the 2015 Guidance will remain undisturbed. The implication is that the DGAC does not have authority to reexamine the previous guidelines where they do not fit into one of the agencies’ boxes.

Because the agencies failed to identify many critical topics and questions, we encourage the DGAC to broadly interpret the questions that were identified to more fully address public health concerns. For example, the Committee should consider foodborne illness risk in response to the question “What is the relationship between dietary patterns… consumed at each stage of life and… all-cause mortality?” Pregnant women and their newborns are particularly vulnerable to certain foodborne pathogens, such as Listeria. As the first dietary guidelines to include dietary guidance for infants and toddlers, the 2020 guidelines should include information about managing the risk of listeriosis, such as avoiding soft cheese, raw sprouts, processed meats, and smoked fish.

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6 Id. at 9.
7 Id. at 10.
Similarly, the DGAC should specifically consider the cancer risks associated with eating processed meat, such as bacon, deli meat, hot dogs, and sausage. In 2015, the World Health Organization’s International Agency for Research on Cancer (IARC) classified processed meat carcinogenic to humans based on evidence linking consumption of these foods to colorectal cancer. The third most commonly diagnosed cancer in the United States, colorectal cancer accounted for 8.1%, or more than 140,000 of all cancer cases in 2018, killing 50,000 people, and costing $19 billion in medical treatment alone.\textsuperscript{10} In 2015, the IARC cited experts’ conclusion that each 50 gram portion of processed meat eaten daily increases the risk of colorectal cancer by 18%.\textsuperscript{11} Yet while the 2015 dietary guidelines recommend that individuals eat a diet lower in processed meats, they do not specifically evaluate the risks posed by processed meats. The DGAC should address that gap.

The DGAC should incorporate systematic reviews and meta-analyses into its deliberations

The dietaryguidelines.gov website indicates that the DGAC will answer the questions it is given by USDA and HHS using three approaches: data analysis, food pattern modeling, and systematic reviews.\textsuperscript{12} The website makes clear that “systematic review” signifies the original systematic reviews conducted by USDA’s Nutrition Evidence Systematic Review (NESR). At the first DGAC meeting, agency representatives suggested that USDA’s Nutrition Evidence Systematic Review (NESR) will exclude from consideration existing systematic reviews and meta-analyses conducted by other entities,\textsuperscript{13} and in response to follow-up inquiries, USDA staff has provided further clarification: “The Committee will not use existing systematic reviews or reports conducted by other entities when answering its questions, but it may use those contextually, and/or when designing the protocols for answering its questions.”\textsuperscript{14} The DGAC appears to be following this policy in its subcommittee work. Thus far, all of the 35 draft protocols that include a literature review indicate that existing systematic reviews and meta-analyses will be excluded.

This policy raises both procedural and substantive concerns. Procedurally, the decision to exclude existing systematic reviews from the DGAC’s deliberations lacks transparency. Nothing in the DGAC’s charter suggests this sort of limitation, and we are not aware of any other document available for public comment that articulates the policy. USDA representatives have suggested, in the prior committee meeting and via e-mail, that excluding these reviews comports with the 2017 NASEM recommendations. However, the agencies have not articulated that

\textsuperscript{12} https://www.dietaryguidelines.gov/work-under-way/review-science/advisory-committee-approaches-to-examine-the-evidence
\textsuperscript{13} See Presentation of Dr. Julie Obaggy, March 28, 2019, minute 33:52 https://www.dietaryguidelines.gov/day-1-nutrition-evidence-systematic-review
\textsuperscript{14} Email of Eve Essery-Stoody, Scientific Integrity Officer, Center for Nutrition Policy Promotion, to Thomas Gremillion. July 3, 2019.
rationale in any public document. This lack of transparency in determining what evidence goes before the DGAC conflicts with the NASEM’s recommendation that the guidelines process “needs to be transparent at each level, requiring each step of the process be documented and updated, and that such documentation be readily available to the public.”

Were such documentation available, it would be vigorously disputed based on the substantive merits of including systematic reviews in the DGAC’s deliberations. As we explain in our joint comments with the American Institute for Cancer Research (AICR), existing high quality reviews and meta-analyses address many of the questions presented for the DGAC’s consideration, such as the relationship between alcohol consumption and cancer risk. Another example would be recent systematic reviews debunking claims that moderate alcohol consumption reduces all-cause mortality. These reviews represent “significant time and resources” that should inform the DGAC’s work. The NASEM recognizes as much when it says that “use of existing systematic reviews, meta-analyses, and authoritative reports from leading organizations is generally appropriate and encouraged.” Nowhere does the NASEM suggest that NSR should categorically exclude these reviews.

The 2015 DGAC utilized existing systematic reviews, meta-analyses, or reports to answer nearly half (45%) of its research questions. Excluding high-quality, existing systematic reviews and meta-analyses will increase the likelihood that the DGAC issues equivocal statements, on alcohol and on other topics. This may be good for the industries selling unhealthy products, but it is bad for the American public.

The DGAC should disclose all committee member nominations

The 2017 NASEM report singled out transparency as an area for improvement in the development of the dietary guidelines. According to the report, “transparency is vital to engendering trust in the process, and it provides assurance that decisions were made free of undue influences.” One simple way to increase transparency in the dietary guidelines process would be to disclose the names of the organizations that nominated members of the DGAC.

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15 NASEM Report at 41 (emphasis added).
16 See “Do ‘Moderate’ Drinkers Have Reduced Mortality Risk? A Systematic Review and Meta-Analysis of Alcohol Consumption and All-Cause Mortality,” Tim Stockwell, Jinhui Zhao, Sapna Panwar, Audra Roemer, Timothy Naimi, and Tanya Chikritzhs. *Journal of Studies on Alcohol and Drugs* 2016 77:2, 185-198 (finding that “low-volume alcohol consumption has no net mortality benefit compared with lifetime abstention or occasional drinking” and noting that “of 87 studies identified” as “original prospective studies concerning the association between alcohol consumption and all-cause mortality” which provided sufficient information to be evaluated, “65 included former drinkers in the ‘abstainer’ reference group.”).
17 NASEM Report at 169.
18 Id. at 171 (emphasis added).
20 NASEM Report at 171.
Already, many of the nominations are known. Adopting a policy of disclosing all nominations would help to manage or minimize actual or perceived conflicts of interest, and boost public confidence that the revised dietary guidelines reflect the best scientific and medical knowledge available.

Conclusion

By taking over the topic selection process, the Administration has taken an unprecedented step towards politicizing the dietary guidelines process. The DGAC can restore confidence in the guidelines, at least in part, by making each step of the decision-making process transparent to the public, and grounding its recommendations in the full body of available evidence, including existing systematic reviews and meta-analyses. CFA appreciates the opportunity to provide comments on this important process.

Sincerely,

Thomas Gremillion
Director of Food Policy

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