



# HEALTHCARE NUTRITION COUNCIL

Improving outcomes through awareness and action

Submitted via *Regulations.gov*

July 24, 2019

Kristin Koegel  
USDA Food and Nutrition Service  
Center for Nutrition Policy and Promotion  
3101 Park Center Drive  
Room 1034  
Alexandria, VA 22302

RE: Docket Number FNS-2019-0001 Comments on Protocols

Dear Members of the Dietary Guidelines Advisory Committee,

The Healthcare Nutrition Council (HNC) is responding to the 2020 Dietary Guidelines Advisory Committee (DGAC) request for comments on the protocols being examined by the Committee. HNC is an association representing manufacturers<sup>1</sup> of enteral nutrition (EN) formulas and oral nutrition supplements (ONS), parenteral nutritional (PN) formulas, supplies and equipment. HNC members are committed to improving health by advancing policies that address and raise awareness of nutrition and its impact on patient outcomes and healthcare costs. This includes promoting nutritional screenings, diagnoses, assessments and appropriate and timely nutrition interventions while protecting patients' access to specialized nutrition support products and services throughout the continuum of care.

Thank you for the opportunity to provide comment on the protocols and questions being reviewed. We acknowledge and appreciate the Committee is continuing to consider a life stage approach and that the inclusion criteria in several protocols will allow studies to be included where some participants have been diagnosed with a disease or health outcome of interest, especially since approximately 60% of the U.S. adult population has at least one chronic disease.<sup>2</sup>

### **Dietary Patterns Subcommittee**

Regarding the question "What is the relationship between dietary patterns consumed and sarcopenia," HNC recommends to add race and ethnicity to the key co-founders identified in the protocol. Sarcopenia prevalence varies by age and ethnicity and should be thoughtfully considered when making nutrition recommendations to a diverse U.S. population.<sup>3</sup>

### **Data Analysis and Food Pattern Modeling Cross-Cutting Working Group**

The protocol to "describe/evaluate current intakes of food groups and nutrients," HNC agrees older adults should be specifically considered during this analysis.

"Describe/evaluate nutrients of public health concern," we note older adults are included as part of the data analysis protocol for this research question, however no specific analyses for the older adult population are identified. Older adults have different nutrient needs and are not getting enough protein, omega-3 fatty acids, dietary fiber; vitamins B<sub>6</sub>, B<sub>12</sub>, and E; calcium, magnesium, and potassium.<sup>4</sup> Older

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<sup>1</sup> HNC members are Abbott Nutrition, B. Braun Medical Inc., Nestle Healthcare Nutrition, and Nutricia North America.

<sup>2</sup> Centers for Disease Control and Prevention. National Center for Chronic Disease Prevention and Health Promotion. 2019. Chronic Diseases in America. Retrieved from: <https://www.cdc.gov/chronicdisease/resources/infographic/chronic-diseases.htm>

<sup>3</sup> Du, Kristy; Scott Goates, Mary Beth Arensberg, Suzette Pereira, and Trudy Gaillard. Prevalence of Sarcopenia and Sarcopenic Obesity Vary with Race/Ethnicity and Advancing Age. *Diversity & Equity in Health and Care*. 2018; 15(4): 175-183.

<sup>4</sup> Tucker, Katherine. Institute of Medicine Food Forum. Providing Healthy and Safe Foods As We Age: Workshop Summary. Washington DC: National Academies Press; 2010. 5. Nutrition Concerns for Aging Populations. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK51837/>



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adults are getting too much folate and sodium.<sup>5</sup> Therefore, we suggest expanding the age range for analysis of vitamin B<sub>6</sub> and vitamin E to include older adults, and consider analyses specific to older adults for protein, omega 3-fatty acids, dietary fiber, calcium, magnesium, and potassium.

The question to “describe/evaluate prevalence of nutrition-related chronic health conditions,” we agree the chronic conditions of reduced muscle strength and prevalence of osteoporosis or low bone mass should be specifically evaluated for older adults. The chronic conditions of cardiovascular disease, diabetes, metabolic syndrome, chronic liver disease, and cancer should also be considered for the adult population, including older adults.

Last, “How does dietary intake, particularly dietary patterns, track across life stages from the introduction of foods, into childhood, and through older adulthood,” HNC agrees older adults should be included in this analysis due to different nutrients needed during aging,<sup>6</sup> higher prevalence of chronic disease among older adults,<sup>7</sup> and higher risk of malnutrition.<sup>8,9</sup>

Thank you for the opportunity to provide comment on the protocol questions. HNC looks forward to providing additional comments to the DGAC during this process. Please let me know if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Robert Rankin". The signature is written in a cursive, flowing style.

Robert Rankin  
Executive Director

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<sup>5</sup> *Ibid.*

<sup>6</sup> *Ibid.*

<sup>7</sup> Olivari, Benjamin; Matthew Baumgart, Sarah Lock, C. Grace Whiting, Christopher Taylor, John Iskander, Phoebe Thorpe, and Lisa McGuire. CDC Grand Rounds: Promoting Well-Being and Independence in Older Adults. *MMWR Morb Mortal Wkly Rep.* 2018; 67(37): 1036-1039. Retrieved from [https://www.cdc.gov/mmwr/volumes/67/wr/mm6737a4.htm?s\\_cid=mm6737a4\\_w](https://www.cdc.gov/mmwr/volumes/67/wr/mm6737a4.htm?s_cid=mm6737a4_w)

<sup>8</sup> Silver, Heidi; Kelsey Jones Pratt, Michelle Bruno, Joe Lynch, Kristi Mitchell, and Sharon McCauley. Effectiveness of the malnutrition quality improvement initiative on practitioner malnutrition knowledge and screening, diagnosis, and timeliness of malnutrition-related care provided to older adults admitted to a tertiary care facility: a pilot study. *Journal of the Academy of Nutrition and Dietetics.* 2017; 118(1): 101-109.

<sup>9</sup> Kaiser MJ, Bauer JM, Ramsch C, Ulter W, Guigoz Y, Cederholm T, Thomas DR, Anthony PS, Charlton KE, Maggio M, Tsai AC, Vellas B, and Sieber CC. Frequency of malnutrition in older adults: a multinational perspective using the mini nutritional assessment. *Journal of the American Geriatrics Society.* 2010; 58(9): 1734-1738.