



*Submitted Via Regulations.gov*

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Center for Nutrition Policy and Promotion  
Food and Nutrition Service  
U.S. Department of Agriculture  
3101 Park Center Drive  
Room 1034  
Alexandria, VA 22302

RE: Docket Number FNS-2019-0001 titled "Announcement of First Meeting of the 2020 Dietary Guidelines Advisory Committee and Request for Comments"

Dear Members of the Dietary Guidelines Advisory Committee,

The Healthcare Nutrition Council (HNC) and the Infant Nutrition Council of America (INCA) are jointly responding to the notice published March 12, 2019 in the *Federal Register* by the U.S. Department of Agriculture's (USDA), Food, Nutrition and Consumer Services (FNCS) and the Department of Health and Human Services (HHS) entitled "Announcement of First Meeting of the 2020 Dietary Guidelines Advisory Committee and Request for Comments." HNC is an association representing manufacturers of enteral nutrition (EN) formulas and oral nutrition supplements (ONS), parenteral nutritional (PN) formulas, supplies and equipment.<sup>1</sup> HNC members are committed to improving health by advancing policies that address and raise awareness of the impacts of nutrition on health outcomes and healthcare costs. This includes promoting nutritional screenings, diagnoses, assessments and appropriate and timely nutrition interventions while protecting patients' access to enteral and parenteral nutrition products and services throughout the continuum of care. INCA is an association of manufacturers of infant formula, follow-up formula, and growing up milks, whose member companies<sup>2</sup> produce over 95% of the infant formula consumed in the U.S. INCA advocates for optimal infant nutrition to ensure positive health outcomes, while supporting families in their feeding decisions and educating them on appropriate infant feeding options.

The following are HNC and INCA's joint comments regarding the 2020 Dietary Guidelines for Americans (DGAs). Please note that HNC and INCA have also submitted independent comments and will continue to do so throughout this process.

We recognize the DGAs are intended to provide nutrition recommendations to a general, healthy population. However, there may be circumstances where specialized nutrition products, such as oral nutrition supplements (ONS) or follow-up formulas, are indicated to help fill nutrient gaps for some individuals, offering supplemental nutrition for short term or long term use. For some, ONS may be used as sole-source nutrition. In some cases, these specialized nutrition products are recommended by a physician or healthcare provider, who turn to the DGAs as a trusted source. Consumers who currently use or plan to use these products are also utilizing the

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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> INCA members are Abbott Nutrition, Gerber Products Company, Perrigo Nutritionals, and Reckitt Benckiser.



DGAs for recommendations. For these reasons, HNC and INCA urge the Dietary Guidelines Advisory Committee (DGAC or Committee) to consider including recommendations around specialized nutrition products, especially to educate consumers on their intended indications for use so as not to confuse them with other types of beverages or formulas.

Similarly, milk and/or soy-based drinks intended for toddlers/older infants include follow-up formulas, growing up milks, as well as ONS for children ages 1 year of age and older with differentiated health and nutritional needs (older children and people of all ages also use ONS). These products play an important role in complementing the diet of a specific population and can support growth, development, and overall health by delivering specific calorie and protein levels.

The recently released Healthy Beverage Consumption in Early Childhood Technical Scientific Report<sup>3</sup> defines “toddler milk” as “Milk drink supplemented with nutrients and often containing added sugars. These products are marketed as appropriate for children ages 9 to 36 months, and may be marketed as ‘transition formulas,’ ‘follow-on formulas,’ or ‘weaning formulas’ for children 9 to 24 months and ‘toddler milk,’ ‘growing-up milk,’ or ‘young child milk’ for children 12 to 36 months.” HNC and INCA believe the nutrition recommendations in this Report on early childhood do not recognize the important contribution these products can have in helping nutritionally vulnerable populations reach nutrient needs. The Report states these products should not be used because “nutrient needs should be met primarily through nutritionally adequate dietary patterns.” While this may be appropriate for healthy individuals with an adequate appetite, one of the reasons follow-up formulas were developed was *because* nutrient needs can be difficult for some people to meet through recommended dietary patterns. The typical U.S. toddler diet can be lacking certain nutrients as this age group develops their eating habits. Many young children are not eating the best choices of food for their stage in life, where development is critical.<sup>4,5</sup> For such individuals, any concerns over the minimal “added sugars” in the products are outweighed by the benefit of the protein, vitamins, minerals, and other nutrients that are provided by these products. These products help individuals meet their nutrition goals, especially when they have unique nutrition needs.

We ask the Committee to recognize and consider the use of follow-up formulas and ONS and how they may be used to help some individuals support their overall nutrition needs that are not otherwise met with ordinary food or other beverages. These products are intended to meet nutrient gaps in the diets of older infants up through individuals of all ages to older adults. Healthcare providers may recommend these products based on what is appropriate for the individual in their diet pattern or unique needs. We urge the Committee to recognize the unique roles of these products and to provide balanced information in the DGAs to educate consumers on how these products are used.

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<sup>3</sup> Daniels, Stephen; Bachard, Lori; Callahan, Emily; Casamassimo, Paul; Krol, David; Steiber, Alison; Muth, Natalie; Ison Stigers, Jenny; St-Onge, Marie-Pierre; and Whitsel, Laurie; Expert Panel Members. Healthy Beverage Consumption in Early Childhood: Recommendations from Key National Health and Nutrition Organizations; Technical Scientific Report. *Healthy Eating Research*. September 2019. Retrieved from: <https://healthyeatingresearch.org/wp-content/uploads/2019/09/HER-HealthyBeverageTechnicalReport.pdf>.

<sup>4</sup> Saavedra, JM; Deming, D; Dattilo, A; and Reidy, K. Lessons from the feeding infants and toddlers study in North America: what children eat, and implications for obesity prevention. *Ann Nutr Metab*. 2013; 62 (Suppl 3): 27-36.

<sup>5</sup> Welker, Emily B; Jacquier, Emma F; Catellier, Diane J; Anater, Andrea S; and Story, Mary T. Room for Improvement Remains in Food Consumption Patterns of Young Children Aged 2–4 Years. *J Nutr*. 2018; 148 (Suppl 3): 1536S-1546S.



We understand the Beverages and Added Sugars Subcommittee will consider beverages other than ONS in the protocol question, “What is the relationship between beverage consumption and growth, size, body composition, and risk of overweight and obesity,” and that outcomes to be measured include body mass index (BMI), body composition, failure to thrive, and wasting to name a few. We urge this Subcommittee to review the overall nutrition status and other nutrition-related outcomes of the target groups, perhaps including some biochemical markers, beyond reviewing body weight and body composition especially since malnutrition can occur at any age regardless of the individual’s body weight, and parameters like BMI and body weight can still be met in malnourished individuals. Furthermore, we ask this Subcommittee to also consider different comparators beyond “plain water as a control” as certainly any beverages with calories will contribute toward nutrition status and body weight.

Many individuals use beverages to help meet their daily nutrient requirements. Some may use ONS as their sole source nutrition, in which case measuring body weight and growth is an important outcome. We ask the Beverages and Added Sugars Subcommittee and Birth to 24 Months Subcommittee to jointly consider how to address ONS and follow-up formulas that are currently being used by individuals, and how to further educate consumers on the role of these products. We ask these Subcommittees to determine other nutrition status markers, outcomes data, and other study criteria that could be used to measure how ONS and follow-up formulas contribute to the diet, beyond looking at body weight.

Thank you for the opportunity to provide comment. Please let us know if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Robert Rankin".

Robert Rankin  
Executive Director  
Healthcare Nutrition Council

A handwritten signature in black ink that reads "Mardi K. Mountford".

Mardi K. Mountford, MPH  
President  
Infant Nutrition Council of America