



Council for Responsible Nutrition

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Filed electronically at:
www.health.gov/dietaryguidelines/dga2015/comments/writeComments.aspx

RE: Comments on addressing nutrient shortfalls through the daily intake of a multivitamin/mineral supplement when nutrient intake cannot be first met through food

Dear Dr. Olson and Ms. Rihane:

The Council for Responsible Nutrition (CRN), the leading trade association representing dietary supplement industry, appreciates the opportunity to provide additional comments to the 2015 DGAC. CRN has previously submitted comments indicating that maximizing nutrition from calories consumed is a public health goal, yet government research demonstrates that many Americans continue to fall short of their nutrient requirements because consumption of vegetables, fruits, whole grains, milk and milk products, and seafood is lower than recommended. During the fourth DGAC meeting, Subcommittee 1 (SC1) reinforced that several nutrient shortfalls exist. SC1 evaluated food and beverage consumption patterns in the U.S. and concluded that Americans do not meet recommended levels for vitamins A, D, E, C, folate, calcium, magnesium, potassium and fiber and that many women do not meet recommended intake levels for iron.

CRN advocates that a multivitamin/mineral (MVM) and other dietary supplements provide a no-calorie, low cost, convenient way to fill the aforementioned nutrient gaps when nutrient recommended intakes are not first met through the consumption of food. CRN suggests that the 2015 Dietary Guidelines can improve the nutrient adequacy of Americans by including a recommendation that the general population may consider taking MVM when micronutrient

intake is not first met through food. It is important to underscore that a MVM is not meant as a replacement for a healthy diet, but as a supplement to a healthy diet that can help to achieve adequate nutrient intake. In fact, consumer surveys indicate that most supplement users report their reasons for using supplements are for overall health and to fill nutrient gaps (1) and that supplement use is associated with healthy food choices (2).

SC1 also evaluated if nutrients that are over- and under-consumed by Americans pose a substantial public health concern. It is noteworthy that under-consumption of nutrients found in dietary supplements, including vitamin D, calcium, potassium, and fiber, is significant enough that it may pose a substantial public health concern. In addition to advocating a diet rich in vegetables, fruits, whole grains, milk, and seafood, a recommendation to consider a daily MVM and fiber supplement could eradicate the public health concerns resulting from the shortfalls in vitamin D, calcium, potassium, and fiber.

SC1 investigated the possibility that the U.S. diet results in micronutrient consumption that exceeds the Tolerable Upper Intake Level (UL). SC1 concluded that consumption of folate, calcium, iron, and vitamin D exceeds the UL in a small percentage of Americans. Exceeding the UL can increase the chance of a negative health outcome in some individuals, but there is not a definitive cut-off level related to adverse effects. Because a small number of Americans exceeded the UL, SC1 concluded that “...each of these, as well as other nutrients, may be over-consumed in some supplement users, especially those taking high-dose supplements.” CRN agrees that individuals should be aware of nutrient levels in supplements, consume recommended intake levels, and should not exceed the UL. However, it is important not to discourage Americans from considering a MVM or other dietary supplement as an option to fill nutrient gaps because a small percentage of Americans exceed the UL for a few nutrients.

The 2010 Dietary Guidelines policy recommendations recognized nutrient inadequacies and called for nutrient supplementation in targeted populations. The 2015 DGAC has identified nutrient shortfalls for vitamins A, E, C, D, calcium, magnesium, potassium, folate, and fiber. CRN recognizes that changing the dietary habits of Americans to fill documented nutrient gaps is one of the goals of the 2015 Dietary Guidelines. It follows that a prudent policy recommendation would include recommendations for MVMs and other dietary supplements as options to fill nutrient gaps. A simple daily MVM would eliminate public health concerns related to preventable nutrient shortfalls in millions of Americans.

CRN is aware that there are numerous reasons Americans struggle to change their diet in order to follow the Dietary Guidelines. CRN commends the work of the DGAC, DHHS, and USDA that encourages Americans to eat healthier and recommends additional strategies to eliminate nutrient shortfalls. The DGAC should recommend MVMs and other dietary supplements as a way to provide missing nutrients, when nutrient adequacy is not met through diet alone. The theoretical risk to a small percentage of Americans consuming folate, calcium, iron, and vitamin D at or above the UL should not deter the DGAC from informing Americans that MVMs and other dietary supplements can help ensure nutrient adequacy.

Please do not hesitate to contact CRN. We would be happy to provide further information or clarification if needed.

- (1) Dickinson A, et al. Health habits and other characteristics of dietary supplement users: a review. *Nutrition Journal* 2014;13:14.
- (2) Foote JA, et al. Factors associated with dietary supplement use among healthy adults of five ethnicities. The Multiethnic Cohort Study. *Am J Epidemiol* 2003;157:888-897.

Sincerely,

A handwritten signature in black ink, appearing to read "D. MacKay", with a large checkmark flourish at the end.

Douglas MacKay, N.D.
Senior Vice President,
Scientific & Regulatory Affairs