

Richard D. Olson, MD, MPH
Prevention Science Lead and Designated Federal Officer, 2015 DGAC
Office of Disease Prevention and Health Promotion, OASH
U.S. Department of Health and Human Services
1101 Wootton Parkway, Suite LL100 Tower Building
Rockville, MD 20852

Colette I. Rihane, MS, RD
Director, Nutrition Guidance and Analysis Division
Center for Nutrition Policy and Promotion
U.S. Department of Agriculture
3101 Park Center Drive, Room 1034
Alexandria, VA 22302

Filed electronically at:

http://www.health.gov/dietaryguidelines/dga2015/comments/writeComments.aspx

RE: The role of biological measures of nutrient status in determining nutrient requirements

Dear Dr. Olson and Ms. Rihane:

The Council for Responsible Nutrition (CRN), the leading trade association representing the dietary supplement and functional food industry, appreciates the opportunity to provide comments to the Department of Health and Human Services (HHS) and the United States Department of Agriculture (USDA).

In the Scientific Report of the 2015 Dietary Guidelines Advisory Committee (DGAC), the DGAC stated, "The public may safely use dietary supplements containing RDA level of nutrients, so long as total intake from diet plus supplements does not exceed the UL. Use of products with high doses of nutrients, such that total intake exceeds the UL, should be discussed with a Registered Dietitian or other qualified health care provider" (*Part D. Ch.1, page 18, lines 670-673*).

CRN recognizes that the UL may be a useful tool for consumers and healthcare providers in determining levels of nutrients that can be safely consumed; however, it should not be used in isolation to determine individual nutrient intake limits. The UL is not a strict cut point at which known toxicity will occur if exceeded. Instead, it is the highest level of daily nutrient intake that is likely to pose no risk of adverse health effects to almost all individuals in the general population. In some individuals with specific nutrient deficiencies, intakes above the UL are required to achieve adequacy.

To determine intake needs, nutritional status should be determined. Although dietary intake records are commonly used to assess nutritional status, they are often prone to error because of inaccuracies in self-reporting and difficulties in maintaining up-to-date food composition databases. Measurements of nutritional status through the use of biological measures when available, such as serum or plasma 25(OH)D₃ levels as a measure of vitamin D status, better reflect intake requirements because they account for variables such as absorption and metabolism. Through the use of biological measures of nutritional status and consultation with a health care professional, individuals can adjust dietary or supplemental intakes to meet a criterion of adequacy, which in some cases may exceed the UL.

CRN recommends that additional clarifying language be included in the 2015 Dietary Guidelines for Americans (DGA) to indicate that intakes of specific nutrients above the UL may be required to achieve adequacy in individuals who are deficient. The requirement for high intakes would be determined through consultation with a health care professional and the use of biological measures to determine nutrient status. Should the DGA include language similar to that in the 2015 DGAC Scientific Report, CRN proposes the following modification: "The public may safely use dietary supplements containing RDA level of nutrients, so long as total intake from diet plus supplements does not exceed the UL. In some individuals with nutrient deficiency,

intakes of specific nutrients above the UL may be required to achieve adequacy. Use of products with high doses of nutrients, such that total intake exceeds the UL, should be discussed with a Registered Dietitian or other qualified health care provider."

CRN commends the DGAC for utilizing biomarker data, in addition to dietary intake data, to assess nutrient status of population groups for several nutrients, including vitamin D, vitamin K, and iron. Biological measures provide more accurate information regarding nutritional status than dietary intake data, and can be used at a population level to help initiate education programs or regulatory change. Biomarkers can also be utilized by healthcare professionals to provide personal guidance regarding diet and supplementation to individuals.

CRN recognizes that there are ongoing projects to identify additional reliable biological measures of nutrient status beyond those discussed in the DGAC Scientific Report. We encourage this important research and the expanded use of biomarkers by future DGACs.

Thank you for the opportunity to provide comments. Please do not hesitate to contact us if you should need further information or clarification.

Regards,

Douglas MacKay, N.D.

D. Mark

Senior Vice President, Scientific & Regulatory Affairs

Andrea Wong, Ph.D.

MAgyan

Anduk

Vice President, Scientific & Regulatory Affairs

Haiuyen Nguyen

Associate Director, Scientific & Regulatory Affairs