



 Council for Responsible Nutrition

CRN Insights: Dietary Guidelines for Americans 2020–2025

The nation's nutrition policy

ON DECEMBER 29, 2020, the U.S. Department of Agriculture and Department of Health and Human Services (the Departments) jointly published the 2020-2025 Dietary Guidelines for Americans. The Departments update the Dietary Guidelines every five years to reflect the latest scientific evidence on diet and health with the goal of providing dietary guidance to promote health and prevent chronic disease. Since 1980, the Dietary Guidelines have served as the foundation for Federal food and nutrition programs and informed local, state, and national health promotion and disease prevention initiatives. In addition, professionals in public health, healthcare, education, and industries use the Guidelines to plan menus, prepare clinical advice, educate consumers, and to inform other nutrition and health-related activities. The new edition (ninth) is the first to provide recommendations for all life stages, with the addition of infants and toddlers and pregnant and lactating women.

TOP FIVE TAKEAWAYS:

- 1. Dietary supplements are helpful when it is not possible to meet nutrient needs through food alone.**
- 2. Vitamin D supplementation may be recommended for almost everyone because of low intakes and lack of food sources.**
- 3. Nutrient supplementation is key for infants and toddlers, as well as pregnant and lactating women.**
- 4. Nutritional needs of lactating women differ from those of pregnant women.**
- 5. Vitamin B12 is a nutrient of concern for older adults.**

Informed by advisory committee and public comments—including CRN’s

The modern Dietary Guidelines development process includes a review of current evidence, with opportunity for the public as well as federal agencies to provide comment. The 2020 Dietary Guidelines Advisory Committee comprised 20 experts charged with reviewing the scientific evidence and issuing a report to inform the Departments in developing the 2020–2025 Dietary Guidelines for Americans. CRN provided public and oral comments throughout the Guidelines process, beginning with the selection of review topics, continuing through the deliberations of the Advisory Committee, and culminating in a detailed response to the scientific report. CRN provided the Departments with recommendations, based on the Advisory Committee’s findings, to incorporate into the Dietary Guidelines. See [CRN Recommendations](#) (page 4) for a list of CRN recommendations that appear in the Guidelines in some variation.

The four core guidelines advise individuals to consistently follow a healthy dietary pattern, customize nutrient dense foods, meet food group needs while watching calories, and limit added sugars, saturated fat, sodium, and alcoholic beverages. Healthy dietary patterns include vegetables (all types); fruits, especially whole fruit; grains, at least half of which are whole grain; dairy (fat-free or low fat); protein foods, including lean meats, poultry, and eggs; seafood; beans, peas, and lentils; nuts, seeds, and soy products; and healthy oils. These elements of healthy dietary patterns are consistent for people of all ages regardless of health status.

DGA DEVELOPMENT

- ▶ **20 experts review current evidence**
- ▶ **CRN provides written and oral comments throughout process**
- ▶ **Report issued to USDA and HHS**
- ▶ **CRN provides recommendations**
- ▶ **Final Guidelines released**



Identifying key roles for supplements

A fundamental premise of the Dietary Guidelines is that nutritional needs should be met primarily from foods and beverages. However, the Guidelines recognize that dietary supplements (and fortified foods) may be useful in providing one or more nutrients that otherwise may be consumed in less than recommended amounts or that are of particular concern for specific population groups (e.g., pregnant women). Data show that Americans still fall short of meeting recommended intakes for several essential nutrients, including vitamin D, calcium, dietary fiber, and potassium, which are nutrients of public health concern because low intakes are linked to health problems. CRN has engaged in the Dietary Guidelines process for many years to advocate for inclusion of dietary supplements in recommendations.



In the past decade, the Guidelines have gradually increased discussion about dietary supplements and now with the addition of two life stages that clearly have specific nutrient needs that are challenging to meet through food alone, dietary supplements are included in more recommendations. See **Table 1** (page 7) for a comparison of dietary supplement mentions in the past three Guidelines editions).

Looking ahead

With the additional guidance for infants and toddlers and pregnant and lactating women, new questions were raised and more evidence was reviewed about the role of dietary supplements in supporting nutritional needs of these groups. Not every question was answered in this Dietary Guidelines cycle, and more questions may arise, providing opportunity for further discussion about dietary supplements in future Dietary Guidelines for Americans.

The 2020–2025 Dietary Guidelines for Americans and previous editions are available at [dietaryguidelines.gov](https://www.dietaryguidelines.gov).

CRN Recommendations

CRN advocated for the inclusion of dietary supplement focused recommendations, based on evidence presented in the scientific report of the Dietary Guidelines Advisory Committee. The following recommendations were included in the Dietary Guidelines in some variation. See **Table 1** (page 7) for Dietary Guidelines versions of the recommendations.

- ✓ Provide specific guidance on the appropriate use of dietary supplements as a way to meet nutrient needs.
- ✓ Emphasize that vitamin D supplementation is necessary for the U.S. population to meet recommended intakes.
- ✓ Recommend that vitamin B12 dietary supplements may be considered for older adults due to the inefficient absorption of the nutrient in this age group.
- ✓ Reinforce the American Academy of Pediatrics recommendation that infants fed human milk should receive a daily supplement with 400 IU of vitamin D beginning soon after birth.
- ✓ Recommend caregivers to speak with a healthcare provider about supplementation to help meet nutrition needs of infants and toddlers.
- ✓ Recommend women who are pregnant and lactating to speak to a healthcare provider about using dietary supplements to meet nutrient needs not expected to be covered by food alone.



CRN Recommendations *continued*

- ✓ Reinforce the previous Guidelines' recommendation that women who are pregnant are advised to take an iron supplement when recommended by an obstetrician or other health care provider.
- ✓ Reinforce the U.S. Preventive Services Task Force recommendation that all women who are planning or capable of pregnancy take a daily supplement containing 400 to 800 mcg of folic acid.
- ✓ Recommend pregnant and lactating women to consult with a healthcare provider about adequate choline intake and whether choline supplementation is needed.
- ✓ Recommend pregnant and lactating women to supplement with 150 mcg iodine per day to achieve adequate intake as this nutrient is critical for growth and development.
(Note: The Guidelines state that women who are pregnant or lactating may need a supplement containing iodine in order to achieve adequate intake. There is no mention of a specific supplemental amount).
- ✓ Advise lactating women to consult with a healthcare provider about appropriate use of prenatal and other dietary supplements to achieve adequate nutrient intakes, including intake of iron.



Some of CRN’s recommendations were not incorporated in the Guidelines.

These recommendations relate to nutrients or food components that are underconsumed, but have not been designated nutrients of public health concern. The Guidelines focused solely on nutrients or food components of public health concern, which are vitamin D, calcium, dietary fiber, and potassium. The following are CRN recommendations that were not included in the Guidelines:

- Recommend Americans to increase intake of underconsumed nutrients: vitamins A, C, D, E, and K, calcium, dietary fiber, potassium, magnesium and choline, especially vitamin D, calcium, dietary fiber, and potassium as these are nutrients of public health concern. (Note: the Guidelines do emphasize increasing intake of nutrients of public health concern).
- List vitamin E and choline as nutrients for which supplementation by the general population may be considered because they are not provided in adequate amounts in the USDA Food Patterns.
- Recommend supplementation to adolescents and teenagers as a way to meet adequacy goals for nutrients and food components with low intakes in this population group: protein, iron, folate, vitamin B6 and B12, phosphorus, magnesium, and choline (as well as nutrients of public health concern).
- Recommend that protein dietary supplements may be considered for older adults because protein is underconsumed in this age group.
- Recommend that pregnant women consult with a healthcare practitioner about omega-3 fatty acid EPA/DHA supplementation to achieve adequacy as intake of seafood is low in this subpopulation.

Despite not including all of CRN’s recommendations, the 2020–2025 Dietary Guidelines include discussion of dietary supplements more than other guidelines in the past decade. CRN will continue to advocate for recognition of roles for dietary supplements in future editions of the Dietary Guidelines for Americans.

Learn more:
www.crnusa.org/DGA

ADDENDUM: TABLE 1



TABLE 1: Dietary supplements in the Dietary Guidelines for Americans from 2010 to 2020

	2020 – 2025	2015 – 2020	2010 – 2015
General population	<i>2 years and older.</i>	<i>2 years and older.</i>	<i>2 years and older.</i>
Dietary supplements	In some cases, fortified foods and dietary supplements may be useful in providing one or more nutrients that otherwise may be consumed in less than recommended amounts.	In some cases, fortified foods and dietary supplements may be useful in providing one or more nutrients that otherwise may be consumed in less than recommended amounts.	In certain cases, fortified foods and dietary supplements may be useful in providing one or more nutrients that otherwise might be consumed in less than recommended amounts. Because a healthy eating pattern provides for most or all nutrient needs, dietary supplements are recommended only for specific population subgroups or in specific situations.
Multivitamin/multimineral	<i>No mention.</i>	<i>No mention.</i>	Sufficient evidence is not available to support a recommendation for or against the use of multivitamin/mineral supplements in the primary prevention of chronic disease for the healthy American population. Supplements containing combinations of certain nutrients may be beneficial in reducing the risks of some chronic diseases when used by special populations. For example, calcium and vitamin D supplements may be useful in postmenopausal women who have low levels of these nutrients in their diets, to reduce their risk of osteoporosis. In contrast, high levels of certain nutrient supplements may be harmful, if a nutrient's Tolerable Upper Intake Level is exceeded. Supplement use may be discussed with a health care provider to establish need and correct dosage.
Vitamin D	In many cases, taking a vitamin D supplement may be appropriate especially when sunlight exposure is limited due to climate or the use of sunscreen.	In some cases, taking a vitamin D supplement may be appropriate, especially when sunshine exposure is limited due to climate or the use of sunscreen.	Vitamin D also is available as a dietary supplement. As intake increases above 4,000 IU (100 mcg) per day, the potential risk of adverse effects increases.
Potassium	If a healthy dietary pattern is consumed, amounts of calcium, potassium, and dietary fiber can meet recommendations.	To increase potassium, focus on food choices with the most potassium.	Americans should select a variety of food sources of potassium to meet recommended intake rather than relying on supplements.
Vegetarian or vegan	See Infants & Toddlers and Pregnant & Lactating Women	<i>No mention</i>	In the vegan patterns especially, fortified foods provide much of the calcium and vitamin B12, and either fortified foods or supplements should be selected to provide adequate intake of these nutrients.

TABLE 1: Dietary supplements in the Dietary Guidelines for Americans from 2010 to 2020 *continued*

	2020 – 2025	2015 – 2020	2010 – 2015
Infants and Toddlers	<i>Mandated by Congress to include this life stage.</i>	<i>Did not include this life stage.</i>	<i>Did not include this life stage.</i>
Vitamin D	Provide infants with supplemental vitamin D beginning soon after birth. Even when consuming a varied diet achieving adequate vitamin D from foods and beverages (natural sources) alone is challenging, suggesting that young children may need to continue taking a vitamin D supplement after age 12 months. Parents, caregivers, and guardians should consult with a healthcare provider to determine how long supplementation is necessary.	<i>Did not include this life stage.</i>	<i>Did not include this life stage.</i>
Iron	Caregivers of infants exclusively fed human milk should talk with their pediatric care provider about whether there may be a need for infants supplementation with iron before age 6 months.	<i>Did not include this life stage.</i>	<i>Did not include this life stage.</i>
Vitamin B12	When the mother is at risk of vitamin B12 deficiency, human milk may not provide sufficient vitamin B12. In these cases, the mother and/or infant fed human milk may require a vitamin B12 supplement. Parents, caregivers, and guardians should consult with a healthcare provider to determine whether supplementation is necessary.	<i>Did not include this life stage.</i>	<i>Did not include this life stage.</i>
Other nutrient supplements	When feeding infants and toddlers a lacto-ovo vegetarian diet, parents, caregivers, and guardians should consult with a healthcare provider to determine whether supplementation of iron, vitamin B12, and/or other nutrients is necessary and if so, appropriate levels to meet their unique needs.	<i>Did not include this life stage.</i>	<i>Did not include this life stage.</i>
Children & Adolescents	<i>No mention.</i>	<i>No mention.</i>	<i>No mention.</i>
Adults			
Vitamin D	Some individuals may have difficulty producing sufficient vitamin D from sunlight exposure or consuming enough vitamin D from foods and beverages, so a supplement may be recommended by a health professional.	See General population.	See General population.

TABLE 1: Dietary supplements in the Dietary Guidelines for Americans from 2010 to 2020 *continued*

	2020 – 2025	2015 – 2020	2010 – 2015
Pregnant & Lactating Women	<i>Mandated by Congress to expand recommendations for this life stage.</i>	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>
Prenatal vitamin and mineral supplements	Most healthcare providers recommend women who are pregnant or planning to become pregnant take a daily prenatal vitamin and mineral supplement in addition to consuming a healthy dietary pattern. This may be especially important to meet folate/folic acid, iron, iodine, and vitamin D needs during pregnancy.	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>
Lactating women—folic acid and iron	Continued use of prenatal supplements by women who are lactating may exceed their needs for folic acid and iron. Women who are lactating should not exceed the Tolerable Upper Intake Level (UL) of 1,000 mcg of folic acid and 45 mg of iron. Women should seek guidance from a healthcare provider on appropriate use of prenatal or other dietary supplements during lactation. Most prenatal supplements are designed to meet the higher iron needs of pregnancy. Depending on various factors—such as when menstruation returns—prenatal supplements may exceed the iron needs of women who are lactating. Women should seek guidance from a healthcare provider regarding the appropriate level of iron supplementation during lactation based on their unique needs.	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>
Folic acid	The U.S. Preventative Services Task Force (USPSTF) recommends that all women who are planning or capable of pregnancy take a daily supplement containing 400 to 800 mcg of folic acid. Dietary supplements may contain either folic acid or 5-methyltetrahydrofolate (5-MTHF), but only folic acid has been shown to prevent neural tube defects. Most prenatal supplements sold in the United States contain folic acid.	To prevent birth defects, all women capable of becoming pregnant are advised to consume 400 mcg of synthetic folic acid daily, from fortified foods and/or supplements.	All women capable of becoming pregnant are advised to consume 400 mcg of synthetic folic acid daily (from fortified foods and/or supplements) in addition to food forms of folate from a varied diet.
Iron	Women who are pregnant or who are planning to become pregnant are advised to take a supplement containing iron when recommended by an obstetrician or other healthcare provider.	Women who are pregnant are advised to take an iron supplement as recommended by an obstetrician or other health care provider.	Women who are pregnant are advised to take an iron supplement as recommended by an obstetrician or other health care provider.

TABLE 1: Dietary supplements in the Dietary Guidelines for Americans from 2010 to 2020 *continued*

	2020 – 2025	2015 – 2020	2010 – 2015
Pregnant & Lactating Women <i>continued</i>			
Iodine	Women who are pregnant or lactating may need a supplement containing iodine in order to achieve adequate intake. Many prenatal supplements do not contain iodine. Thus, it is important to read the label.	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>
Choline	Women who are concerned about meeting recommendations should speak with their healthcare provider to determine whether choline supplementation is appropriate. Many prenatal supplements do not contain choline or only contain small amounts inadequate to meet recommendations.	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>
Vegetarian or vegan	Women following a vegetarian or vegan dietary pattern should consult with a healthcare provider to determine whether supplementation of iron, vitamin B12, and/or other nutrients such as choline, zinc, iodine, or EPA/DHA is necessary and if so, the appropriate levels to meet their unique needs.	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>	<i>Limited recommendations for this life stage; see Folic acid and Iron.</i>
Older Adults			
Vitamin B12	Some individuals also may require vitamin B12 dietary supplements. Individuals are encouraged to speak with their healthcare provider to determine what, if any, supplementation is appropriate.	<i>No mention.</i>	Individuals ages 50 years and older are encouraged to include foods fortified with vitamin B12, such as fortified cereals, or take dietary supplements.
Other nutrient supplements	Many adults in the U.S. take one or more dietary supplements either as a pill or drink. Popular supplements include some nutrients that are underconsumed among older adults, including calcium and vitamins D and B12. All sources of a nutrient or food component—whether from food or a dietary supplement—should be considered when assessing an individual’s dietary pattern, including any added sugars that may come from supplement drinks. Older adults should track and discuss all dietary supplement use with their healthcare provider. Beverage supplements should not replace regular food intake unless instructed by a health professional.	<i>No mention.</i>	<i>No mention.</i>