



American Society for Nutrition  
*Excellence in Nutrition Research and Practice*

October 9, 2015

Division of Dockets Management (HFA-305)  
U.S. Food and Drug Administration  
5630 Fishers Lane; Room 1061  
Rockville, MD 20852

Re: Docket No. FDA-2012-N-1210; Food Labeling: Revision of the Nutrition and Supplement Facts Labels; Supplemental Proposed Rule To Solicit Comment on Limited Additional Provisions

Dear Sir or Madam:

The American Society for Nutrition (ASN) appreciates the opportunity to comment on the proposed rule “Food Labeling: Revision of the Nutrition and Supplement Facts Labels; Supplemental Proposed Rule To Solicit Comment on Limited Additional Provisions.” ASN brings together the world’s top researchers to advance the knowledge and application of nutrition. ASN has more than 5,000 members from academia, government, public health, and industry, including individuals involved with research and data collection that form the scientific foundation supporting nutrition label information.

**1. New information from the 2015 DGAC report and the science upon which the report is based regarding added sugars**

ASN strongly supports the use of quantitative intake recommendations, such as Institute of Medicine reports used to establish the Dietary Reference Intakes, to guide declaration of non-statutory nutrients. ASN supports the appropriate use of the Scientific Report of the 2015 Dietary Guidelines Advisory Committee<sup>1</sup> to guide declaration of non-statutory nutrients, such as when quantitative intake recommendations are not in IOM reports and can be supported by a Nutrition Evidence Library systematic review. However, food modeling is not a substitute for a systematic review.

**2. The proposal to establish a DRV for added sugars and to require the declaration of the percent DV for added sugars on the Nutrition and Supplement Facts labels**

Efforts to reduce calorie intake, including reduced sugar consumption, among other lifestyle modifications, are essential to reduce obesity and related chronic disease. Both

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<sup>1</sup> Dietary Guidelines Advisory Committee. 2015. Report of the Dietary Guidelines Advisory Committee on the Dietary Guidelines for Americans, to the Secretary of Agriculture and the Secretary of Health and Human Services. Rockville, MD: U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion; 2015.

added sugar and naturally occurring sugar can contribute caloric intake, which in turn may lead to obesity and related chronic diseases. Added sugars provided roughly 13 percent of total calories for the average American adult between 2005 and 2010.<sup>2</sup> Excess sugar consumption may also lead to potential nutrient dilution.<sup>3</sup>

The declaration of the percent Daily Value (%DV) has been a very helpful tool to assist consumers with product comparisons and allow consumers to determine the relative contributions of a product to an overall health-promoting diet. If FDA requires the declaration of the percent Daily Value (%DV) for added sugars on the Nutrition Facts label, establishing a Daily Reference Value (DRV) for total energy intake from added sugars would be useful in this context. However, the scientific justification for the proposed value of 10% of total energy intake is not clear since it is based on menu-modeling and is not included in the meta-analysis conducted by Te Mornega, as stated by FDA.

Well-grounded dietary guidance and relevant tools are essential for achieving public health and consumer confidence in nutrition recommendations. Relevant tools include consumer education to aid in translation and understanding of the food label to help consumers make informed, healthy choices. A large-scale educational campaign is needed that would provide consumers with the necessary information and tools to use the Nutrition Facts label for the maximum benefit to public health. Thus, ASN strongly recommends that FDA conduct a comprehensive consumer education campaign on the revised Nutrition Facts label, including a significant focus on calories and concerns regarding excess calories from sugar, *prior to* when changes first appear on food products. Consumer education is necessary to lead to increased consumer understanding and therefore behavior change that benefits public health. ASN urges FDA to fully involve all stakeholders, including ASN, in the implementation of the revised label and any related consumer education campaigns.

### **3. Using the term “Total Sugars” instead of “Sugars” on the label**

If a %DV for added sugars is included on the Nutrition Facts label, ASN supports FDA’s rationale for use of the term “Total Sugars” instead of “Sugars” on the label since FDA’s

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<sup>2</sup> Ervin RB and Ogden CL. Consumption of Added Sugars Among U.S. Adults, 2005–2010. NCHS Data Brief, No. 122. Hyattsville, MD: National Center for Health Statistics. May 2013.

<sup>3</sup> Marriott BP, Olsho L, Haddad L, et al. “Intake of added sugars and selected nutrients in the United States, National Health and Nutrition Examination Survey (NHANES) 2003–2006,” *Crit Rev Food Sci Nutr* 50(3):228–58. 2010.

consumer research<sup>4</sup> showed that the total sugars+added sugars format appeared to help consumers better comprehend the total amount of sugars in a serving, rather than use of an added sugars declaration alone.

However, FDA’s consumer research also points to consumer confusion surrounding the distinction between total sugar and added sugar, regardless of whether added sugars declarations appear or not. ASN recommends a comprehensive consumer education campaign with a major focus on new elements of the label related to total and added sugar to help consumers grasp these distinctions and use the label most effectively. Because such an education campaign is proposed as a means to help consumers better understand an added sugars declaration, as this need is demonstrated in FDA’s consumer studies, FDA should provide information on the nature of the education campaign and the resources available before mandating a declaration that is potentially misleading.

#### **4. The proposed text for the footnotes to be used on the Nutrition Facts label**

A more consumer-friendly footnote can allow for increased consumer understanding of the Nutrition Facts label if used by an adequate population. Research is necessary to determine actual usage of the footnote by consumers. ASN supports the proposed text “\*The % Daily Value tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice” should a footnote be used on the Nutrition Facts label. The definition of %DV, as well as a succinct statement on calories, can be helpful to consumers, along with consumer education to teach consumers how to use the revised footnote to assist with making more informed food choices.

#### **5. Exemptions from the proposed footnote requirement**

ASN supports footnote exemptions for products that can use the terms “calorie free”, “free of calories”, “no calories”, “zero calories”, “without calories”, etc., as well as for products that qualify for a simplified format and from small or intermediate packages, provided that the abbreviated statement is used.

#### **6. Whether we should make changes to the footnote used on the Supplement Facts label**

ASN believes that the Supplement Facts label should be the same as the Nutrition Facts label that is found on conventional foods. Different versions of Nutrition Facts and Supplement Facts labels for conventional foods and dietary supplements may decrease consumer use, understanding, and trust of these tools.

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<sup>4</sup> <http://www.regulations.gov/#!documentDetail;D=FDA-2012-N-1210-0539>. Accessed on September 28, 2015.

**7. Whether there should be a footnote on labels of food represented for infants 7 through 12 months of age or children 1 through 3 years of age, and, if so, what that footnote should say.**

Again, research is necessary to determine the usage of the footnote on the Nutrition Facts label by consumers. If used by an adequate population, a footnote on labels of products intended for infants 7 through 12 months of age and children 1 through 3 years of age can help parents and caregivers understand that daily calorie needs for infants and young children differ from the 2,000 calorie diet referenced in the footnote found on products intended for adults. It is important to indicate through a footnote that a 1,000 calorie reference amount is used for children 1 through 3 years of age, rather than a 2,000 calorie diet. ASN also notes the need for additional research to better understand the impact of labeling of products for infants 7 through 12 months of age and children 1 through 3 years of age on the health of these subpopulations, preferably *before* changes are made to the labels for foods represented for these subpopulations.

Thank you for your consideration of ASN's comments on the supplemental proposed rule. Please contact Sarah Ohlhorst, Director of Government Relations, [[sohlhorst@nutrition.org](mailto:sohlhorst@nutrition.org); 301.634.7281] if ASN may provide additional information.

Sincerely,



Patrick J. Stover, Ph.D.  
ASN President, 2015-2016