

**Meeting 2 of the 2020 Dietary Guidelines Advisory Committee**  
Oral Testimony of Jessi Silverman, MSPH, RD  
Policy Fellow, Center for Science in the Public Interest  
July 11, 2019

My name is Jessi Silverman. Thank you for the opportunity to share comments on behalf of the Center for Science in the Public Interest. CSPI is a non-profit consumer advocacy organization that provides science-based food and nutrition advice and led efforts to secure the Nutrition Facts Panel and added sugar disclosures on that Panel, calorie labeling on chain restaurant menus, elimination of artificial trans fat from food, improvements to school lunches, and the removal of sugary drinks from schools, amongst other things.

CSPI will submit detailed written comments on many of the questions that the DGAC will address. Today, I will briefly make five points.

First, strong evidence supports the dietary pattern recommended by the 2015 DGA advisory committee which is a diet “higher in vegetables, fruits, whole grains, low- or non-fat dairy, seafood, legumes, and nuts; moderate in alcohol (among adults); lower in red and processed meat; and low in sugar-sweetened foods and drinks and refined grains.”<sup>1</sup> That dietary pattern is likely to reduce the risk of heart attacks and strokes, as well as type 2 diabetes and some cancers.

Second, the strongest evidence consistently has found that replacing saturated fats with unsaturated fats reduces the risk of heart disease, and the best evidence does not justify a switch from low-fat to high-fat dairy.<sup>2</sup> That evidence includes high-quality observational data and randomized controlled trials that measure both heart disease outcomes and LDL cholesterol, a well-established cause of cardiovascular disease.

Third, while every Dietary Guidelines since 1980 recommended limiting sugar, the 2015 Guidelines set a target of no more than 10 percent of calories from added sugars.<sup>3</sup> That advice should continue because sugary drinks lead to weight gain in children<sup>4</sup> and adults<sup>5</sup> in

---

<sup>1</sup>Dietary Guidelines Advisory Committee. *Scientific Report of the 2015 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Health and Human Services and the Secretary of Agriculture*. U.S. Department of Agriculture, Agricultural Research Service. 2015. Available at <https://health.gov/dietaryguidelines/2015-scientific-report/PDFs/Scientific-Report-of-the-2015-Dietary-Guidelines-Advisory-Committee.pdf>.

<sup>2</sup>Sacks FM, et al. Dietary Fats and Cardiovascular Disease: A Presidential Advisory from the American Heart Association. *Circulation*. 2017;136(3):e1-e23.

<sup>3</sup>U.S. Department of Health and Human Services and U.S. Department of Agriculture. *2015-2020 Dietary Guidelines for Americans*. December 2015. Available at [https://www.dietaryguidelines.gov/sites/default/files/2019-05/2015-2020\\_Dietary\\_Guidelines.pdf](https://www.dietaryguidelines.gov/sites/default/files/2019-05/2015-2020_Dietary_Guidelines.pdf).

<sup>4</sup>de Ruyter JC, et al. A Trial of Sugar-Free or Sugar-Sweetened Beverages and Body Weight in Children. *N Engl J Med*. 2012;367(15):1397-1406.

<sup>5</sup>Te Morenga L, Mallard S, Mann J. Dietary Sugars and Body Weight: Systematic Review and Meta-Analyses of Randomised Controlled Trials and Cohort Studies. *BMJ*. 2012;346:e7492.

randomized controlled trials and are linked to a higher risk<sup>6</sup> of heart disease,<sup>7,8</sup> type 2 diabetes,<sup>9</sup> and tooth decay. In addition, excessive consumption of sugary foods and beverages make it difficult to meet nutrient and food group recommendations without exceeding calorie needs.

Fourth, a variety of diets—including low-carbohydrate, DASH, and Mediterranean—can lead to weight loss. That conclusion is supported by numerous trials and by health authorities like the American Heart Association, American College of Cardiology, and The Obesity Society.<sup>10</sup>

Finally, the obesity epidemic is not a result of the wrong dietary advice, as some assert. Rather, poor public health is largely due to our toxic food environment, which surrounds us 24/7 with super-sized burgers, fries, shakes, pizzas, nachos, cookies, and sodas, not just at restaurants but at movie theaters, shopping malls, gas stations, convenience stores, and elsewhere. As it has in previous editions, the Committee should provide recommendations for policies and food system changes to support the ability of families and individuals to eat according to its recommendations.

Thank you.

July 2019

---

<sup>6</sup>Dietary Guidelines Advisory Committee, 2015.

<sup>7</sup>de Koning L, et al. Sweetened Beverage Consumption, Incident Coronary Heart Disease and Biomarkers of Risk in Men. *Circulation*. 2012;125(14):1735-S1.

<sup>8</sup>Fung TT, et al. Sweetened Beverage Consumption and Risk of Coronary Heart Disease in Women. *Am J Clin Nutr*. 2009;89:1037-1042.

<sup>9</sup>Hu FB, Malik VS. Sugar-Sweetened Beverages and Risk of Obesity and Type 2 Diabetes: Epidemiologic Evidence. *Physiol Behav*. 2010;100(1):47-54.

<sup>10</sup>Jensen MD, et al. 2013 AHA/ACC/TOS Guideline for the Management of Overweight and Obesity in Adults: A Report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines and The Obesity Society. *Circulation*. 2014;129(25 Suppl 2):S102-38.