

April 28, 2015

Don Wright, Deputy Assistant Secretary for Health U.S. Department of Health and Human Services 1101 Wootton Parkway Suite LL100 Tower Building Rockville, MD 20852

Angela Tagtow, Executive Director Center for Nutrition Policy and Promotion U.S. Department of Agriculture 3101 Park Center Drive, Room 1034 Alexandria, VA 22302

Steven R. Shafer. Associate Administrator Agricultural Research Service U.S. Department of Agriculture 3101 Park Center Drive, Room 1034 Alexandria, VA 22302

RE: Scientific Report of the 2015 Dietary Guidelines Advisory Committee

Dear Mr. Wright, Ms. Tagtow, and Mr. Shafer,

On behalf of the American Academy of Family Physicians (AAFP), which represents 115,900 family physicians and medical students across the country, I write in response to the solicitation of written comments on the Scientific Report of the 2015 Dietary Guidelines Advisory Committee as requested by your agencies in the February 23, 2015 Federal Register.

The AAFP applauds the Department of Health and Human Services and the Department of Agriculture for releasing this report and we are impressed with its thoroughness. The AAFP appreciates the report's attention to population health, health equity, health interventions, and behavior change.

We support the inclusion of psychosocial factors discussed concerning food deserts. We acknowledge and appreciate the considerations given to food insecurity and its overall effect on health. The fact that lowincome communities frequently do not have access to healthy and affordable food choices has serious detrimental effects on our population's health and the AAFP encourages further action to reduce these food deserts.

Executive Vice President Douglas E. Henley, MD Leawood, KS

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As the Dietary Advisory Committee contemplates future reports, the AAFP urges enhanced discussion surrounding early exercise interventions in childhood obesity since these efforts provide sustained benefits into adulthood.

We also urge the committee to recognize that limited clinical evidence exists to support the committee's recommendation to reduce sodium intake to below 2300 mg/d in order to decrease the risk of cardiovascular disease or all-cause mortality.

Finally, while we recognize that the committee has made efforts to be consumer-oriented, the AAFP did not see adequate representation on the committee by a lay-person. Since it is recommended that patients participate in clinical practice guidelines to ensure that patient preference is being considered, the AAFP urges inclusion of patients since their perspective could be valuable in the development of dietary guidelines.

For any questions you might have please contact Robert Bennett, Federal Regulatory Manager, at 202-232-9033 or rbennett@aafp.org.

Sincerely,

Reid B. Blackwelder, MD, FAAFP

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Board Chair