



October 16, 2017

Anna K. Abram, Deputy Commissioner for Policy, Planning Legislation, and Analysis
Division of Dockets Management (HFA-305)
Food and Drug Administration
5630 Fishers Lane, Rm. 1061
Rockville, MD 20852

RE: Docket Nos. FDA-2012-N-1210 and FDA-2004-N-0258 for “Food Labeling: Revision of the Nutrition and Supplement Facts Labels and Serving Sizes of Foods That Can Reasonably Be Consumed at One Eating Occasion; Dual-Column Labeling; Updating, Modifying, and Establishing Certain Reference Amounts Customarily Consumed; Serving Size for Breath Mints; and Technical Amendments; Extension of Compliance Date.”

Dear Deputy Commissioner Abram:

On behalf of the American Academy of Family Physicians (AAFP), which represents 129,000 family physicians and medical students across the country, thank you for the opportunity to comment on the [proposed rule](#) published in the October 2, 2017 *Federal Register*. In this proposed rule, the FDA is proposing to extend compliance dates by approximately 1.5 years for the final rules providing updated nutrition information on the label of food. The FDA claims this extended compliance date is needed after determining that additional time would help ensure that all manufacturers covered by the final rules have guidance from FDA to be in compliance with the requirements.

The AAFP finds this proposed rule and further delay in complying with food menu labeling requirements preposterous. The AAFP strongly urges FDA to begin enforcement as soon as possible. As the AAFP communicated as recently as June 28, 2017 in a [comment letter](#) and as we noted in an October 7, 2010 [comment letter](#), Congress required the FDA to enforce these menu requirements one year after enactment of the *Affordable Care Act* of 2010. **Enforcement should have taken effect in March of 2011.**

The AAFP perceives sound nutrition as a cornerstone of health and we believe that food menu labeling requirements will help improve patients’ knowledge of nutritional choices. Furthermore, we believe that food menu labeling requirements will begin to help address the widespread prevalence of obesity in the United States.

The rise in overweight and obesity are associated with eating outside of the home environment. Menu labeling requirements help consumers make healthier nutritional choices. In the past 30 years, the occurrence of overweight in children has tripled, and it is now estimated that one in five children in the US is overweight (17%). Childhood overweight is now regarded as the most common prevalent nutritional disorder of US children and adolescents. And what happens early in life continues in adulthood as overweight or obese preschoolers are 5 times more likely than normal-weight children to

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be overweight or obese as adults. Epidemiologic studies have identified high body-mass index (BMI, the weight in kilograms divided by the square of the height in meters) as a risk factor for an expanding set of chronic diseases, including cardiovascular disease, diabetes mellitus, chronic kidney disease, many cancers, and an array of musculoskeletal disorders.

Overweight and obesity are addressed in physician offices initially through screens. According to the US Preventive Services Task Force (USPSTF), physicians should screen children and adolescents 6 years of age and older, and if they are obese, they should refer them for a behavioral intervention program of at least 26 hours duration to ensure weight loss. The new recommendations update earlier USPSTF guidance on screening for obesity in children 6 years of age and older issued in 2010.

Based on this information and what family physicians see in their practices every day, the AAFP is extremely concerned that the FDA yet again proposes to extend the compliance date for requiring disclosure of nutrition information for standard menu items in many restaurants. **While nutrition labeling of menus alone will not eliminate this crisis, the extent of the problem demands immediate action and this small but important step should be enforced now.**

We therefore urge the FDA to act and stop these needless and avoidable delays. While AAFP recognizes that some establishments might need time to prepare, 7.5 years is more than sufficient time for applicable businesses to make necessary changes. Generally, the large corporations impacted by the statute already provide nutritional information upon request to their consumers. **Therefore, there is no need to further delay enforcement.**

We appreciate the opportunity to provide these comments and make ourselves available for your questions. Please contact Robert Bennett, Federal Regulatory Manager, at 202-232-9033 or rbennett@aafp.org with any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "John Meigs, Jr., MD, FAAFP". The signature is fluid and cursive, with "John" and "Meigs" being the most prominent parts.

John Meigs, Jr., MD, FAAFP
Board Chair