## Practice Guidelines

## **Updated Dietary Guidelines from the USDA and HHS**

ELIZABETH HORSLEY, MSJ

**Guideline source:** U.S. Department of Agriculture and U.S. Department of Health and Human Services

Evidence rating system used? Yes

Literature search described? Yes

Available at: http://www.dietaryguidelines.gov

Coverage of guidelines from other organizations does not imply endorsement by *AFP* or the AAFP.

A collection of Practice Guidelines published in AFP is available at http:// www.aafp.org/afp/ practquide. The U.S. Department of Agriculture (USDA) and the U.S. Department of Health and Human Services (HHS) jointly created the updated version of the *Dietary Guidelines* for Americans, 2010. The *Dietary Guidelines* for Americans are reviewed every five years, by law. Previous versions of the guidelines stated that the recommendations were meant for healthy Americans older than two years, whereas the 2010 update changed this wording to specify that the recommendations apply not only to those who are healthy, but

also to those who are at increased risk of chronic disease.

The updated guidelines are based on two main concepts: focusing on balancing caloric intake over time to reach and maintain a healthy body weight; and consuming more nutrient-dense foods and beverages in place of those high in sodium, saturated fats, added sugars, and refined grains. The key recommendations from the guidelines specifically address how to balance caloric intake for weight management; reduce consumption of less healthy foods; increase overall intake of healthier foods and nutrients; and develop healthy eating patterns (Table 1). The guidelines emphasize that most persons' nutritional needs are best met solely by consuming foods, but that fortified foods and dietary supplements may be helpful in some cases.

### Table 1. Overview of Key Recommendations from the Dietary Guidelines for Americans, 2010

### Balance caloric intake for weight management

Control total caloric intake to manage body weight

Increase physical activity and reduce time spent doing sedentary activities

Maintain appropriate caloric balance during childhood, adolescence, adulthood, pregnancy and breastfeeding, and older age

Prevent or reduce overweight and obesity by improving eating and physical activity behaviors

#### Reduce intake of less healthy foods

Get less than 10 percent of calories from saturated fatty acids; avoid consuming *trans* fatty acids

Limit alcohol consumption to no more than one drink per day in women and two drinks per day in men

Limit consumption of foods with refined grains

Reduce daily sodium intake to < 2,300 mg; or < 1,500 mg in persons who are black, older than 50 years, or who have hypertension, diabetes mellitus, or chronic kidney disease

Reduce intake of calories from solid fats and added sugars

### Increase intake of healthier foods

Choose a variety of protein foods; replace those higher in solid fats with proteins lower in solid fats

Choose foods that provide more potassium, fiber, calcium, and vitamin D

Consume at least one-half of grains as whole grains Increase intake of vegetables, fruits, and fat-free or low-fat dairy products; eat a variety of vegetables Increase the amount and variety of seafood in diet Use oils in place of solid fats, when possible

### **Build healthy eating patterns**

Account for all foods and beverages consumed to assess overall healthy eating pattern goals

Follow food safety recommendations

Make sure eating pattern meets appropriate nutrient and caloric needs

### **Practice Guidelines**

The guidelines cover additional dietary recommendations specific to certain population groups, including persons 50 years and older, and women who are pregnant or breastfeeding, or who are capable of becoming pregnant. For older persons, recommendations involve consuming foods fortified with vitamin  $B_{12}$  (e.g., fortified cereals) or taking dietary supplements to ensure adequate vitamin levels. Women who are pregnant or breastfeeding are advised to consume 8 to 12 oz of seafood per week, but to limit consumption of white (albacore) tuna to 6 oz per week and to avoid consuming tilefish, shark, swordfish, and king mackerel. Pregnant women are advised to take an iron supplement. For women capable of becoming pregnant, the guidelines address iron intake by recommending that this population choose foods that include heme iron, provide additional iron sources, and are high in nutrients that enhance iron

absorption (e.g., vitamin C). These women also are advised to consume 400 mcg of synthetic folic acid per day.

Also included in the guidelines are basic food safety principles to help reduce the risk of foodborne illness, and a section about helping Americans make healthy choices to improve overall nutrition and physical activity in the United States. The updated guidelines also noted and took into consideration that almost 15 percent of households recently have been unable to obtain sufficient food to meet dietary needs.

### **Answers to This Issue's CME Quiz**

| <b>Q1.</b> C          | <b>Q6.</b> C          |
|-----------------------|-----------------------|
| <b>Q2.</b> A, B, C, D | <b>Q7.</b> B          |
| <b>Q3.</b> B          | <b>Q8.</b> A, B, D    |
| <b>Q4.</b> C          | <b>Q9.</b> A, B, C, D |
| <b>O5.</b> A, C, D    |                       |

# A real page turner.



Get the tools and information you need to build a better practice and improve patient care.

Sign up for the digital edition of Family Practice Management while it's still free.

To sign up, visit www.aafp.org/fpm/digitalfpm.



Family Practice Management