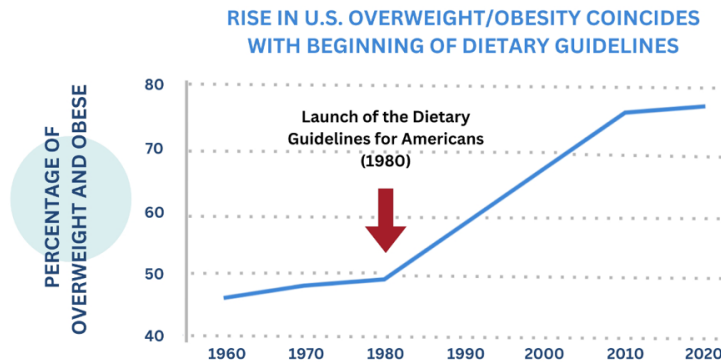


CHRONIC DISEASE IN AMERICA *CANNOT* BE REVERSED WITHOUT CHANGING THE US DIETARY GUIDELINES

By Nina Teicholz

For the past 45 years (since 1980), the federal government has, every five years, published the Dietary Guidelines for Americans —the principal policy guiding diet in the United States—with three goals, to: (1) promote good health, (2) help Americans reach a healthy weight, and (3) prevent chronic disease. However, by any measure, the guidelines have failed to achieve these goals.



Source: CDC Data

What is wrong with the guidelines?

How the US Dietary Guidelines Fail Americans
The Dietary Guidelines recommend:

- **6 servings of grains per day**
 --- Including **3 servings of refined grains**

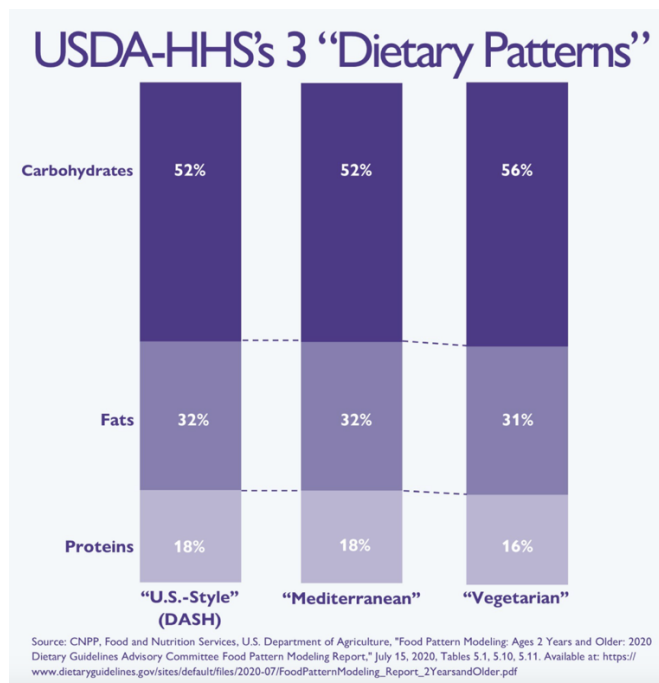
- Up to **10%** of calories as sugar

- **5.5 tsps** of (industrial seed) oils
 --- (No natural fats)


Per day for all Americans age 2 and older

 **NUTRITION
COALITION**
For evidence-based nutrition policy

In all, this is >50% carbohydrates (The US Dept. of Agriculture and US Dept of Health and Human Services co-issue the guidelines):



By contrast, Americans in 1965 ate 39% of calories as carbohydrates.¹ Obesity rates then were under 15% for adults (As of 2016, the obesity rate was nearly 43%, which is the most recent CDC number available).

So, the Dietary Guidelines, by telling us to eat so many grains and sugars, have very likely *increased* the risk of chronic disease or possibly even *caused* the chronic disease epidemics. This idea is supported by the fact that a very large body of rigorous [science](#) now shows that type 2 diabetes and obesity, among other diseases, can be *reversed* (or put into remission) by eating a diet low in carbohydrates.

The case for type 2 diabetes is especially strong. *No other* whole-foods approach has the science (i.e., clinical trials) to show that it can *reverse* this disease—not low-calorie, low-fat, vegan/vegetarian, Mediterranean, DASH, or any other diet. Only a low-carbohydrate diet is backed by a high level of scientific evidence.

Also: the Dietary Guidelines do not supply all the *essential* vitamins and minerals needed for life even if you follow the guidelines perfectly.

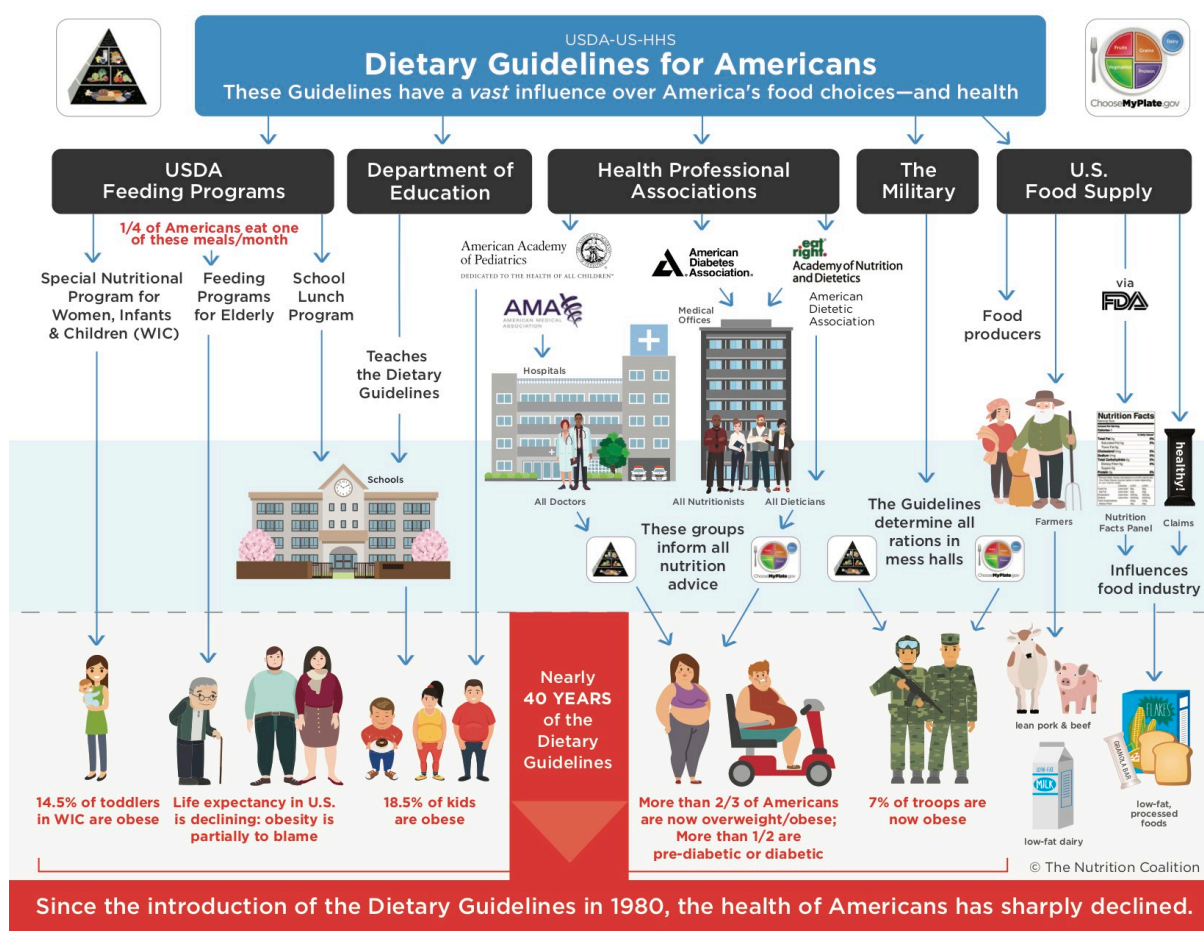
"Nutrients that do not meet Recommended Dietary Allowance or Adequate Intake goals include the following: **Iron, Vitamin D, Vitamin E, Choline, and Folate.**"²

The guidelines are the single most powerful policy affecting what Americans eat

They are taught in schools (K-12) and are considered the “gold standard” by doctors, nutritionists, dietitians and other health professionals.

By law, the guidelines are also required to be followed by all federal nutrition programs, such as school lunches, SNAP (Supplemental Nutrition Assistance Program), food for women, infants, and children (WIC), and programs for the elderly. Also, nutrition programs for the military.

Here are the many ways that the guidelines influence Americans:



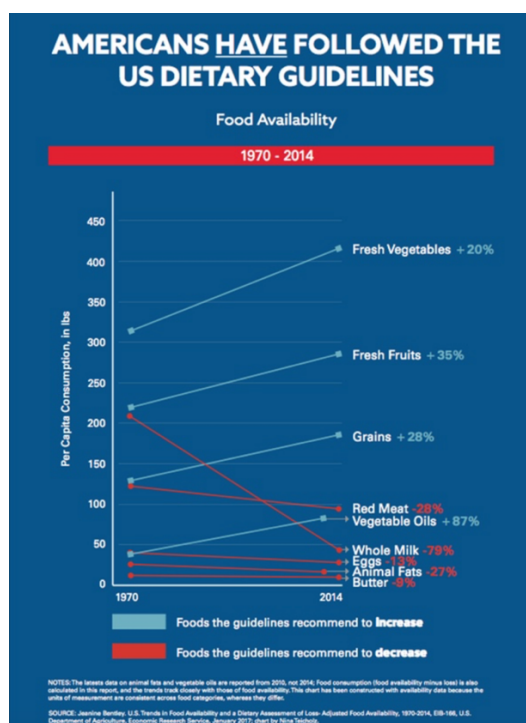
Since the introduction of the Dietary Guidelines in 1980, the health of Americans has sharply declined.

The Dietary Guidelines *exclude* advice for people with obesity, diabetes, heart disease, cancer, or any other chronic disease.

At least 60% of American adults have one or more chronic diseases, according to a CDC estimate from 2016 data--the most available. The number today is no doubt far higher. However, the Dietary Guidelines *do not provide treatment advice* for sick people. The policy is designed for *prevention only*.

What does this mean? In plain terms, the process of creating the Guidelines does *not* include a review of the scientific literature on how to reverse obesity, type 2 diabetes, or any other chronic disease. For instance, the 2020 Guidelines process explicitly excluded the entire scientific literature on weight loss.

People contend that the problem is *not* the Guidelines because Americans don't follow them. However, the best available evidence does not support this idea:



There's a chart very much like this one on food consumption (availability minus loss).

Why do the guidelines give ineffective/wrong advice?

The Guidelines are based on weak science:

- “[T]he recommended diets are supported by a minuscule quantity of rigorous evidence that only marginally supports claims that these diets can promote better health than alternatives.”
--*BMJ* cover story, 2015
- “Dietary recommendations were introduced for 220 million US...in the absence of supporting evidence from RCTs [randomized, controlled clinical trials]”³ and there’s still *no RCT evidence* to support the advice on saturated fat and total fat. according to at least two dozen systematic reviews of the evidence⁴.
- *There is a long history of widespread concern about the weak science behind the guidelines, going back decades.*

Two 2017 reports by the National Academies of Sciences, Engineering, and Medicine (NASEM), mandated by Congress with a \$1 million allocation, concluded that:

- The current guidelines’ process for reviewing the science falls short of meeting the “best practices for conducting systematic reviews,” and that “methodological approaches and scientific rigor for evaluating the scientific evidence” needs to “be strengthened.”
- “The methodological approaches to evaluating the scientific evidence require increased rigor to better meet current standards of practice.”
- The guidelines should be “universally viewed as valid, evidence-based, and free of bias and conflicts of interest to the extent possible. This has not routinely been the case.”
- “To develop a trustworthy DGA [dietary guidelines], the process needs to be redesigned.”

NASEM made [11 recommendations](#) to USDA, to improve the rigor and transparency of the guidelines process.

Congress then allocated another \$1 million for NASEM to monitor the USDA’s progress. Our analysis of these 2022/2023 reports concluded that the USDA has [not fully implemented](#) even one of the NASEM recommendations.

The Dietary Guidelines process has been ‘captured’ by industry

95% of the expert committee responsible for the science in our current guidelines had at least one tie with a food or pharmaceutical company.

- A total of more than 700 conflicts of interest were found on the committee
- One advisor alone, Sharon Donovan, accounted for 152 of these ties.
- The corporations with the most frequent and durable connections to the committee were Kellogg, Abbott, Kraft, Mead Johnson, General Mills, and Dannon.

The USDA office that runs the Dietary Guidelines has formal partnerships with more than 100 food companies.

¹ Cohen et al. *Nutrition* 2015, 727-732.

² See the [2020 Report, Part D, Chapter 14, page 10.](#)

³ Harcombe Z, Baker JS, Cooper SM, *et al* Evidence from randomised controlled trials did not support the introduction of dietary fat guidelines in 1977 and 1983: a systematic review and meta-analysis *Open Heart* 2015;**2**:e000196. doi: 10.1136/openhrt-2014-000196

⁴ Harcombe Z, Baker JS, DiNicolantonio JJ, Grace F, Davies B. Evidence from randomised controlled trials does not support current dietary fat guidelines: a systematic review and meta-analysis. *Open Heart*. 2016 Aug 8;**3**(2):e000409. doi: 10.1136/openhrt-2016-000409; Astrup A, Magkos F, Bier D, et al. Saturated Fats and Health: A Reassessment and Proposal for Food-Based Recommendations. *J Am Coll Cardiol*. 2020 Aug, 76 (7) 844–857. Click here to see [a full list](#) of systematic reviews.