

Perspectives on Proposed Research
Nutrient Standards and Meal Requirements for NSLP and SBP:
IOM Phase I Report

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Phase I and Phase II Reports

- | We would like to thank the Committee and the IOM staff for the excellent work thus far.
- | We recognize the many challenges ahead in the process of the committee's recommendations and the development of the Phase II report

Considerations

- | **USDA is committed to moving forward to a proposed rule based on these recommendations**
- | **Cost is and will continue to be a concern;**
 - however, Congress may provide a rate increase in the CN/WIC reauthorization
- | **The research needs section of the final report is important;**
 - this could affect future USDA study design, data collection and analysis.
- | **In the following slides we will highlight a few items from the Phase I for the Committee to consider in the development of the recommendations and the final Phase II report.**

School Administrative Issues

- | Please consider modifying Criterion 4 in Box S-2 to read as follows (page 6):
 - The Nutrition Standards and Meal Requirements will be sensitive to program costs *and school administrative issues*.

- | Reason for Suggested change:
 - The NSLP/SBP must operate within the administrative structure of school food authorities.
 - This structure dictates meal periods and frequently requires the service of large numbers of meals within a short period of time.
 - Any changes in meal requirements must be flexible enough to permit Programs to operate within the confines of the school administration.

Assumptions Related to the Proposed Planning Models

“On average, foods offered will be equal to foods consumed; it is inappropriate to inflate the Nutrition Standards or the Menu Requirements, or both, to account for food offered but not consumed.” (page 90)

- | We are not aware of any scientific basis to support this assumption of offered = consumed. There is some information suggesting that the relationship may vary with food group.
- | SNDA-III includes findings on offered, served and eaten, and therefore may provide useful data

Proposed Planning Model for Foods (Food Composites)

“On average, the selection of school foods offered within a food group will match the foods that were used to develop the nutrient profiles of the MyPyramid food groups.” (page 90)

- | **MyPyramid food groups**
 - are in the most nutrient-dense form (low-fat and no sugar added form)
 - the item clusters comprising the composites are weighted based on NHANES consumption data for the U.S. population (children and adults).
- | **FNS would like IOM to consider whether these total population weighted composites adequately represent the meal-specific consumption of school-aged children.**

Proposed Planning Model for Foods, (Food Composites - Milk)

- | For the MyPyramid composites, Milk vitamin A is a special case:
 - The amount of Vitamin A in whole milk was used for the MyPyramid estimates instead of the amount found in fortified fat-free milk to avoid overestimation of Vitamin A for those who consume non-fortified milk products.
 - This may not be appropriate for schools because most of the milk served at schools is vitamin A fortified

See Marco et al, JNEB Nov/Dec 2006 Supplement, p.S97

DRI Planning Model

On using the weighted average approach or the nutrient density approach: (page 93)

- | **Please explore the gender distribution of predicted inadequacy and excess, especially where biochemical data suggest gender-related differences in the percent inadequate.**
 - **Girls 9 – 18 years of age often require a greater nutrient density than similarly aged boys (for example, for vitamin C, girls and boys 9-13 EAR is 39mg for both, but boys EER is higher).**
 - **Therefore, girls are at a greater risk of inadequacy than boys for certain nutrients**
- | **Consider breaking out the calculations for males and females to show the percent inadequate by gender rather than the age-group population as a whole.**

Estimated Energy Standards

“The current energy standard provides about 40% percent of the day’s energy needs, rather than 33%.”
(Page 94)

- | To clarify, the current NSLP energy (calorie) standards were promulgated in 1995 based on 1/3 of the 1989 RDAs recommended energy allowances for children at median height and weight (p.33 of RDAs, 1989)
- | The 2004 DRI macronutrient report estimated energy requirements are lower than previous IOM recommendations. This is one important reason why an update to program regulations is needed.

Iron

“The EAR cut-point method cannot be used for iron because the distribution of the requirement is not symmetric. The prevalence of inadequacy must be estimated from probability tables and this may be done during Phase II of the study.” (Page 99)

- Although iron requirements are not normally distributed and therefore are more complicated to address, it is especially important to take a careful look at this nutrient.
- Please give special consideration due to the biochemical findings from NHANES of iron deficiency in teenage girls.

Prevalence of Iron Deficiency

Females 16-19 years = 16%

Medscape www.medscape.com

TABLE 1. Prevalence of iron deficiency — United States, National Health and Nutrition Examination surveys, 1988–1994 and 1999–2000*

Sex/Age group (yrs)	1988–1994			1999–2000		
	No.	%	(95% CI) [†]	No.	%	(95% CI)
Both sexes						
1–2	1,339	9	(6 –11)	319	7	(3–11)
3–5	2,334	3	(2 – 4)	363	5	(2 – 7)
6–11	2,813	2	(1 – 3)	882	4	(1 – 7)
Males						
12–15	691	1 ^{§¶}	(0.1– 2)	547	5 [¶]	(2 – 8)
16–69	6,635	1 [¶]	(0.6– 1)	2,084	2 [¶]	(1 – 3)
≥70	1,437	4	(2 – 3)	381	3 [§]	(2 – 7)
Females**						
12–49	5,982	11	(10 –12)	1,950	12	(10–14)
12–15	786	9	(6 –12)	535	9	(5 –12)
16–19	700	11	(7 –14)	466	16	(10–22)
20–49	4,495	11	(10 –13)	949	12	(10–16)
White, non-Hispanic	1,827	8	(7 – 9)	573	10	(7 –13)
Black, non-Hispanic	2,021	15	(13 –17)	498	19	(14–24)
Mexican American	1,845	19	(17 –21)	709	22	(17–27)
50–69	2,034	5 [¶]	(4 – 7)	611	9 [¶]	(5 –12)
≥70	1,630	7	(5 – 8)	394	6	(4 – 9)

* All racial/ethnic groups except where noted.
[†] Confidence interval.
[§] Unreliable; relative standard error (i.e., standard error/prevalence estimate) is >30%.
[¶] p<0.05 for comparison between surveys within age and sex category.
 ** Nonpregnant only.

Source: MMWR © 2002 Centers for Disease Control and Prevention (CDC).

EAR for Carbohydrates

“For nutrients with an EAR...” (page 100, #2)

- | Note that in setting the Target Meal Intake, step 2 may not be applicable to carbohydrates.
 - The carbohydrate EAR of 100 grams per day equals 400 calories
 - This is significantly lower than what the lower end of the AMDR range for children recommends (for example, 45% of 1600 calories = 720 calories)

Sodium

“For sodium, set the target median intake equal to the UL for the age-gender group.” (page 100)

- | **FNS understands that this will be very difficult to achieve in menus that are acceptable to children.**
 - As noted on page 100, this is a big challenge and will require extensive iterative consideration
 - This is an example of where the 4 weeks of cycle menus come in as part of the process.
- è Please allow adequate time and resource for this important aspect of the work.

Inflating the Cost of Food

Is the Consumer Price Index (CPI) for “food away from home” the best index to use for inflating the food portion of the cost?

- | **CPI or food away from home is heavily influenced by changes in labor costs.**
 - The USDA/CNPP Thrifty Food Plan inflation calculation uses the monthly CPIs for food at home for specific food categories to update prices for the food categories.
 - For example, The CPI for breakfast cereal is used to update the cost of the TFP category “whole grain cereals” and the CPI for potatoes is used to update the TFP category “all potato products”.

Thank You!

- | FNS remains available to answer questions from the Committee**
- | If requested we can provide additional data to facilitate the Committee's work.**

