



February 11, 2025

Janet M. de Jesus, MS, RD  
HHS/OASH Office of Disease Prevention and Health Promotion (ODPHP)  
1101 Wootton Parkway  
Suite 420  
Rockville, MD 20852

**RE: Docket OASH-2024-0017**

Dear Ms. de Jesus:

The International Dairy Foods Association (IDFA), Washington, D.C., represents the nation's dairy manufacturing and marketing industry, which supports more than 3.2 million jobs that generate \$49 billion in direct wages and \$794 billion in overall economic impact. IDFA's diverse membership ranges from multinational organizations to single-plant companies, from dairy companies and cooperatives to food retailers and suppliers. Together, IDFA members represent most of the milk, cheese, ice cream, yogurt and cultured products, and dairy ingredients produced and marketed in the United States and sold throughout the world. Delicious, safe and nutritious, dairy foods are foundational foods in American's diets and offer unparalleled health and consumer benefits to people of all ages.

IDFA appreciates the opportunity to provide comments to the Department of Agriculture (USDA) and the Department of Health and Human Services (HHS) following the publication of the Dietary Guidelines Advisory Committee's (DGAC) Scientific Report. We appreciate the work of the DGAC in the development of the Scientific Report.

**IDFA Agrees with the DGAC Recommendations for the Inclusion of Dairy as a Key Component in Healthy Dietary Patterns**

The DGAC Scientific Report demonstrates the importance of dairy as part of a healthy eating pattern and recommends that it remain a recommended food group in the 2025-2030 Dietary Guidelines for Americans (DGAs). Note that the food group is presently referred to as the Dairy and Fortified Soy Alternatives and our comments focus only on dairy. Dairy provides 13 essential nutrients, including three that the DGAC identifies as nutrients of public health concern due to under consumption: potassium, vitamin D and calcium. When DGAC modeled diets that did not include dairy products, the resultant diets showed significant shortfalls in a number of essential nutrients.

The overall body of science on dairy products demonstrates that milk, yogurt, cheese and other dairy-based products are nutrient-rich, contributing significant amounts of essential nutrients to the diet. As was the case for past DGACs and DGAs, the preponderance of evidence shows that dairy is a key

component of healthy eating patterns associated with better health outcomes. In food-based dietary guidelines throughout the world, including the United States, dairy is a standalone food group due its overall nutrition package.<sup>i</sup> This consistent inclusion of dairy in global food based dietary guidelines was also identified by the International Dairy Federation (IDF).<sup>ii</sup> We support the DGAC's findings and reiterate the importance of including dairy as part of a healthy dietary pattern.

As noted by the DGAC, the DGAs serve as the basis for federal nutrition programs, including the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and school meals programs. Recommendations of the final 2025-2030 DGAs must ensure that the recommended eating patterns provide sufficient levels of key nutrients that all people need. It is especially important for those that rely on federal feeding programs which include some of our nation's most nutritionally vulnerable individuals that these federal nutrition programs are based on DGA recommendations. Clear recommendations for the foods and food groups to be included in these federal nutrition programs, including dairy foods, will also aid those responsible for implementing the programs.

### **IDFA Supports the Continued Recommendation of the DGAC for Three Servings of Dairy Each Day for Most Americans**

IDFA agrees with the DGAC Scientific Report's recommendation that Americans over the age of 9 should consume three servings of dairy each day as demonstrated in the "Eat Healthy Your Way" eating pattern. The DGAC considered and analyzed a potential reduction in the number of servings recommended for dairy each day. But due to the effects this would have on nutritional intake and the health of Americans, the DGAC opted to retain the recommended three servings of dairy each day.

This decision was based on the nutrients contributed by dairy products to a healthy diet, particularly nutrients related to bone health, which include calcium, vitamin D, protein, phosphorous, magnesium, zinc and vitamin A. The emphasis on these bone-building nutrients provided by dairy is even more important for children, adolescents and older adults.

For bone health and other health benefits, we agree with the DGAC's advice to maintain the recommended three servings per day of dairy for most Americans.

### **IDFA Supports an Emphasis on Lower Lactose and Lactose Free Dairy Products as an Integral Part of the Dairy and Fortified Soy Alternatives Food Group in the DGAs**

IDFA agrees with the DGAC's recommendation to emphasize that lactose free dairy options are an important part of the dairy food category since these options have the same nutrient rich profile as conventional dairy products. IDFA believes the DGAs should make it clear to consumers that lactose free dairy options are not plant based alternatives to dairy products but are in fact dairy products. While lower lactose and lactose free dairy products provide the same suite of essential nutrients as conventional dairy products, they may be more attractive to Americans who avoid lactose. In keeping with the DGAC's recommendation of the "Eat Healthy Your Way" eating pattern to permit flexibility for Americans to choose nutrient-rich options that align with their preferences, cultural traditions and nutritional needs, lower lactose and lactose free dairy products must be emphasized so that consumers understand the important role that these products may play in helping them meet their recommended intake of dairy products.

Unfortunately, some people who may benefit from lower lactose and lactose free dairy products may not be aware of these options or know that they provide the same nutrition as other dairy foods.<sup>iii</sup> 42% of Americans have never consumed lactose free milk, including 34-40% of Hispanic/Latino, Black/African American and Asian/Pacific Islanders.<sup>iv</sup> This indicates that there are many Americans that are missing a key method of accessing dairy nutrition.

IDFA urges USDA and HHS to ensure the DGAs and related educational materials emphasize lower lactose and lactose free dairy as an excellent source of nutrition and an important contributor to dairy consumption while also highlighting the numerous strategies that can be used to consume dairy products and the benefit from the nutrition these products provide. These strategies, as recommended by experts like the National Medical Association (NMA), include consuming lactose free or lactose reduced dairy products or smaller portions of dairy products in a single setting; using lactose digestive aids; or consuming yogurt or probiotic-containing dairy products.<sup>v, vi</sup> Many of these techniques are not widely known, and lactose intolerance is often self-diagnosed, especially among racial and ethnic populations.<sup>vii</sup>

We suggest that emphasizing lower lactose and lactose free dairy options as part of the dairy food group could be accomplished by including a text box in the DGAs that highlights the important nutrition that lower lactose and lactose free dairy provide, and that specifically identifies illustrative examples of products with lower levels of lactose, such as lactose free milk, and lower lactose yogurts and cheeses. Similar approaches could be used to add this information to educational materials, including MyPlate and online consumer education.

Visit most grocery stores today, and you will see several lactose free and low lactose dairy options in the dairy case. Dairy companies have made a purposeful choice to expand lactose free dairy at food retail and foodservice establishments to respond to the needs expressed by the communities they serve. The proliferation of lactose free milk and dairy options in the U.S. marketplace provides a unique opportunity to improve nutrition education and awareness of these new choices to ultimately improve the health of all Americans. The 2020-2025 DGAs state that lactose free dairy products are part of the dairy group, and these dairy products are important options within the federal nutrition programs, including the National School Lunch Program and WIC. To ensure that Americans concerned about their ability to consume lactose and dairy are still able to benefit from the nutrition provided by dairy foods, we ask that the 2025-2030 DGAs emphasize the availability of lower lactose and lactose free dairy products and other strategies to assist consumers to eat more nutrient rich dairy products.

### **IDFA Supports the DGAC's Recommendation to Reconsider the Name of the Dairy and Fortified Soy Alternatives Food Group**

The DGAC Scientific Report recommends that USDA and HHS reconsider the name of the "Dairy and Fortified Soy Alternatives" food group and that it be updated to more accurately reflect the specific types of dairy and soy products included in the food group. IDFA supports this recommendation and believes it is important that all Americans understand the full range of products that are included in each food group.

IDFA recommends that USDA and HHS conduct robust research or public polling to gauge consumer understanding and/or confusion about what foods are included in the Dairy and Fortified Soy

Alternatives food group. In conducting this research, it will be important to include a variety of consumers, with diverse ages, genders, racial and ethnic backgrounds, socioeconomic status and health as well as English language literacy. Other stakeholders, such as nutrition educators and agencies that implement federal nutrition programs, should also be consulted to ensure that the language used is clear to all and facilitates implementation of those programs that are mandated to align with the DGAs.

IDFA also suggests that USDA and HHS seek out and consider other appropriate research or survey results that could inform renaming the Dairy and Fortified Soy Alternatives food group, including that which may be completed after the deadline for this comment period. Moreover, IDFA recommends that this name change should be considered for the 2030-2035 DGAs to allow time for this research and related analysis to take place.

### **IDFA Recommends that the USDA and HHS Include Dairy's Benefits for Reducing the Risk of Type 2 Diabetes in DGAs**

Due to time constraints, the DGAC was not able to consider all of the scientific questions related to the risk of type 2 diabetes and diet. IDFA identified science not previously considered on the relationship to dairy intake and reduced risk of Type 2 diabetes in our comments to the DGAC; the DGAC did not review it. IDFA requests that the USDA and HHS review this additional science and update the final DGAs to align with it.

Recently, the Food and Drug Administration (FDA) approved a new qualified health claim linking the consumption of yogurt with a reduction in risk of type 2 diabetes.<sup>viii</sup> This new claim reflects a body of science that has shown that consuming three (3) servings of yogurt each week helps reduce the risk of developing type 2 diabetes. IDFA encourages the USDA and HHS to review the list of scientific references provided in the petition submitted to the agency for this qualified health claim and ensure that these studies are included in the DGAC's systematic review.<sup>ix</sup> This qualified health claim can be used on yogurt products that contain less than 13 grams of fat and 4 grams of saturated fat, which will likely include yogurt at all fat levels, including full-fat. The eligibility of yogurt at all fat levels to bear this qualified health claim reinforces the body of research on milkfat, namely that full-fat dairy products can have neutral or positive health benefits.

IDFA has provided a list of references in an Appendix to these comments under the heading "Research Regarding Consumption of Dairy and Reduction of Risk of Type 2 Diabetes." We ask USDA and HHS to consider additional review of this science, as well as the review of the science submitted in the petition for the yogurt qualified health claim discussed above, to inform and adjust the final recommendations in the 2025-2030 DGAs regarding dairy's benefit of reducing the risk of Type 2 diabetes.

### **IDFA Supports Additional Review of the Science Related to Milkfat to Inform the Final 2025-2030 DGAs**

As nutrition science has progressed, the differences between seemingly similar substances have become more clear. For many years, Americans have been urged to reduce their intake of saturated fats to help promote heart health and reduce the risk of negative long-term health consequences including cardiovascular disease (CVD).

However, a significant and growing body of science has demonstrated that not all sources of saturated fat result in the same health effects. As demonstrated in a recent review by the Academy of Nutrition

and Dietetics (AND), the food sources of saturated fat need to be taken into consideration. The nutrition practice guideline by AND documents a body of evidence indicating that certain dairy products, including cheese, are not associated with an increased risk of CVD.<sup>x</sup>

In fact, the DGAC's Dietary Patterns and Specific Dietary Pattern Components Across Life Stages Subcommittee's review of the science related to the consumption of higher-fat milk compared to lower-fat milk in younger children resulted in a draft conclusion statement presented at the January 19, 2024, DGAC public meeting which stated: "Limited evidence suggests that consumption of higher-fat dairy milk compared to lower-fat dairy milk in younger children is associated with favorable growth and body composition, and lower risk of obesity in children." This draft conclusion and the body of science upon which it is based demonstrate advancement in research and understanding of the health effects of consumption of full-fat milk and full-fat dairy more generally.

However, the DGAC's review of scientific evidence was limited to studies that had a comparator source of fat and excluded from review any research on diets with differing intakes of full fat dairy products. This resulted in the exclusion for review under the protocol of the majority of studies related to milkfat that IDFA identified and recommended specifically for DGAC review. Other protocols, including the protocol for sugar sweetened beverage consumption and growth, body composition and risk of obesity outcomes, included studies that examined different intake amounts of sugar sweetened beverages. A similar comparator in the saturated fat protocol would have permitted the inclusion of a wider body of science.

IDFA has provided a list of the references in the Appendix to these comments under the headings "Research Regarding Consumption of Dairy at All Fat Levels and Cardiovascular Disease" with the following subheadings: "Dairy Matrix/All Dairy," "Full-Fat Milk," "Fermented Dairy Products," and "Cheese." We ask that USDA and HHS consider additional review of this science to inform and adjust the recommendations in the final 2025-2030 DGAs to be more inclusive of dairy of all fat levels.

### **IDFA Recommends the Final 2025-2030 DGAs Continue to Recognize that Small Amounts of Added Sugars in Nutrient Dense Foods Can Promote Consumption**

The DGAC Scientific Report identifies dairy as an under consumed food category group and a number of nutrient shortfalls that would occur if dairy was removed from the diet. As stated previously, dairy products are sources of three of the four nutrients of public health concern as identified in the DGAC Scientific Report including potassium, calcium and vitamin D.

IDFA believes the DGAs should assist consumers identify dairy foods that they will enjoy and incorporate into their eating patterns. The 2020-2025 DGAs stated that "A small amount of added sugars, saturated fat, or sodium can be added to nutrient-dense foods and beverages to help meet food group recommendations..." This statement reinforces the idea that the best use of added sugars is to increase palatability and consumption of nutrient rich, under consumed foods, like certain dairy products. Most Americans (88%) do not meet the dairy recommendations in the DGAs and discouraging consumption of sweetened dairy products including milk and yogurt creates an additional barrier to meeting these recommendations.<sup>xi</sup> Flavored milk and sweetened yogurt represent 4% of overall added sugar intake<sup>xii</sup> yet contribute 13 essential nutrients to healthy eating patterns. It is other food products that provide the majority of added sugars to American diets without providing any nutritional benefits. As stated, dairy products are under consumed by nearly all Americans but and provide a wide range of nutrients;

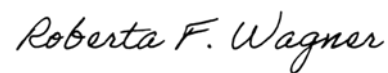
recommending the consumption of dairy products with some added sugars would likely serve to increase the consumption of these nutrient dense food products, benefiting consumer health.

IDFA urges USDA and HHS to consider including similar language to that found in the 2020-2025 DGAs on added sugars in the 2025-2030 final DGAs to encourage Americans to seek out nutrient rich foods, including dairy products, that taste good and to begin to address the widespread under consumption of nutrient dense dairy products.

## Conclusion

IDFA appreciates the work of the DGAC in the development of the DGAC Scientific Report. As USDA and HHS draft the final 2025-2030 DGAs, we encourage the inclusion of the Report's recommendations of three servings of dairy per day for most Americans, the continuation of dairy as its own food group and urge increased emphasis on the role of lower lactose and lactose free dairy options in diets. We also urge USDA and HHS to consider encouraging in the final 2025-2030 DGAs the consumption of a variety of dairy products, including those that are full fat and that contain moderate levels of added sugars.

Sincerely,



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Senior Vice President, Regulatory and Scientific Affairs



Michelle Matto, MPH, RDN  
Associate Vice President, Regulatory Affairs and Nutrition

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<sup>i</sup> Comerford KB, Miller GD, Boileau AC, Masiello Schuette SN, Giddens JC, Brown KA. Global Review of Dairy Recommendations in Food-Based Dietary Guidelines. *Front Nutr.* 2021 May 25;8:671999. doi: 10.3389/fnut.2021.671999. PMID: 34113643; PMCID: PMC8186461.

<sup>ii</sup> International Dairy Federation. (2024). Developing Evidence-Based, Food-Based Dietary Guidelines: Critical Contributions of Dairy (Factsheet of the IDF N° 40/2024). <https://doi.org/10.56169/OEBL2893>

<sup>iii</sup> International Food Information Council (IFIC). Understanding Fluid Milk & Dairy Food Consumption Patterns to Enhance Diet Quality & Nutrition Equity. May 2024.

<sup>iv</sup> International Food Information Council (IFIC). Understanding Fluid Milk & Dairy Food Consumption Patterns to Enhance Diet Quality & Nutrition Equity. May 2024.

<sup>v</sup> Shaukat A, Levitt MD, Taylor BC, et al. Systematic review: effective management strategies for lactose intolerance. *Ann Intern Med.* 2010;152(12):797-803. doi:10.7326/0003-4819-152-12-201006150-00241

<sup>vi</sup> Comerford K, Lawson Y, Young M, et al. The role of dairy food intake for improving health among black Americans across the life continuum: A summary of the evidence. *J Natl Med Assoc.* 2024;116(2 Pt 2):292-315. doi:10.1016/j.jnma.2024.01.020

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<sup>vii</sup> Hodges JK, Cao S, Cladis DP, Weaver CM. Lactose Intolerance and Bone Health: The Challenge of Ensuring Adequate Calcium Intake. *Nutrients*. 2019;11(4):718. Published 2019 Mar 28. doi:10.3390/nu11040718

<sup>viii</sup> <https://www.fda.gov/media/176608/download?attachment>

<sup>ix</sup> <https://www.regulations.gov/document/FDA-2019-P-1594-0001>

<sup>x</sup> Johnson SA, Kirkpatrick CF, Miller NH, Carson JAS, Handu D, Moloney L. Saturated Fat Intake and the Prevention and Management of Cardiovascular Disease in Adults: An Academy of Nutrition and Dietetics Evidence-Based Nutrition Practice Guideline. *J Acad Nutr Diet*. 2023;123(12):1808-1830. doi:10.1016/j.jand.2023.07.017

<sup>xi</sup> 2025 Dietary Guidelines Advisory Committee. 2024. Scientific Report of the 2025 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Health and Human Services and Secretary of Agriculture. U.S. Department of Health and Human Services. <https://doi.org/10.52570/DGAC2025>

<sup>xii</sup> U.S. Department of Agriculture and U.S. Department of Health and Human Services. *Dietary Guidelines for Americans, 2020-2025*. 9th Edition. December 2020. Available at [DietaryGuidelines.gov](https://www.dietaryguidelines.gov).

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## **Appendix:**

### **Research Regarding Consumption of Dairy and Reduction of Risk of Type 2 Diabetes**

- Drehmer M, Pereira MA, Schmidt MI, Alvim S, Lotufo PA, Luft VC, Duncan BB. Total and full-fat, but not low-fat, dairy product intakes are inversely associated with metabolic syndrome in adults. *J Nutr.* 2016;146:81–89.
- Kummer K, Jensen PN, Kratz M, Lemaitre RN, Howard BV, Cole SA, Fretts AM. Full-Fat Dairy Food Intake is Associated with a Lower Risk of Incident Diabetes Among American Indians with Low Total Dairy Food Intake. *J Nutr.* 2019;149(7):1238-1244. DOI: 10.1093/jn/nxz058.
- Liu S, Choi HK, Ford E, Song Y, Klevak A, Buring JE, Manson JE. A prospective study of dairy intake and the risk of type 2 diabetes in women. *Diabetes Care.* 2006;29:1579–1584.
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## **Research Regarding Consumption of Dairy at All Fat Levels and Cardiovascular Disease**

### **Dairy Matrix/All Dairy:**

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