



The Honorable Chairman Glenn Thompson
House Committee on Agriculture
1301 Longworth House Office Building
Washington, DC 20515

June 1, 2023

Dear Chairman Thompson,

We at the Nutrition Coalition would like to express our strong support for the "Whole Milk for Healthy Kids Act" to allow schools to offer whole milk through the National School Lunch Program.

Milk stands as a primary source of vital nutrients in the diets of young Americans, delivering numerous health advantages such as improved bone health, decreased blood pressure, and mitigated risks of cardiovascular disease and Type 2 diabetes.¹ Unfortunately, milk consumption in schools has declined significantly since the passage of the Healthy, Hunger-Free Kids Act in 2010, and today, children over two years old are not meeting the recommended daily servings of dairy, per the U.S. Dietary Guidelines for Americans.²

Whole milk was removed from schools in 2010 due to longtime fears that saturated fats cause heart disease. However, those fears are now outdated, as they are not supported by the current science. An authoritative 2020 "State of the Art Review" in the prestigious *Journal of the American College of Cardiology*, whose authors include five former members of previous Dietary Guidelines Advisory Committees, found that there is "no robust evidence that current population-wide arbitrary upper limits on saturated fat consumption in the United States will prevent CVD [cardiovascular disease] or reduce mortality."³ More than 20 other review papers by independent teams of scientists around the world have concluded the same.⁴

The most recent review on saturated-fat consumption in adults, for the 2020 Dietary Guidelines for Americans, found that the evidence linking these fats to heart disease was "strong," yet an investigation by outside scientists revealed that 88% of the studies reviewed by the committee did not in fact support

¹ Górska-Warsewicz H, Rejman K, Laskowski W, Czeczotko M. Milk and Dairy Products and Their Nutritional Contribution to the Average Polish Diet. *Nutrients*. 2019 Aug 1;11(8):1771. doi: 10.3390/nu11081771.

² Hess JM, Cifelli CJ, Fulgoni Iii VL. Energy and Nutrient Intake of Americans according to Meeting Current Dairy Recommendations. *Nutrients*. 2020 Sep 30;12(10):3006. doi: 10.3390/nu12103006. PMID: 33007917; PMCID: PMC7599715.

³ 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.

⁴ Teicholz, N. A short history of saturated fat: the making and unmaking of a scientific consensus. *Current Opinion in Endocrinology & Diabetes and Obesity* 30(1):p 65-71, February 2023.

this conclusion.⁵ Further, sixteen studies, or 94% of the total reviewed, observed that dairy foods including butter either had no association or were negatively associated with coronary heart disease outcomes (i.e., higher dairy intake was associated with lower risk).

More importantly, we've never known if advice to restrict saturated fat can safely be applied to children, whose nutritional needs are so vastly distinct from adults. Children are not simply small grown-ups. Their nutritional needs are very different, including the fact that they need more protein to support their growing bodies and more fat for their developing brains.

In the 1950s and 60s, Americans ate some 12-18% of calories as saturated fat, significantly more than the 10% recommended today.⁶ In those decades, children were largely healthy, with low rates of obesity, diabetes or non-alcoholic fatty liver disease. Consumption of animal fat has dropped by 27% since 1970,⁷ yet rates of all these diseases are not only now epidemic but continue to rise.

The scientific data on the safety of reducing saturated-fat consumption in children has been reviewed only once in the 60-plus years that the Dietary Guidelines has recommended restricting saturated fats for all people over the age of two. That review, in 2020, found that fat restrictions could lead to lower LDL-cholesterol, which seemed to imply better cardiovascular health, yet this conclusion was based on only two trials with very equivocal results.⁸

- A Finnish trial (“STRIP”) was conducted on children under the age of three who therefore were not school age. These children relied on Vitamin supplements to avoid nutritional deficiencies. Also, they saw their HDL-cholesterol drop, which is a sign of increasing heart-disease risk (Note: HDL-C nearly always drops when saturated fat is reduced in people of any age.)
- An NIH-funded study from 1987 called “DISC,” which only included children with abnormally high LDL-cholesterol, reflecting a likely genetic disorder. This unusual population meant that the trial could not reasonably be generalized to the larger population, as the Dietary Guidelines Advisory Committee noted in its review (p.33). Further, the children on the DISC low-fat diet ended up

⁵ Astrup, A.; Teicholz, N.; Magkos, F.; Bier, D.M.; Brenna, J.T.; King, J.C.; Mente, A.; Ordovas, J.M.; Volek, J.S.; Yusuf, S.; Krauss, R.M. Dietary Saturated Fats and Health: Are the U.S. Guidelines Evidence-Based? *Nutrients* **2021**, *13*, 3305. <https://doi.org/10.3390/nu13103305>

⁶ Ibid.

⁷ Jeanine Bentley. *U.S. Trends in Food Availability and a Dietary Assessment of Loss- Adjusted Food Availability, 1970-2014*, EIB-166, U.S. Department of Agriculture, Economic Research Service, January 2017.

⁸ 2020 Dietary Guidelines Advisory Committee; Nutrition Evidence Systematic Review Team. *Types of Dietary Fat and Cardiovascular Disease: A Systematic Review*; 2020 Dietary Guidelines Advisory Committee Project, Center for Nutrition Policy and Promotion, Food and Nutrition Service, U.S. Department of Agriculture: Alexandria, VA, USA, 2020. Available online: <https://nesr.usda.gov/2020-dietary-guidelines-advisory-committee-systematic-reviews/dietary-fats-and-seafood-subcommittee/dietary-fat-cardiovascular-disease>(accessed on 30 May 2023).

consuming less than two thirds of the RDAs for calcium, zinc, and vitamin E. They also got less magnesium, phosphorus, vitamin B12, thiamin, niacin, and riboflavin than did children in the control group.⁹

The above data are mixed and far from adequate for making population-wide recommendations for all children.

Moreover, the 2020 expert report found that there was “insufficient evidence” to show that restricting saturated fats in childhood could prevent heart-disease or mortality later in life. This finding is rooted in the fact that clinical trials testing low-fat diets have never followed children into adulthood to see how this diet might impact overall development and reproductive health. In fact, lowering cholesterol in childhood has never been shown to protect against heart disease later in life.¹⁰

The problem of nutritional deficiencies in children on a low-fat diet has been confirmed in numerous studies, including the notable Bogalusa Heart Study, on children aged eight to ten, whose diet of less than 30 percent of calories as fat was found to be associated with a significantly higher chance of failing to meet the RDAs for vitamins B1, B12, and E, as well as thiamin, riboflavin, and niacin, compared to the group eating more than 40 percent fat.¹¹ (Forty percent of calories as fat is the amount Americans ate in 1965¹² and is also the amount in the original Mediterranean diet that has shown to have benefits for health.¹³)

It’s important to note that milk is a naturally rich source of calcium, Vitamin B2, Vitamin B12, potassium, phosphorus, and is supplemented with both Vitamin A and Vitamin D. Quite a few of these nutrients require fat for complete absorption. Non-fat milk does not contain the fat necessary to fully absorb these crucial, essential nutrients.

Dr. Regan Lucas Bailey, a member of the 2020 DGAC, told the Wall Street Journal, “Going into reproductive age at nutrition risk can cause intergenerational effects....This is the stuff that keeps me up at night.”¹⁴

⁹ Teicholz, N. *The Big Fat Surprise*. Simon & Schuster, New York, NY, 2014, p. 153.

¹⁰ “The Pathogenesis of Atherosclerosis— An Update,” *New England Journal of Medicine* 295 (1986): 488–500; Canadian Paediatric Society and Health Canada, Joint Working Group, *Nutrition Recommendations Update: Dietary Fat and Children* (Ottawa, Ontario: Health Canada, 1993).

¹¹ Nicklas, Theresa A., Larry S. Webber, MaryLynn Koschak, and Gerald S. Berenson. “Nutrient Adequacy of Low Fat Intakes for Children: The Bogalusa Heart Study.” *Pediatrics* 89, no. 2 (February 1, 1992): 221–228.

¹² Cohen et. al. *Nutrition*, 2015:727-732.

¹³ Estruch et. al. *New England Journal of Medicine*, 2013:1279-90,528, Supplementary Appendix.

¹⁴ <https://www.wsj.com/articles/teen-girls-poor-diets-are-worrying-doctors-11620057629>



According to the 2020 Dietary Guidelines Advisory Committee report, adolescent girls currently aren't getting enough of a host of important vitamins and minerals, including vitamin D, calcium, folate and iron,¹⁵ and about 80% of adolescent girls consume less calcium a day than recommended.

Moreover, studies specific to dairy products do not show a link between higher-fat milk and disease of any kind::

1. Children who drank whole milk were found to grow up to be thinner, according to a meta-analysis of observational data.¹⁶
2. Americans aged 2 to 20 years with obesity were less likely to drink whole milk than fat-free or 1% milk, compared with healthy weight children, according to government data.¹⁷
3. A systematic review of 29 studies found that consumption of whole-fat dairy products was not associated with increased measures of weight gain or adiposity.¹⁸
4. Among children aged 9 months to 8 years, each 1% increase in cow's milk fat consumed was associated with a 0.05 lower BMI score after adjustment for covariates including volume of milk consumed. Compared to children who consumed reduced fat (0.1–2%) milk, there was evidence that children who consumed whole milk had 16% lower odds of overweight and 18% lower odds of obesity.”¹⁹

In sum, reductions in saturated fats and regular, whole milk have never been demonstrated to be safe for children. By contrast, these reductions clearly place children at risk for nutritional deficiencies.

Whole milk is a natural food that humans have been consuming for many thousands of years, long before the epidemics of obesity and heart disease. In our view, there has been an unconscionable lack of evidence on the safety of advising millions of normal American children of all ages to restrict fat and regular, whole milk from their diets.

By allowing whole milk as a choice in schools, we can ensure students receive essential nutrition and promote nutritional equity, particularly for those from food-insecure homes. Additionally, whole milk's preference among students leads to increased consumption and a significant decrease in wasted milk.²⁰

We respectfully urge you to continue championing the "Whole Milk for Healthy Kids Act" and to encourage your fellow members of Congress to support this critical legislation.

¹⁵ Dietary Guidelines Advisory Committee. 2020. Scientific Report of the 2020 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Agriculture and the Secretary of Health and Human Services. Washington, DC, USA: U.S. Department of Agriculture, Agricultural Research Service.

¹⁶ <https://pubmed.ncbi.nlm.nih.gov/31851302/>

¹⁷ <https://doi.org/10.1111/ijpo.12612>

¹⁸ <https://doi.org/10.1093/advances/nmaa011>

¹⁹ <https://www.nature.com/articles/s41366-021-00948-6>

²⁰ <https://agmoos.com/2020/08/10/whole-milk-gets-school-results-too-important-to-ignore/>



Sincerely,

John Bates

John Bates
Executive Director