

**Comment to the Dietary Guidelines for Americans 2015 Committee (DGAC),  
submitted electronically July 2014**

The Council for Responsible Nutrition (CRN) would like recommend two recently published scientific articles for the DGAC to review. Angelo et al., conducted a review of the scientific evidence on the effects of multivitamin/mineral (MVM) supplementation on chronic disease risk and highlighted the beneficial effects found in the largest and longest clinical trial conducted to date, the Physicians' Health Study II (PHS II). MVM supplementation resulted in a modest and significant reduction in total and epithelial cancer incidence in male physicians and in the incidence of nuclear cataract (1). The authors noted that the MVM is the most common type of supplements that could help fill micronutrient gaps existing in the U.S. population. Further, Moore et al., examined NHANES data from 2007-2010 and discovered that though there were race/ethnicity, gender and age differences in vitamin D intake by children aged 1-18 years in the U.S., all children in each age and ethnic group fell short of the Estimated Average Requirement (EAR) for vitamin D(2). The authors urged that "[p]ublic health efforts should encourage consumption of foods high in vitamin D, expand the number of foods fortified, and target health messages to parents to increase use of vitamin D supplements by children."

References:

1. Angelo G, Drake VJ, Frei B. Efficacy of multivitamin/mineral supplementation to reduce chronic disease risk: a critical review of the evidence from observational studies and randomized controlled trials. *Crit Rev Food Sci Nutr*. 2014 Jun 18:0 (published online). doi:10.1080/10408398.2014.912199.
2. Moore CE, Radcliffe JD, Liu Y. Vitamin D intakes of children differ by race/ethnicity, gender, age and income in the United States, 2007 to 2010. *Nutr Res*. 2014 June 13 (published online). doi:10.1016/j.nutres.2014.06.002.