

PhysiciansCommittee

for Responsible Medicine

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To: President Joseph Biden

From: The Physicians Committee for Responsible Medicine

Date: July 15, 2022

Re: *White House Conference on Hunger, Nutrition, and Health Listening Session and Policy Goals*

The Physicians Committee for Responsible Medicine (PCRM) is a national nonprofit organization headquartered in Washington, D.C. Our staff of physicians, dietitians, and scientists work with policymakers, industry, the medical community, and the public to create a better, healthier future for people, animals, and the planet through a new emphasis on plant-based nutrition. We appreciate the opportunity to submit our policy goals and findings from our recent listening session for the upcoming White House Conference on Hunger, Nutrition, and Health. This listening session highlighted the need to focus this conference on the benefits of plant-based nutrition.

Rationale for Centering Plant-Based Nutrition

The upcoming White House Conference on Hunger, Nutrition, and Health provides an important opportunity for the Biden-Harris Administration to champion public policies that show how improved nutrition can address the many growing health disparities currently facing Americans. Specifically, the White House should use this opportunity to center the conference's discussion on the benefits of plant-based nutrition.

While obesity rates and diet-related diseases in the United States are on the rise,¹ especially among people of color,² nutrition and food policy in the United States still does not warn against the contribution of meat and dairy products to obesity risk and its accompanying health problems. Nor does our current nutrition policy highlight the benefits of a plant-based diet with regard to chronic disease prevention or encourage our nation's health care professionals to learn about these benefits.

The risks of meat consumption are well documented. One recent study shows that those who consume more meat and protein from animal-based sources in place of plant-based sources increased their risk of death from chronic disease by 23%.³ In 2015, after 22 experts from 10 countries assessed more than 800 epidemiological studies, the World Health Organization's International Agency for Research on Cancer classified consumption of processed meat as "'carcinogenic to humans' (Group 1) on the basis of sufficient evidence for colorectal cancer."⁴ Research shows that eating 50 grams of processed meat daily also increases the risk of breast cancer, prostate cancer, pancreatic cancer, and overall cancer mortality.⁵

Consumption of dairy also poses significant health risks. Many Americans, including some vegetarians, still consume substantial amounts of dairy products. Federal policies continue to promote and subsidize these products, despite scientific evidence that questions their health benefits. Milk and other dairy products increase the risk of breast,⁶ ovarian,⁷ and prostate cancers⁸; they offer little if any protection for bone health.⁹ Dairy products also cause bloating, diarrhea, and gas in the tens of millions of Americans who are unable to digest lactose. The National Institutes of Health estimates approximately 95% of Asian Americans, 60% to 80% of African Americans, 80% to 100% of American Indians, and 50% to 80% of Hispanics cannot digest lactose.¹⁰ Though once considered a disease, lactose intolerance is actually the norm for most humans; after infancy the

majority of people not of European descent—about 70% of the world’s population—become physically uncomfortable after consuming dairy products.

Given the evidence linking meat and dairy consumption and diet-related diseases, a glaring deficiency exists in nutrition education for physicians and other health care providers. Medical school curriculum pays inadequate attention to the direct correlation between dietary behavior and America’s top health problems. According to surveys of medical schools in 2005, 2010, and 2015, the hours of nutrition-specific curriculum required by medical schools have been declining.^{11,12,13}

Additionally, as long as the Dietary Guidelines for Americans continue to promote meat and dairy instead of foods that will help Americans fight diet-related diseases, health disparities will continue to grow. A low-fat plant-based diet, rich in fruits, vegetables, whole grains, and legumes, is a great way to achieve good health. These foods are full of fiber, rich in vitamins and minerals, free of cholesterol, and low in calories and saturated fat. Eating a variety of these foods provides the protein, calcium, and other essential nutrients Americans need. Plant-based diets have been proven to prevent and reverse heart disease,¹⁴ improve cholesterol,¹⁵ and lower blood pressure.¹⁶ Plant-based diets can also prevent, manage, and reverse type 2 diabetes.¹⁷ Given these benefits, the Dietary Guidelines should promote plant-based diets instead of meat and dairy products.

With the overwhelming evidence of the role of meat and dairy in chronic disease, it is imperative the Biden-Harris Administration advance policies not only to reduce and eliminate the consumption of these foods but also to encourage the further adoption of plant-based diets.

Physicians Committee for Responsible Medicine’s Policy Goals and Listening Session

On June 30, 2022, the Physicians Committee held a listening session over Zoom for our members across the country to provide commentary and policy recommendations for the 2022 White House Conference on Hunger, Nutrition, and Health. In attendance were more than 100 physicians, dietitians, nurses, teachers, university professors, public health professionals, firefighters, and others concerned with our nation’s health. Our members were given the opportunity to share oral commentary during the Zoom meeting or provide written feedback via email and a shared document.

The essential policy goals discussed during our listening session included:

- Expanding Access to Plant-Based Meals in Schools and Institutions**
- Removing Barriers to Plant-Based Milk at Schools**
- Using the Dietary Guidelines for Americans to Promote Plant-Based Diets**
- Ensuring Better Nutrition Education for Physicians**

Following is a sampling of narratives and suggestions related to these essential policy goals collected from Physicians Committee members.

Expanding Access to Plant-Based Meals in Schools and Institutions and Removing Barriers to Plant-Based Milk at Schools

The Physicians Committee works to ensure access to nutritious plant-based meals in schools, hospitals, and institutions nationwide. This work includes supporting in Congress H.R. 4108, the Healthy Future Students and Earth Pilot Program Act, as well as supporting bills in state legislatures in New York, California, and others that expand access to plant-based meals in public schools. The Physicians Committee also advocated for legislation signed into law in 2020 in New York to ensure hospitals are serving plant-based meal options and supports similar legislation across the country. Finally, we encourage current efforts in Congress to remove barriers that prevent students from accessing nondairy milks at schools that participate in the National School Lunch Program.

These policy goals connect with the White House conference’s pillar to “empower all consumers to make and have access to healthy choices.” Our members noted their support for these policy goals, as well as other efforts to expand access to plant-based meals. Some supporting testimony we received included:

- *“As a sustainable food systems specialist, part of what I do for a living is synthesize and make sense of evidence on the environmental and health impacts of agriculture and food systems for policymakers and other professionals—and lay out options for addressing existing challenges. As both a policy professional and a parent, I would like to see healthy whole food, plant-based meals served in schools, hospitals, and other institutions. And I would like to see them marketed to all patrons and not only served in the spirit of catering to special dietary restrictions. The latter would be missing the point that what we eat is both a personal choice and a matter of public interest with important public health and safety ramifications.”*
- *“The most beneficial option I see is a federal program to mandate comprehensive K-12 nutrition education—every year for students, teachers, and food services employees—that incorporates an evidence-based whole foods, plant-based component. The ideal program would incorporate food services support as well (food sourcing, food waste, food preparation, etc.), so that the nutrition education that is taught is reflected in the food that is prepared and served to the students in the schools.”*
- *“I stand in enthusiastic support of PCRM’s policies to expand access to plant-based meals for all students in schools. ... I’m 52 years old and grew up in the Midwest at a time when the nutrition information we were receiving had just begun being driven by industry profits rather than genuine health research. I spent decades struggling to overcome first a meat-and-potatoes diet of my childhood, and later the highly processed, highly sweetened and salted foods that permeated our country. I watched my father die at 60 from heart disease and diabetes, and my mother two years ago at 74 due to a massive stroke. Both had been obese my entire life, and their diet contributed to their early deaths. Until last year I was morbidly obese and headed [in] the same direction. The only thing that saved me was being a vegetarian for the last 26 years. Now as I transition to a fully plant-based diet, I realize that my journey has been to slough off what was fed to me—literally and educationally—as a child to get back to what nature intended all along. I implore you to save others and their families from this same heartache. Our nation and world face some significant challenges. Our growing healthcare costs and vulnerability to disease and early mortality do not need to be among them. Healthier Americans will lead to a healthier nation and world. Thank you.”*
- *“I stand with the recommendation to expand access for plant-based meals in hospitals. I’ve had several surgeries, and if there’s no food or education available in the hospitals, how are you supposed to heal?”*
- *“Children should not need a doctor’s note to decline dairy in schools, but that has been one that I have had to write.”*
- *“Nursing homes need to have better access to fresh fruits and vegetables. It’s nearly impossible for my mom to access fresh food, and this is a place of recovery, and it’s difficult to do that without proper nutrition.”*

Using the Dietary Guidelines for Americans to Promote Plant-Based Diets

The Physicians Committee advocates for the 2025-2030 Dietary Guidelines for Americans to promote plant-based diets instead of meat and dairy. Particularly, the next guidelines should remove the current emphasis on meat and dairy products by eliminating the “protein group” and dairy icon from the MyPlate graphic. The protein nutrient category perpetuates the myth that protein is absent in vegetables, fruits, and grains, and that people must take special care to include protein in their diets. It also fails to account for the health risks associated with the consumption of meat—an implicit component of the Dietary Guidelines for Americans’ current protein category.

The average American consumes roughly double the protein the body needs, and the main sources of protein consumed tend to be animal products, which are often high in fat, saturated fat, and cholesterol.¹⁸

Changing the Dietary Guidelines for Americans connects with the White House conference's pillars to "empower all consumers to make and have access to healthy choices" and to "enhance nutrition and food security research." Our members noted their support for this policy goal:

- *"If guidelines are changed to reflect the science, rather than impacted by industry influences, our institutions could better promote healthy choices at all levels."*
- *"Revamp MyPlate, doing away with the misleading and biased protein category."*
- *"I agree with revisiting the protein category on the USDA plate, which really is a code for meat. It's in everyone's mind. All of my clinical colleagues, everyone I ask, nobody knows that in 2010 the USDA removed meat from the plate."*
- *"I currently interact with a refugee/immigrant population as they are coming into the U.S. and have been struck by the stark differences in fewer chronic lifestyle-related disease states versus our community patients. Rarely do they have our common symptoms of hypertension or obesity. I counsel about the impact of adopting a Western-style diet, about sedentary lifestyles, and about smoking, among other things, and encourage a plant-predominant lifestyle. However, I see the work of other scientists outlining the progression of health conditions in immigrants who within just a couple of generations suffer the same health conditions as those who have been in the U.S. for many generations. We have much opportunity to heal as a nation."*

Ensuring Better Nutrition Education for Physicians

The Physicians Committee advocates to expand nutrition education for physicians, nurses, dietitians, and public health professionals. Because medical school curriculum pays inadequate attention to the correlations between dietary behavior and America's health problems, public policy at the state and federal level should encourage more nutrition education, especially plant-based nutrition, by physicians and other health care providers. The Physicians Committee supported H.Res.1118, a resolution passed in the U.S. House earlier this year, which called for meaningful physician and health professional education on nutrition and diet. We also advocate for states to require a certain amount of nutrition-related Continuing Medical Education (CME) for physicians.

This policy goal connects with the White House conference's pillar to "integrate nutrition and health." Our members noted support for additional nutrition education for clinicians and shared firsthand experiences about working in hospitals and/or being treated by physicians with inadequate nutrition knowledge:

- *"I support PCRM's mission to ensure nutritional education for physicians [is] improved on a greater scale. I was diagnosed with diabetes, and when I was diagnosed, the doctors I saw were not educated in this area, and I had to find PCRM and Barnard Medical Center to help heal myself, and it would have been a lot easier and less painful both physically and emotionally if I had had that information, and I think people need that available from doctors and dietitians; they just don't have the education about plant-based diets. I have reversed my diabetes, I'm able to see I was legally blind, I lost weight, [and] I'm still on this journey. I was able to reverse all those things just by eating plants, and I think people deserve to have that information out in the world."*
- *"I agree and support the policy priorities suggested by PCRM. As a physician, I have seen how disconnected many of our patients and healthcare providers are from understanding the relationships between health and food."*

- “Education at all levels is needed, for general society but also physicians who need to understand the mechanisms at work with food, gut microbiome, health/disease states, and the behavioral aspect of changing habits.”
- “The easiest thing you can do is educate physicians about plant-based nutrition and help them help their patients. People trust their doctors.”
- “My mom had a massive stroke at 57, and I wish her physicians had had more training to ensure better treatment after her stroke, and how she could have prevented this with a more plant-focused diet.”
- “More education for nutritionists and diabetes educators. The evidence is overwhelming about the benefits of a plant-based diet. But the roadblocks are with education. A lot of nutritionists and diabetes educators tell me they attend seminars and lectures sponsored by the meat and dairy industry, and that needs to stop. We need the government to remove the check-off program; we don’t need the advertisements from the meat and dairy industries geared toward our children.”
- “I agree wholeheartedly that physicians need to have nutrition education in school, and plant-based nutrition education specifically. I also echo the comments about education for dietitians who are really educating many of my patients on a meat-heavy and fat-heavy diet for diabetes control, and it just completely reverses and confuses patients totally.”

Further Feedback From Our Members

Our members also noted the additional benefits of a plant-based diet beyond health and nutrition, including decreasing the adverse effects animal agriculture has on the environment and animal welfare. Others wanted to be sure that social safety net programs at the federal, state, and local levels allow for participants to have access to plant-based food options.

Conclusion

The listening session held by the Physicians Committee showed the overwhelming support of our members for policy goals that would highlight the benefits of plant-based nutrition to improve our nation’s widening health disparities. We encourage the White House Conference on Hunger, Nutrition, and Health to center its discussions on the benefits of plant-based nutrition and look forward to being a part of this important discussion.

Endnotes:

¹ National Institute of Diabetes and Digestive Kidney Diseases. Overweight and Obesity Statistics. Accessed November 1, 2021. <https://www.niddk.nih.gov/health-information/health-statistics/overweight-obesity>

² Centers for Disease Control and Prevention. Obesity, Race/Ethnicity, and COVID-19. Accessed November 1, 2021. <https://www.cdc.gov/obesity/data/obesity-and-covid-19.html>

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- ¹² Adams KM, Kohlmeier M, Zeisel SH. Nutrition education in U.S. medical schools: latest update of a national survey. *Acad Med*. 2010;85(9):1537-1542. doi:10.1097/ACM.0b013e3181eab71b
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