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Brandy Matsumori, RD

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October 13, 2003

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Food Guide Pyramid Reassessment Team
USDA Center for Nutrition Policy and Promotion
3101 Park Center Drive, Room 1034
Alexandria, VA 22302

To Whom It May Concern:

Subject: Proposed Revision to the Food Guide Pyramid

I understand that comments regarding the revised United States Department of Agriculture (USDA) Food Guide Pyramid are being directed to your team. Enclosed is my recommendation of one area in which the Food Guide Pyramid could be revised. I hope that it will be helpful to the work that you are doing.

Sincerely,

Brandy Matsumori

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THE NEW FOOD GUIDE PYRAMID By Brandy Matsumori, RD

The Dietary Guidelines for Americans, as developed by the United States Department of Agriculture (USDA) and the Department of Health and Human Services (DHHS), includes a new emphasis: physical activity combined with nutrition (1-3). It is with this focus, I propose the food guide pyramid be changed to incorporate at least 30 minutes of daily moderate-intensity physical activity.

According to the Center for Disease Control and Prevention (CDC), physical inactivity and unhealthy eating are the most potent determinants of health and risk of chronic disease outside of tobacco use (1,4). Exercise can lower the risk of cardiovascular disease, osteoporosis, diabetes mellitus II, colon cancer, and help maintain a healthy weight (3-6).

Research has shown there may be a synergistic relationship between healthy eating and exercise (5). Gillman et al reported people with increased activity consumed less dietary cholesterol, and saturated and trans fat, and more calcium, dietary fiber, folate, and antioxidant vitamins (5,7). The study concluded: diet quality and physical activity are correlated behaviors (7).

Others have recommended adding physical activity to the food guide pyramid as well. Dr. Walter Willett of the Harvard School of Public Health included daily exercise and weight control to the base of his Healthy Eating Pyramid (8,9). While Oldways, a nonprofit organization of physicians, dietitians, and food lovers, also incorporated physical activity into their 1993-1997 Traditional Healthy Eating Pyramids (10). However, they failed to specify exactly how much and what type of activity should be performed.

Studies have shown 30 minutes or more of exercise to be beneficial in reducing the risk of cardiovascular events. A Harvard cohort study on 44,452 American men found that those who ran for 60 minutes or more each week decreased their risk of coronary heart disease (CHD) by 42% compared with men who did not run, and that those who trained with weights for 30 minutes or more each week reduced their risk of CHD by 23% compared with men who did not weight train. Also, brisk walking for 30 minutes or more each day was associated with an 18% less risk of CHD, and the greater the intensity the better (6,11). Manson et al concluded that "both walking and vigorous exercise are associated with substantial reductions in the incidence of cardiovascular events among postmenopausal women, irrespective of race or ethnic group, age, and body-mass index" (6,12). These studies further accentuate the recommendations by the National Institutes of Health, the American College of Sports Medicine, the American Heart Association, and the CDC that adults accrue at least 30 minutes of moderate-intensity physical activity preferably all days of the week (3-6).

The expected consequences of changing the food guide pyramid to include physical activity are improved awareness of the importance of physical activity combined with healthy eating and improved health of those who follow the recommendation. Even for those who are physically limited or elderly, most everyone should be able to make efforts to be as physically active as possible (10).

Although there are other changes that could be made to the food guide pyramid, as indicated by Oldways and Dr. Walter Willett (8-10), I have focused my attention on making one change that I

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believe would be simple and justifiable: to add at least 30 minutes of moderate-intensity physical activity to the new food guide pyramid.

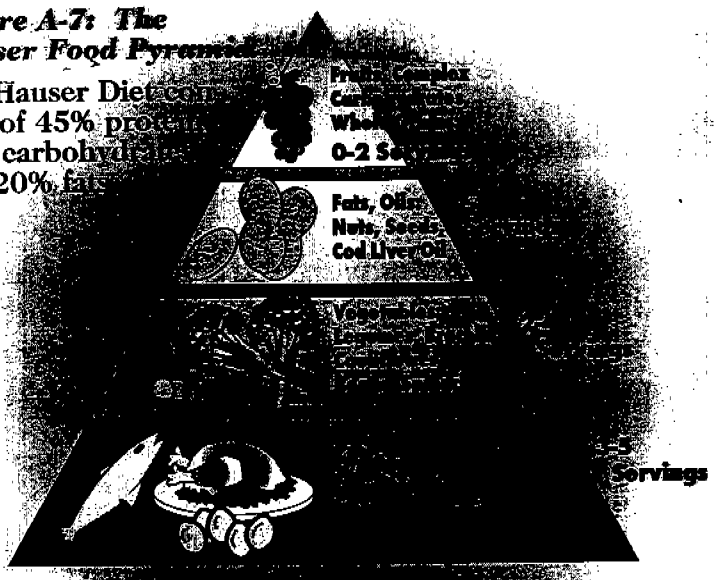
References:

1. Johnson D, Eaton DL, Wahl PW, Gleason C. Public health nutrition practice in the United States. *J Am Diet Assoc.* 2001;101:529-34.
2. Trumbo P, Schlicker S, Yates A, Poos M. Dietary reference intakes for energy, carbohydrate, fiber, fat, fatty acids, cholesterol, protein and amino acids. *J Am Diet Assoc.* 2002;102:1621-1630.
3. *The Surgeon General's Report on Physical Activity and Health.* Atlanta, GA: US Dept of Health and Human Services, Center for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion; 1996. DHHS (PHS) publication 017-023-00196-5
4. Physical Activity and Good Nutrition: Essential Elements to Prevent Chronic Diseases and Obesity. August 30, 2003. Available at: http://www.cdc.gov/nccdphp/aag/aag_dnpa.htm. Accessed: 1 March 2003.
5. The role of dietetics professionals in health promotion and disease prevention – Position of ADA. *J Am Diet Assoc.* 2002;102:1680-87.
6. Kalb C. Get up and get moving. *Newsweek.* 2003 Jan 20;59-64.
7. Gillman MW, Pinto BM, Tennstedt S, Glanz K, Marcus B, Friedman RH. Relationships of physical activity with dietary behaviors among adults. *Prev Med.* 2001;32(3):295-301.
8. Willett W, Stampfer MJ. Rebuilding the Food Pyramid. *Scientific American.* 2003 Jan.
9. Cowley G. A better way to eat. *Newsweek.* 2003 Jan 20;46-54.
10. EATWISE TM. Oldways(2001). Available at: <http://www.e-guana.net/organizations.php3?orgid=61&typeID=193&action=printContentItem&itemID=1539>. Accessed February 13, 2003.
11. Tanasescu M, Leitzmann MF, Rimm EB, Willett W, Stampfer M, Hu FB. Exercise type and intensity in relation to coronary heart disease in men. *J Am Med Assoc.* 2002;288:1994-2000.
12. Manson JE, Greenland P, LaCroix AZ, Stefanick ML, Mouton CP, Oberman A, Perri MG, Sheps DS, Pettinger MB, Siscovick DS. Walking compared with vigorous exercise for the prevention of cardiovascular events in women. *N Engl J Med.* 2002 Sep 5;347(10):716-25.

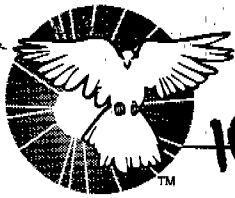
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Figure A-7: The Hauser Food Pyramid

The Hauser Diet consists of 45% protein, 35% carbohydrate, and 20% fat.



THE HAUSER DIET FOOD PYRAMID



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To the Food Guide Pyramid Reassessment Team:

Greetings from Caring Medical & Rehabilitation Services, S.C., in Oak Park, IL! Caring Medical is a comprehensive interventional natural medicine clinic that offers treatments from around the world, and treats every human condition from pain and cancer, to hormones and obesity. Caring Medical was founded by Dr. Ross Hauser and his wife, Marion Hauser, M.S., R.D. Dr. Hauser received a newsletter from Orthomolecular Products indicating that the USDA is looking for public input on what the food pyramid for the average American diet should look like.

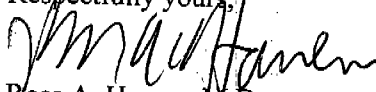
Dr. Hauser and his wife Marion have authored several books over the past 5 years, one of which is a book about an innovative cancer treatment, Treating Cancer with Insulin Potentiation Therapy, published in 2002. In appendix A of this book (pages 329 through 349), the Hausers outline their diet recommendations, "The Hauser Diet", and give their version of what the food pyramid should look like on page 345. Enclosed is a copy of the pyramid, which indicates that a person's diet should consist of 45% protein, 35% carbohydrates, and 20% healthy fats. The daily breakdown is 3-5 servings of protein (soy, tofu, fish, poultry, eggs), 2-4 servings of vegetables (legumes, broccoli, cauliflower, beans, spinach), 1-3 servings of fats and oils (nuts, seeds, cod liver oil), and 0-2 servings of fruits, complex carbohydrates, and whole grains.

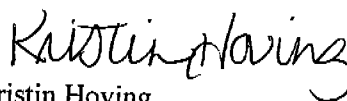
According to the Hausers, eating according to this diet will help the body do many beneficial things, including stimulate immunity, thin the blood, inhibit anaerobic metabolism, enhance aerobic metabolism, promote detoxification, and provide cancer-fighting substances. In summary, the basic principles of the Hauser Diet are:

- Avoid sugar and sugar containing foods
- Avoid junk food, processed food, food chemicals, pesticides, dyes, artificial colors, flavors and sweeteners
- Choose whole, fresh, and organic fruits, vegetables, and meats
- Increase consumption of bioflavonoid-containing foods
- Increase consumption of soy and soy-containing products
- Drink purified, clean water
- Reduce fat intake, especially hydrogenated and saturated fats. Consume good fats, such as olive and flax seed oils.
- Increase consumption of cold-water fish

If you would like more information about the Hauser Diet in this book, please visit www.beulahlandpress.com to order a copy. Thank you for offering this opportunity for the public to speak on their health and diet recommendations.

Respectfully yours,


Ross A. Hauser, M.D.
Clinical Director, Caring Medical


Kristin Hoving
Patient Liaison, Caring Medical