

FOOD Insight™

IFIC Foundation
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New Dietary Guidelines and MyPyramid: Implementing Steps for a Healthier You!

MyPyramid, the centerpiece of the U.S. Department of Agriculture’s (USDA) new food guidance system, was released in April 2005 and represents the most recent nutrition science and knowledge used to educate and motivate consumers to follow a healthful diet and to be physically active. But, the story doesn’t begin there, and history can offer insights into the progress of dietary guidance today.

Evolution of Dietary Guidance

Dietary guidance, as indicated by its extensive history, has long been a mainstay in efforts to ensure and improve public health. This guidance has been evolutionary in nature, as more has been learned about the science of health and nutrition over the years and has taken many forms through the years. Advice in the form of “food guides” dates all the way

back to 1894 with what Dr. W.O. Atwater described as “diets suggested for the American male based on content of protein, carbohydrate, fat, and “mineral matter.” Subsequent iterations of food guides over the years include the “Basic 4” and the “Hassle-Free Food Guide.” Perhaps the most recognizable of all the food guides, the Food Guide Pyramid, was released in 1992.

In 2005, the Food Guide Pyramid was due to be revised, on the basis of the new *Dietary Guidelines for Americans*, which was released in January 2005. The Food Guide Pyramid revision came at a time when food guidance was being examined for its ability to stem the increase in obesity and motivate consumers to eat more healthfully and control their weight. In fact, however, although a 2004 Ipsos survey found that most consumers had heard of the Food Guide Pyramid, relatively few said that they had *tried* to adhere to the recommendations. In actuality, less than 1 percent of consumers had food intake patterns that actually reflected the recommendations outlined in the Food Guide Pyramid.

Enter MyPyramid

The new food guidance system, *MyPyramid*, is revolutionary for a number of reasons. First, it was developed on the basis of the experience of its predecessor, the Food Guide Pyramid, stakeholder input, and extensive consumer testing. Part of the reason for the original Pyramid’s wide recognition, yet poor following, may have been due to its complexity. It was designed to capture all of the dietary recommendations for Americans 2 years old and older, and

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— CORRECTION —

There was an error in the March/April 2005 issue of *Food Insight*. On page 3 of that issue in the sidebar, “Food Safety T.I.P.S.,” the temperature that the food should reach in the 4th bullet should be corrected to read, “Ground beef, pork, veal & lamb, pork chops, ribs & roasts, egg dishes — 160° F.”

A corrected version of the newsletter is available on the IFIC Web site in both HTML and PDF formats:
<http://www.ific.org/foodinsight/2005/ma/upload/maraprifi205.pdf>.

We apologize for this error and any confusion it may have caused.

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Separating Fact from Fiction on the Web

If you're connected to the Internet at all, you have no doubt received at least one email warning letter related to your health that was later exposed as a hoax or "urban legend." Looking back, these documents are humorous, but at the time...well, didn't you wonder? How can tech-savvy consumers determine what's legitimate and what's phony when it comes to health information on the Web?

Given that so many Americans use the Internet for everything from planning vacations to finding a mortgage; it's no surprise that a 2005 Food Marketing Institute (FMI) survey, "Trends," found that 46 percent of surveyed consumers say they use the Internet to find information on nutrition issues on a regular basis. Clearly, consumers are feeling more comfortable using the Web as a source of health information, but are they getting quality information? Of the 46 percent of respondents in the FMI survey who looked for nutrition information on the Web, only 13 percent said they trusted that source. Here are a few suggestions to help you separate the quality food and nutrition information from the questionable information and to help guide you through the information mine field.

Start Searches with Reputable Health and Nutrition Sites

When it comes to nutrition and your health, picking through the plethora of information on the Web can be downright challenging, not to mention, time consuming. Interspersed between sites with legitimate information are many sites that have names or acronyms that sound credible but that exist only to tout hokey health products, fad diets, fake

nutrition "science" and crazy "cures," or to dispense inaccurate and scary information. When you want to search for information about a certain nutrition-related topic, starting your quest with health-related "umbrella" sites can shorten your search, saving you time and effort. The links and recommendations on these sites will generally lead you right to the information that you are looking for, as opposed to making you wade through the hundreds or thousands of sites you will get when you use a general search engine like Google. For *Food Insight's* list of appropriate "umbrella" sites, see the sidebar "Nutrition Sites to Set Your Sights On," below.

Check the Source

Since almost anyone can put up a Web page or start an email chain, it makes sense to find out where information is coming from. Look for background information under an "About Us" heading on a Web site, a mission statement, or a personal biography. If you can't locate background information on the site, or can't find out exactly who wrote it and why, then the content probably isn't the most accurate or reliable.

One example of this occurred a few years ago. An article by a "Nancy Markle" that falsely linked aspartame (a low-calorie sweetener used in food and beverages) to multiple health problems was widely circulated on the Internet. Credible opinion leaders agree that the article was not only full of scientifically false or inaccurate statements, but appeared to have been designed deliberately to mislead consumers (no "expert" or scientist named Nancy Markle has ever been located — the name may have been made up). Sadly, this article may have introduced undue concern and skepticism for

many people, including respected health care professionals before it was finally identified by reputable sources as a scare campaign started by an anti-aspartame activist.

Again, a reliable way to start your search is to ignore dubious and otherwise unsolicited health advice and head straight to the Web sites of trusted health organizations with names that you recognize, universities, and state and national government agencies and offices.

Heed "Red Flags"

"Trust your gut" is a phrase we've all heard, and it's a good one to remember when reading health information on the Web. Many times we get an inkling that something isn't quite right about a story we've read or heard. Here are some examples of "red flags" that generally indicate a less-than-reliable information source.

- The information is accompanied by an advertisement for a product to "cure" the problem or multiple health problems ranging from migraine headaches to obesity, or by some other type of hard-sell. Reputable sites publicize health information for educational purposes — not to sell or promote products.

- The article is poorly organized, sensationally written, or uses LOTS OF CAPITAL LETTERS and excessive punctuation!!!!

- The information is all anecdotal. That is, it all seems to be "word of mouth" and the information or results are attributed to no organization, university, or federal agency.

- A single ingredient, food, or product is alleged to be responsible for a laundry list of health problems. These health problems have usually been self-diagnosed.

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New Dietary Guidelines and MyPyramid

to represent all the various calorie and nutrient needs of various population groups...all in one graphic! (see sidebar "What's a 'food guidance system' and how is it designed?" on page 6)

The new pyramid is part of a system designed to be an interactive nutrition education tool and is intended to help consumers apply personalized dietary guidance to achieve a healthful lifestyle. The MyPyramid icon features vertical bands of color — one for each food group. These bands are wider toward the base of the pyramid to encourage consumers to choose nutrient-dense foods, or those with more nutrients per calorie, more often. The bands become narrow toward the top, indicating moderate intake of less nutrient-dense (high-calorie) foods. The latest addition to the symbol, the figure ascending a staircase, reminds consumers to include physical activity as part of a healthful lifestyle. MyPyramid uses a practical approach to harmonize dietary guidance messages with the 2005 Dietary Guidelines by incorporating the concepts of personalization, gradual improvement, physical activity, variety, moderation, and proportionality. A Web site (MyPyramid.gov), along with printed materials and future initiatives are being used to help consumers make dietary advice relevant and attainable in their busy lives by personalizing it based on their age, gender, and level of physical activity.

It's Working

Consumer research was the foundation for the development of MyPyramid and its personalized approach. According to a survey conducted by Opinion Dynamics the week after its release, 40 percent of Americans reported seeing MyPyramid. Of those who had seen the new design,



MyPyramid.gov
STEPS TO A HEALTHIER YOU

28 percent believed that it is more useful than the previous model and 46 percent believed it is equally as useful as the previous model.

Maximizing Application of Dietary Guidance: Consumer Considerations

To help translate recommendations into behavior, consumers consistently ask for specific actions that they can relate to, individualize, and incorporate into their lives. Research by the Dietary Guidelines Alliance, a public-private partnership whose mission is to provide positive, simple and consistent messages to help consumers achieve healthy, active lifestyles, found that consumers respond favorably to consumer-tested messages consistent with those in MyPyramid. Some effective consumer-tested messages include encouraging consumers to be flexible in balancing food choices with physical activity over several days, to be sensible in enjoying foods without overdoing it, and to be adventurous in choosing a wide variety of foods.

Maximizing Application of Dietary Guidance: Food Supply Considerations

Nutrition science, dietary guidance, and consumer communication comprise only part of the equation in helping consumers achieve a healthful diet. Food technology also plays an important role and will continue to do so as information about public health and nutrition science evolves and this field continues to advance. One of the key areas of growth is product development. Like consumers, food scientists are asked to balance many competing priorities — both

in the reformulation of existing products and in the development of new products. Consumers expect foods to stay fresh, as well as deliver taste, value, and convenience. Developing products that fill this bill and that also meet dietary recommendations can be challenging.

Initiating and maintaining an open dialogue between food scientists and nutrition scientists is essential to ensuring that consumers have access

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What's New at IFIC.ORG?

Have you visited ifc.org en Español yet?

You can access ifc.org in Spanish at <http://ifc.org/sp> or through <http://ifc.org> simply by clicking on Español in the left navigation bar. New translations are uploaded regularly. IFIC.ORG en Español is a great resource for Spanish-speaking audiences both in the United States and around the world. So spread the word, and we encourage you to link to <http://ifc.org/sp>.

The Challenge of Weight Management and Health Communication: What Consumers Want

Overweight and obesity are among the United States' most important public health threats in the United States. Many stakeholders including government officials and businesses, scientific researchers, medical and health professionals, educators, and community-based organizations, are focusing on this complex problem. All of these entities have important roles to play in communicating with consumers.

To explore the role of communications in addressing the complex issue of weight management and to come up with better strategies and messages health professionals and educators could use in communicating with consumers, the International Food Information Council Foundation convened a special meeting of stakeholder groups in December 2004 in Washington, DC. The conference participants included 80 opinion leaders representing government agencies, research institutions, health, nutrition and physical activity professional organizations, and food, beverage, and agricultural companies participated.

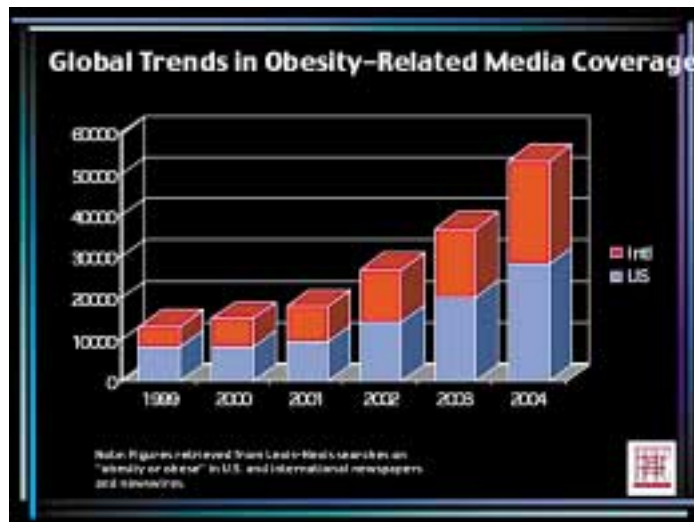
The Current Environment = Information Overload

The conference began with an overview of the public health threats associated with rising levels of overweight and obesity and a look at the current communication environment as seen through the eyes of consumers.

Today, more nutrition, weight management, and health information is probably communicated to consumers than at any point in modern history. These messages come from many sources, including the media,

Internet advertisements, government agencies, neighbors and friends, health professionals, educators, coaches, and others.

One measure of this dramatic increase is the growth in obesity-related news stories in print media in the United States and other English-speaking parts of the world as tracked by the International Food Information Council Foundation. Over the past 6 years, the number of obesity-related stories increased by 336 percent.



However, during this period of increasing public awareness and interest in weight management and health, the number of Americans who are overweight or obese continued to climb.

Why this Disconnect?

To better understand consumers' knowledge and underlying attitudes in this area, the participants were offered a summary of 10-years' worth of findings from consumer research on nutrition, health, and weight management. Conclusions from a series of focus group interviews conducted by the IFIC Foundation in 2003 and 2004 were included in this summary. A full

copy of this report is available at <http://www.ific.org/research/obesityres.cfm>. Conference participants then discussed these findings and their potential implications for improving consumer weight management messages in breakout sessions.

The consensus findings from these breakout discussions fell into three categories:

1. Current communications are not connecting with consumers:

Surprisingly, consumers seem to have a fairly good idea of what to do about managing their weight but they can't or don't know how to motivate themselves to act accordingly. In other words, they are not putting their knowledge into practice. In order to begin motivating consumers, stakeholders agreed that communication must be designed both to connect with the everyday lives and concerns of consumers and to reach them at an emotional, and potentially more motivational, level as well.

2. Communications need to address perceived lifestyle challenges:

Conference participants recognized that weight management and health messages need to acknowledge and address the lifestyle challenges that consumers face every day. Each individual and family deals with lifestyle issues differently. Consumers don't think about nutrition, they think about their lifestyle. They need to know how to incorporate weight management and health into their lives while still meeting their family's needs.

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The Challenge of Weight Management and Health

3. Health, while important, is not a top priority. Health, with its many meanings, is not a motivator or a top priority for consumers. Similarly, terms like “nutrition,” “calories,” and “energy balance” do not resonate with consumers. Stakeholders left the conference with the understanding that messages need to be designed to appeal to consumers in a broad, comprehensive way that communicates specific, practical tips that consumers can incorporate into their daily lives.

In order to help consumers adopt new food and physical activity behaviors, attendees agreed that messages need to be “real” so that they are perceived as relevant and helpful to consumers as they struggle to manage the challenges of their day-to-day lives.

Working Together: The Benefits of Collaboration

The breakout groups also considered the potential benefits and

feasibility of collaborating to help improve the communication environment. Looking at it from a consumer’s point of view, the participants agreed that the environment would be less confusing and more helpful if more information outlets were saying the same thing.

One way to achieve this would be for stakeholders in the obesity communication environment to work together to promote fewer but more overarching messages that have been consumer-tested. Many participants reacted positively to this approach, and discussed examples of partnerships they thought had successfully used a broad base of support to promote a unified message including Fight BAC® (www.fightbac.org) and the Dietary Guidelines Alliance’s *It’s All About You* program).

Collaboration could also provide a way for stakeholders to pool each group’s limited resources so that the few overarching messages could be repeated more frequently and over a longer period of time. While the details of developing collaborative

partnerships need to be worked out, participants seemed enthusiastic about the potential effectiveness of this approach.

Finally, stakeholders could collaborate in the fielding of additional consumer research. New consumer research is needed to find ways and messages to encourage consumers to adopt healthful lifestyles. In particular, this research could yield new insights into how to personalize weight management information so that it empowers people to overcome perceived barriers such as lack of time because of their busy lifestyles.

A First Step

Feedback from the participants was overwhelmingly positive. While each participant’s organization was working hard to address weight management and health issues with its own messages and programs, there was a strong interest in meeting again to explore opportunities to collaborate. In the words of one participant: “Thanks for bringing us together on this important topic.”

(CONTINUED FROM PAGE 2 — SEPARATING FACT FROM FICTION)

NUTRITION SITES TO SET YOUR SIGHTS ON

healthfinder.gov

This award-winning site, developed by the U.S. Department of Health and Human Services, along with other federal agencies, makes it easy to navigate through the many governmental Web sites that contain health information for professionals and consumers alike.

ific.org

This food safety and nutrition resource site provides easy access to a wide variety of timely, science-based information on health, nutrition and food safety, and caters to consumers, educators, health professionals and journalists. An online glossary and extensive resource lists are also featured.

medlineplus.gov

This consumer-oriented site provides a wealth of quality information from the National Library of Medicine — the world’s largest medical library. More than 600 health topics, medical dictionaries, lists of hospitals and physicians, information on clinical trials and numerous items in multiple languages, make

this site a valuable resource for anyone looking for reliable health information online.

mayoclinic.org

This respected Web site contains reliable, accurate, and practical information on current nutrition, health, and medical news.

berkeleywellness.com

The highly rated Berkeley Wellness Letter translates leading-edge research into practical information for daily living.

Helpful hint: Consider adding these Web sites to your list of “favorites” on your Internet navigator bar. Check them regularly or register your health and nutrition interests so you will be updated with information only at your request.

So that you may navigate through the seemingly endless mine field of Web sites, be mindful of the “red flags” and look for validated, credible expert sources as you seek to differentiate fact from fiction.

New Dietary Guidelines and MyPyramid

to products that help them meet the 2005 *Dietary Guidelines*. Now and in the future, nutrition professionals, working together with food scientists, can continue to develop “real-life” food science solutions to support and promote health.

Resources for Health Professionals, Journalists, and Consumers

A wealth of interactive resources may be found at:

<http://www.mypyramid.gov> and <http://www.usda.gov/cnpp/pyramid.html>.

For more information on the 2005 *Dietary Guidelines for Americans*, visit: <http://www.healthierus.gov/dietaryguidelines>.

The International Food Information Council (IFIC) Foundation has prepared and selected resources for health professionals, journalists, and consumers to complement and add context to information surrounding the release of the 2005 *Dietary Guidelines for Americans* and *MyPyramid*. All of the resources may be used freely, with attribution to the IFIC Foundation. For a list of available resources, visit <http://ific.org/foodguidance.cfm>.



What's a “food guidance system” and how is it designed?

Q: What is the “MyPyramid” food guidance system?

A: On April 19, 2005, the U.S. Department of Agriculture (USDA) unveiled *MyPyramid* ([MyPyramid.gov](http://www.mypyramid.gov)), a new symbol and interactive food guidance system. “Steps to a Healthier You,” *MyPyramid*'s central message is part of an overall food guidance system that emphasizes the need for a more individualized approach to improving diet and lifestyle. *MyPyramid* replaces the Food Guide Pyramid introduced in 1992.

Historically, “food guides” have been graphic representations of the science-based nutrition recommendations outlined in the *Dietary Guidelines for Americans*. The term, “food guidance system,” encompasses a number of tools that can be used to communicate these recommendations, including a graphic, motivational slogan, core education concepts and messages, written materials and interactive tools for personalization. The tools, particularly the graphic, are designed to help Americans make food choices that are **adequate** for meeting nutritional standards yet that are **moderate** in energy level (calories) and in food components or nutrients often consumed in excess.

Q: What's new and different about *MyPyramid*?

A: While most Americans recognized the previous Food Guide Pyramid, few followed its recommendations in their entirety. *MyPyramid* is Web-based and uses technology to provide individual guidance to consumers.

USDA's new *MyPyramid* symbolizes a personalized approach to healthful eating and physical activity. The symbol has been designed to be simple. It has been developed to remind consumers to make healthful food choices and to be active every day.

Q: How was *MyPyramid* developed?

A: The USDA has provided food guidance to the American public for more than 100 years. *MyPyramid* is based on the recommendations outlined in the 2005 *Dietary Guidelines for Americans* released by the U.S. Department of Health and Human Services and USDA in January 2005. Because nutrition science continues to emerge and evolve, the *Dietary Guidelines* are updated every 5 years and are based on the preponderance of scientific evidence available at the time of revision. *MyPyramid* carries the messages of the *Dietary Guidelines* and communicates to Americans the vital health benefits of simple and modest improvements in nutrition, physical activity, and lifestyle behaviors.

In addition to the information provided by the 2005 *Dietary Guidelines for Americans*, the development process for *MyPyramid* also included the following elements:

- **Stakeholder input** — A notice was posted in the *Federal Register* to present the plan and to solicit public comment. The notice included the conceptual plan for the graphic design and proposed consumer messages. The comments received were used to help focus the design and development of both the motivational and the educational aspects of the food guidance system.
- **Design** — A new symbol, slogan, and educational materials — including Web-based educational materials — were developed.
- **Consumer testing** — As part of the design and development process, potential images and messages were tested with consumers to determine how well they communicated the intended content and how appealing they were to consumers. The results from the consumer research were used to revise and finalize the communication materials so that consumers can more easily understand these messages and incorporate them into their lives.

UPDATE: Federal Initiative on Bioactive Components in Foods and Dietary Supplements

The potential role for bioactive food component substances and the possibility of their widespread consumer use to promote health and reduce risk of disease are of enormous public interest. The Office of Dietary Supplements, along with representatives from the U.S. Departments of Health and Human Services, Defense, and Agriculture, as well as agencies within these departments, such as the National Institutes of Health (NIH), the Centers for Disease Control and Prevention, and the Food and Drug Administration have formed an ad hoc federal working group tasked with defining bioactive components and exploring approaches to evaluate their significance in health promotion and reduced risk of disease. The goal of this cross-agency effort is to stimulate discussion and research. The following activities have been completed thus far.

In September 2004, a Federal Register notice (*Federal Register* Sept. 16, 2004;69(179): 55821-55822) was issued to seek public comment on the definition of bioactive food components. These comments will be used to shape the agendas of public meetings, which in turn, will assist researchers in developing approaches to assessing the health effects of bioactive food components. In addition, these outcomes may guide public health policy on how Americans can choose diets that promote good health.

Two public meetings were also held. The first meeting took place in March 2005 at the Lister Hill Auditorium at NIH, and the second was held in conjunction with the Experimental Biology 2005 meeting (EB05) in April 2005. The goal of the March 24-25 *Assessing the Health Effects of Bioactive Food Components* conference was to identify guiding principles that can be used to direct the development of approaches that can be used to categorize and assess the health effects of bioactive food components. Specifically, the conference reviewed: (1) existing approaches for categorizing and assessing the health effects of bioactive components; (2) existing and innovative techniques for the evaluation of health and determination of the development and progression of disease; and (3) the definition of bioactive food components, as well as approaches to and the challenges of identifying them in food. The April 1 workshop at EB05 reported on the lessons that have been learned from the evidence-based reviews of omega-3 fatty acids conducted by the Agency for Healthcare Research and Quality and examined how this knowledge can be applied to researching the health effects of other bioactive food components.

The proceedings from the public meetings will be made available through publications in peer-reviewed scientific journals and on government-sponsored Web sites. For the most recent activities on this federal initiative, visit: <http://www.scgcorp.com/bioactivefood2005/>.

CDC Issues New Estimate for Number of Deaths Caused by Obesity

Researchers from the Centers for Disease Control and Prevention (CDC) issued a new estimate of the number of deaths caused by obesity. This estimate was published in an article in the *Journal of the American Medical Association (JAMA)* 2005;293(15):1861-1867. The new estimate is 112,000 deaths per year which is significantly lower than a previous estimate of 365,000 deaths per year. The difference between the two estimates reflects the general difficulty associated with attributing deaths to obesity, poor nutrition and physical inactivity and specific differences in methodologies. For example, the most recent estimate used age-specific mortality rates while the earlier estimate did not. In commenting on the new estimates, William H. Dietz, MD, PhD, director of the Division of Nutrition and Physical Activity at the Center for Chronic Disease Prevention and Health Promotion at CDC, said, "Obesity was used as a surrogate measure of poor nutrition and inactivity. However, it seems likely that the true disease burdens attributable to poor nutrition and inactivity are likely to exceed those of obesity."

In addition, the earlier estimate was based largely on the health risks that people experienced in the 1970's. Since then, there has been a great deal of improvement in the control of both heart disease and high blood pressure. The new, lower estimates reflect these advances in life-saving interventions for obesity-related diseases. However, obesity remains a concern because overweight rates have doubled among children and tripled among adolescents, and this greatly increases the number of years over which they are exposed to the health risks associated with obesity.

While there is discussion concerning the best way to estimate the true impact of overweight and obesity on our society, there is still a strong scientific consensus that obesity significantly increases the risk of serious chronic diseases like diabetes, heart disease and some cancers and that these diseases contribute to overall mortality. In response to the conflicting reports, CDC recently held a press conference to reconfirm its commitment to support obesity prevention efforts. Dr. Julie Gerberding, director of the CDC, stated, "We need to be absolutely explicitly clear about one thing: obesity and overweight are critically important health threats in this country."

New IFIC Foundation Publications

Below are the newest releases from the IFIC Foundation. Single copies of most publications are available free-of-charge. For a comprehensive listing of publications or for bulk prices, please request the IFIC Foundation Publications List below.

Publications List (MI-4010)

A complete list of publications available from the IFIC Foundation.

Everything You Need to Know About Aspartame (EB-2155)

A brochure containing information on the latest science, safety, uses and consumption of Aspartame. Favorably reviewed by the American Academy of Family Physicians Foundation.

Everything You Need to Know About Sucralose (EB-2180)

A brochure containing information on the latest science, safety, uses and consumption of Sucralose. Favorably reviewed by the American Academy of Family Physicians Foundation.

Starting Solids: Nutrition Guide for Infants and Children 6 - 18 Months of Age (EB-2020)

This updated brochure has extensive information on transitioning infant feeding from breast milk to solid foods. Brochure includes information from the American Red Cross on what to do if your child is choking. Co-published with the National Association of Pediatric Nurse Practitioners.

Helping Your Overweight Child (EB-2085)

A four page fact sheet filled with practical advice and useful ideas. Tips for improving eating habits include eating fast food less often, trying not to use food as a reward, and avoiding controlling the amount of food a child eats. Healthful snack ideas are listed, as are fun physical activities the whole family can enjoy together. Co-published with the National Institute for Diabetes and Digestive and Kidney Diseases.

Kidnetic.com Leader's Guide (MI-4265)

A Leader's Guide filled with resources, tools and activities to promote healthful eating and physical activity to kids 9-12. Based on material from the healthy eating and active living Web site, Kidnetic.com, this guide can be used by health professionals, health educators, public health professionals and community youth service providers and can be implemented in after-school settings, classrooms, outpatient clinic settings and health departments. Please send me _____ copy (ies) at \$19.95. Enclosed is a check for _____.

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Current Topics in Food Safety & Nutrition



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