

October 28, 2013

William Wagoner
Section Chief, Policy and Program Development Branch
Child Nutrition Division
Food and Nutrition Service
P.O. Box 66874
Saint Louis, MO 63166

Re: Docket No. FNS-2011-0019 – Nutrition Standards for All Foods Sold In Schools

Dear Mr. Wagoner:

On behalf of our 157,000 members, we are pleased to comment on the Food and Nutrition Service's (FNS') interim final rule to establish nutrition standards for all foods sold in schools. We offer these comments in response to your Federal Register notice of June 28, 2013 (78 FR 39068).

Eating patterns and food choices play an important role in maintaining good oral health. From a dental perspective, a steady diet of sugary foods and drinks, including juice and sports drinks, can damage teeth. A lack of certain nutrients can also make it more difficult for tissues in the mouth to resist infection.

We are generally pleased with the interim final rule FNS has proposed. The limits established for calories, fats, sugars and sodium inherently preclude the sale of candy and other confections, whole milk, jams, jellies and certain fruit products that contain added sugars on elementary and middle school campuses, and restrict their availability in high schools. The beverage standards also acknowledge that, in certain quantities, the nutritional benefits of consuming 100 percent fruit/vegetable juices and/or flavored non-fat milk outweigh the risk for tooth decay.

Moreover, the interim final rule would regulate beverages, other than milk, by their calorie and caffeine content. This approach would inherently prohibit sugared soft drinks, sport drinks and/or fitness waters from being sold in elementary and middle schools, and restrict their availability in high schools. Unfortunately, the interim final rule contains a loophole that would permit calorie-free diet soft drinks and/or sport drinks to be sold in high schools without restriction.

Preliminary data suggest the carbonation and/or acid(s) in calorie-free diet soft drinks and/or sport drinks could wear down tooth enamel and result in erosion or the loss of hard tissues from the tooth surface, depending on the concentration, frequency and duration of exposure. We urge you to review the literature concerning the oral health effects of these beverages and, if warranted, establish practical, fact-based standards to restrict their availability.

Oral health is inextricably linked to overall health and well-being. It is serendipitous, perhaps, that most proposals to curb obesity include the need to reduce sugar consumption.

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Sugar intake is a common risk factor for obesity *and* tooth decay. The same can be said of other dietary behaviors. We caution, however, that obesity is not the only health crisis facing America's youth and not every unhealthy dietary habit is tied to obesity.

Any strategy to improve the dietary habits of America's youth can and must include an oral health component. We stand ready to help you address that concern.

We applaud you for proposing a rule that would limit access to sugar-containing foodstuffs, particularly sugar-sweetened beverages. If you have any questions, please contact Mr. Robert J. Burns at 202-789-5176 or burnsr@ada.org.

Sincerely,

/s/

Robert A. Faiella, D.M.D., M.M.Sc.
President

RAF:KTO:rjb

/s/

Kathleen T. O'Loughlin, D.M.D., M.P.H.
Executive Director