



June 22, 2010

The Hon. George Miller
Chairman
Education and Labor Committee
U.S. House of Representatives
Washington, DC 20515

The Hon. John Kline
Ranking Member
Education and Labor Committee
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Miller and Ranking Member Kline:

On behalf of the United States Breastfeeding Committee, I am writing to urge the Committee to insert, during mark up, additional language in the Child Nutrition Reauthorization legislation ensuring that the U.S. Department of Agriculture (USDA) possesses the statutory authority to require scientific analysis prior to the authorization of the use of infant foods and infant formula with health claims regarding functional ingredient additives, which have not been proven by scientific evidence. We urge the Committee to include a provision in the WIC reauthorization legislation directing USDA, which operates the WIC program, to obtain expert advice from the independent Institutes of Medicine before deciding whether to offer more costly products with functional ingredients.

Why is this language needed?

Thirty years have passed since the enactment of the Infant Formula Act (part of the Federal Food, Drug, and Cosmetic Act), with the last major revision in 1986. Since that time, infant formula manufacturers have included many additional functional additives. While these ingredients may be individually classified as safe, the efficacy of these new ingredients added to infant formula has not been established. There is no oversight or monitoring that shows these ingredients are effective or necessary to the health of the infants who consume them. An example is the addition of the fatty acids docosahexaenoic acid (DHA) and arachidonic acid (ARA) that were put into U.S. infant formula in 2002. WIC spends an additional \$91 million annually for infant formula with these added functional ingredients whose benefits to recipient full-term infants have not been demonstrated. Independent research has shown very mixed results as to their effect on vision and cognitive learning. Long-term studies identify potential *adverse* outcomes such as greater fatness and increased blood pressure.

Importance of a science-based WIC food package

Many of the studies comparing the use of DHA and ARA in infant formula have been conducted by the companies themselves, calling into question the objectivity of the methodology and conclusions. Reports of mothers asking for the “breast milk formula” or the “formula with breast milk in it” demonstrate the negative effect formula marketing has on breastfeeding. Mothers avoid or abandon breastfeeding when it appears as if infant formula results in the same health outcomes as feeding human milk. This serves to neutralize the effect of the millions of dollars that the U.S. government spends to promote and support breastfeeding.

Congress should require USDA to commission independent scientific reviews of the clinical significance and evidence of benefits of “functional ingredients” in WIC formulas and other foods:

- to protect the Program from costly expenditures with unproven health advantages
- to keep all consumers more fully informed about these additives
- to protect breastfeeding from adverse commercial influences
- to reduce the risk of preventable conditions and diseases in a vulnerable population

The United States Breastfeeding Committee strongly urges you to include provisions in the Child Nutrition Act reauthorization (*Improving Nutrition for America’s Children Act*) to protect mothers, infants, breastfeeding, and the WIC program.

Sincerely,

A handwritten signature in black ink that reads "Joan Younger Meek". The signature is written in a cursive, flowing style.

Joan Younger Meek, MD, MS, RD, FAAP, FABM, IBCLC
Chair
United States Breastfeeding Committee