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VIA U.S. First-Class Mail
And E-mail to: WICHQSFPD@fns.usd.gov

Patricia N. Daniels
 Director
 Supplemental Food Programs Division
 Food and Nutrition Service
 U.S. Department of Agriculture
 3101 Park Center Drive, Room 528
 Alexandria, Virginia 22302

**Re: Special Supplemental Nutrition Program for Women, Infants, and Children (WIC): Revisions in the WIC Food Packages
 Docket No. RIN 0584-AD77**

Dear Ms. Daniels:

Kellogg Company ("Kellogg") is pleased to provide its comments on the referenced proposed revisions to the criteria used to determine eligibility of food products as part of food packages under the Women, Infants and Children Program ("WIC"). Kellogg, headquartered in Battle Creek, Michigan, is the world's largest breakfast producer, primarily through its leadership as a producer of Ready-To-Eat ("RTE") cereals, including several nutritious RTE cereals that are currently offered to, and are particularly popular with, WIC program participants. As such, we believe that Kellogg is uniquely qualified to provide perspective not only about the nutrition provided by, and ingredients in, cereal products, but also the pivotal role that cereals play in the diets of those consumers the WIC program is designed to benefit – women and small children.

SUMMARY OF KELLOGG POSITION

Kellogg believes that changes to eligibility profiles for WIC-eligible food products, including RTE cereals, should ultimately result in broader – not narrower – availability of nutritious food options to the vulnerable populations served by the program. As currently proposed, a disqualifying minimum whole grain threshold for participating RTE cereals will have just the opposite effect, and, accordingly, will negatively impact the diets of the very populations that WIC seeks to enhance. Indeed, cereals are the only allowable food in the current WIC food packages that specifically target iron deficiency,

which is expressly identified as a pivotal nutrient under the program.¹ Minor modifications to the proposed eligibility criteria – namely adopting an exception for corn- and rice-based RTE cereals that otherwise meet remaining WIC criteria – will remedy this problem without impeding the overall goal of encouraging consumption of nutritious foods, particularly foods consumed as part of the critical breakfast meal.

1. The Current Regulations Ensure Delivery of Nutritious Ready-To-Eat Cereals.

Under current regulations, in order to be eligible for inclusion in WIC food packages, RTE cereals must provide a minimum of 28 mg of iron per 100 grams of dry cereal, while containing no more than 21.2 g of sucrose and other sugars per 100 grams.² These restrictions have ensured that eligible cereals address a key nutritional issue for vulnerable populations served by WIC (iron deficiency). In addition, currently eligible cereals also provide numerous vital vitamins and minerals at “good” or “excellent source” levels, thereby positively contributing to the nutrition profile of participants’ diets without contributing a disproportionate level of calories. It is important to note that there already are RTE cereals that contain substantial quantities of whole grains that also meet the current eligibility criteria, including cereals manufactured by Kellogg.³

2. The Proposed Regulations Maintain Current Restrictions, But Add a Disqualifying Whole Grain Threshold.

Under the proposal, the current eligibility criteria relating to sugar and iron are maintained. However, an additional disqualifying criterion would be added, requiring that eligible cereals also meet the labeling requirements for making a health claim as a “whole grain food with moderate fat content,” as defined by the Food and Drug Administration in its response to the notice of a health claim based on an authoritative statement relating to whole grain foods with moderate fat content and reduced risk of coronary heart disease.⁴ In effect, this proposal would require that, in order to be eligible for inclusion in WIC food packages, a cereal must be composed of at least 51 percent whole grains.⁵ Ostensibly, the purpose of this proposed revision is to make WIC food packages more consistent with the Dietary Guidelines for Americans 2005, which recommends three “ounce-equivalents” of whole grain per day. However, we

¹ See 68 *Fed. Reg.* 53908 (September 15, 2003), at Chart 2.

² See, e.g., 7 C.F.R. §§ 246.10(c)(3)-(c)(7)..

³ For example, KELLOGG’S® MINI-WHEATS® (Frosted, certain varieties), ALL-BRAN® COMPLETE® (Wheat Bran Flakes and Oat Bran Flakes), PRODUCT 19®, SPECIAL K® Protein Plus and KASHI® MIGHTY BITES® each meet current WIC eligibility criteria and contain at least 8 grams of whole grain per serving.

⁴ 71 *Fed. Reg.* 44801 (August 7, 2006).

⁵ See December 9, 2003, notice of Health Claim Notification Submitted by Kraft Foods on August 8, 2003, <http://www.cfsan.fda.gov/~dms/flgrain2.html>.

believe that the effect of the change, if implemented, will be to remove eligibility of nutritious foods that have long played a role in the WIC program and address other aspects of the Dietary Guidelines.

a. A Disqualifying Whole Grain Threshold Is Inconsistent With The Broad Mission of the WIC Program.

Kellogg recognizes that the Dietary Guidelines identify a role for whole grains in an overall diet, and understands that WIC is seeking to address that role in its proposal. However, Kellogg also recognizes that the role of the WIC program is broader than a singular focus on one type of food ingredient. Rather, WIC is intended to comprehensively address the nutritional health of the vulnerable populations served by the program:

*Congress finds that substantial numbers of pregnant, postpartum, and breastfeeding women, infants, and young children from families with inadequate income are at special risk with respect to their physical and mental health by reason of inadequate nutrition or health care, or both. It is, therefore, the purpose of the [WIC] program...to provide... supplemental foods and nutrition education....*⁶

This mandate cannot be accomplished by focusing on whole grain consumption to the exclusion of other vital nutrients. Among the documented nutritional inadequacies determined to exist in the WIC population are inadequate iron and the resulting anemia caused by iron poor diets. Accordingly, among other things, the current WIC food packages were crafted to target this problem with iron-enriched cereal offerings in a sugar-limited format. Indeed, cereals are the only allowable food in the current WIC food packages that specifically target iron deficiency, which is expressly identified as a pivotal nutrient under the program.⁷

It also is important to note that the Dietary Guidelines focus on the importance of a diet of nutrient-dense foods from all food groups, so as to allow consumers to meet nutrition thresholds without consuming too many calories:

Nutrient-dense foods are those foods that provide substantial amounts of vitamins and minerals (micronutrients) and relatively few calories. Foods that are low in nutrient density are foods that supply calories but relatively small amounts of micronutrients, sometimes none at all. The greater the consumption of foods or beverages that are low in nutrient density, the more difficult it is to

⁶ Section 17(a) of the Child Nutrition Act of 1966, 42 U.S.C. § 1786(a).
⁷ See 68 Fed. Reg. 53908 (September 15, 2003), at Chart 2.



consume enough nutrients without gaining weight, especially for sedentary individuals.⁸

The Guidelines go on to document specific “nutrients of concern”:

Based on these considerations, dietary intakes of the following nutrients may be low enough to be of concern for:

- *Adults: calcium, potassium, fiber, magnesium, and vitamins A (as carotenoids), C, and E,*
- *Children and adolescents: calcium, potassium, fiber, magnesium, and vitamin E,*
- *Specific population groups: vitamin B₁₂, iron, folic acid, and vitamins E and D . . .*

Efforts may be warranted to promote increased dietary intakes of potassium, fiber, and possibly vitamin E, regardless of age; increased intakes of calcium and possibly vitamins A (as carotenoids) and C and magnesium by adults; efforts are warranted to increase intakes of calcium and possibly magnesium by children age 9 years or older. Efforts may be especially warranted to improve the dietary intakes of adolescent females in general . . . Breakfast cereal that is fortified with vitamin E is an option for individuals seeking to increase their vitamin E intake while consuming a low-fat diet.⁹

The Guidelines further provide, in relevant part, the following specific recommendations:

Women of childbearing age who may become pregnant. Eat foods high in heme-iron and/or consume iron-rich plant foods or iron-fortified foods with an enhancer of iron absorption, such as vitamin C-rich foods.

Women of childbearing age who may become pregnant and those in the first trimester of pregnancy. Consume adequate synthetic folic acid daily (from fortified foods or supplements) in addition to food forms of folate from a varied diet.

Women and Iron

Based on blood values, substantial numbers of adolescent females and women of childbearing age are iron deficient. Thus, these groups should eat foods high in heme-iron (e.g., meats)

⁸ Dietary Guidelines for Americans 2005, Chapter 2.

⁹ *Id.*

and/or consume iron-rich plant foods (e.g., spinach) or iron-fortified foods with an enhancer of iron absorption, such as foods rich in vitamin C (e.g., orange juice). . .

Women and Folic Acid

Since folic acid reduces the risk of the neural tube defects, spina bifida, and anencephaly, a daily intake of 400 µg/day of synthetic folic acid (from fortified foods or supplements in addition to food forms of folate from a varied diet) is recommended for women of childbearing age who may become pregnant. Pregnant women should consume 600 µg/day of synthetic folic acid (from fortified foods or supplements) in addition to food forms of folate from a varied diet . . .

Special Groups and Vitamin D

Adequate vitamin D status, which depends on dietary intake and cutaneous synthesis, is important for optimal calcium absorption, and it can reduce the risk for bone loss.¹⁰

Many of these nutrients, including iron, Vitamin A, Vitamin B₁₂, Vitamin C, Vitamin D, and folic acid are provided at the "good" or "excellent source" levels by currently eligible RTE cereals in a nutrient-dense vehicle. Cereals eaten with milk further provide a good or excellent source of nine essential nutrients: calcium, Vitamin D, protein, potassium, Vitamin A, Vitamin B₁₂, riboflavin, niacin and phosphorus.

Clearly, before embarking on a government policy intended to increase whole grain consumption, care must be taken not to block eligibility of foods that already are making substantial positive nutrition contributions to the diets of the very vulnerable populations served by the WIC program, consistent with the Dietary Guidelines. We believe that a disqualifying whole grain requirement at any level will negatively impact such diets.¹¹

b. A Disqualifying Whole Grain Threshold Will Eliminate Popular Nutritious RTE Cereals from Inclusion in WIC Food Packages.

Attached as Exhibit 1 is a chart that lists popular RTE cereal brands that meet current WIC criteria, due to their iron and restricted sugar content. All of these cereals make substantial nutritional contributions, including providing numerous vital nutrients at

¹⁰ *Id.*

¹¹ It should also be noted that the Guidelines recommend "choos[ing] fiber-rich fruits, vegetables and whole grains often." *Id.* (*Key Recommendations for the General Population* (emphasis added). Consideration of the proposed unqualified whole grain threshold should also take into account the body of literature on the role of fiber as the benefit of whole grain and the impact of a whole grain threshold that does not include a fiber component on the WIC population.

the "good" or "excellent source" levels. Attached as Exhibit 2 are copies of Nutrition Facts Boxes for several of these cereals.

Should the proposal be adopted, virtually all corn- and rice-based cereals will be eliminated from eligibility for inclusion in WIC packages. Cereals such as KELLOGG'S CORN FLAKES® and KELLOGG'S® RICE KRISPIES® -- two established brands that have been enjoyed by consumers for 100 and 78 years, respectively, and which currently are major participants in the WIC program -- cannot feasibly be reformulated to meet any minimum whole grain threshold while retaining the taste, texture, and appearance that are the essence of these brands. Yet a serving of either of these cereals, as examples, provides a good source of Vitamins A, C, and D, and an excellent source of iron, thiamin, riboflavin, niacin, Vitamin B₆, folic acid, and Vitamin B₁₂. In other words, their respective contribution to a healthful diet is very positive. It simply makes no sense to eliminate them, and other nutritious RTE cereals, from WIC eligibility by imposing a disqualifying whole grain requirement that ignores the other important dietary contributions these products make, consistent with both the WIC program and the Dietary Guidelines.

c. A Disqualifying Whole Grain Threshold Is Inconsistent With WIC Program Goal of Maintaining Choice and Flexibility.

In discussing changes to the various WIC food packages, the agency repeatedly references the flexibility built into the packages to encourage consumption of a variety of healthy foods. For example, with respect to both fruits and whole grain breads, the proposed revised packages permit both variety (for fruit) and substitutions (for whole grain bread) "to increase consumption by accommodating individual and culturally based preferences" (for fruits) and to increase "the likelihood of participant acceptance by accommodating individual taste and cultural preference" (for bread).¹² Yet the proposal does not provide this same flexibility where RTE cereals are concerned.

Corn- and rice-based cereals achieve both the objectives of the WIC program and numerous other recommendations and needs in the Dietary Guidelines. Yet the proposed disqualifying whole grain threshold would eliminate program eligibility of these cereals on the basis of an apparent assumption that there would be a correlative shift to consumption of whole grain cereals -- a result that is contrary to the purpose of the WIC program and the Dietary Guidelines. This result is inconsistent with the flexibility built into the eligibility criteria for other types of foods. And, most important, there is no basis for assuming that this shift will take place. At the very least, it is premature to impose such a restrictive limitation in WIC options without undertaking research to determine and weigh the net impact it could have on the overall health of women and children in the WIC population.

¹² See, e.g., 71 Fed. Reg. 44828 (August 7, 2006).

d. WIC Must Encourage – Not Discourage – Breakfast Consumption.

Any change in WIC eligibility criteria that results in even a potential shift away from breakfast consumption strikes at the very foundation of the WIC program, which is intended to steer our most vulnerable populations toward a sound and more complete diet. There are numerous studies that equate breakfast consumption with improved school performance throughout the day – clearly a vitally important factor for the populations benefiting from the program.¹³ Perhaps just as important as the country attempts to grapple with the problem of obesity both in children and adults, numerous studies equate breakfast consumption with healthier body mass indices (“BMI”). For example, children who consume RTE cereal on a regular basis tend to have a lower BMI compared to children who consume cereal less frequently,¹⁴ skip breakfast, or eat alternative breakfasts containing meat and eggs.¹⁵

As spelled out in detail above, RTE cereals uniquely combine nutrition and convenience, and appeal to a wide variety of tastes. Accordingly, the best way to encourage nutritious breakfast consumption by vulnerable populations, and to prevent shifts to less healthful breakfast options, or worse yet, skipped breakfast, is to preserve and expand nutritious breakfast options, not eliminate some of the most popular options with a proven history of providing sound nutrition in the context of reasonable calorie levels.

3. Whole Grain Consumption Can Be Encouraged Without Restricting Choice by Excepting Corn- and Rice-Based Cereals From The Proposed Disqualifying Whole Grain Threshold.

Whole grains can be found in a variety of food products eaten throughout the day, including cereals, breads, baked goods, rice products, etc. WIC food packages certainly can accommodate a variety of food products that contain whole grain, including some RTE cereals. However, the agency must not lose sight of the fact that the WIC program primarily seeks to provide nutrition supplementation across the board, and many products can contribute to a healthful diet without contributing whole grains. If the agency believes that a disqualifying whole grain threshold should be established for RTE cereals at any level, then an exception must be provided for corn- and rice-based cereals that otherwise meet the restrictions applicable to RTE cereals. In that way, the revisions to the WIC program will open up new nutritious options to vulnerable populations – not take them away and implicitly steer these consumers toward less healthful, and less nutritious eating habits.

¹³ See 105 J. Am. Diet. Assn 743-760 (May 2005) ; J Am Diet Assoc. 2005 Sep;105(9):1383-9; J Am Diet Assoc. 2005 Sep;105(9):1373-82; J Am Diet Assoc. 2003 Dec;103(12):1613-9; J Am Coll Nutr. 2003 Aug;22(4):296-302 .

¹⁴ See 103 J. Am. Diet. Assn 1613-1619 (December 2003).

¹⁵ See, 22 J. Am. Coll. Nutr. 296-302 (August 2003).

CONCLUSION

For the reasons stated, Kellogg commends the efforts of the agency to improve the WIC eligibility criteria, and urges it to provide more – not fewer – options for nutritious food packages serving the unique needs of the participants in the program.

Naturally, Kellogg stands ready to work with the agency in any way that we can to provide additional information or answer questions that will help resolve these important issues.

Respectfully submitted,



Celeste A. Clark

CAC

Attachments

cc: Debra Whitford, Chief
Policy and Program Development Branch
Food and Nutrition Service
USDA
3101 Park Center Drive, Room 528
Alexandria, VA 22302

Exhibit 1

Under the current cereal specifications, the following Kellogg's cereals qualify for inclusion in WIC food packages:

- **COMPLETE® Wheat Bran Flakes**
- **COMPLETE® Oat Bran Flakes**
- **MINI-WHEATS® Frosted Original**
- **MINI-WHEATS® Frosted Bits Size**
- **PRODUCT 19®**
- **KELLOGG'S CORN FLAKES®**
- **CRISPIX®**
- **SPECIAL K®**
- **SPECIAL K® Protein Plus**
- **RICE KRISPIES®**
- **KASHI® MIGHTY BITES™ – Cinnamon**
- **KASHI® MIGHTY BITES™ – Honey Crunch.**

CRISPIX

Nutrition Facts

Serving Size

1 Cup (29 g/1.0 oz)

Amount Per Serving	Cereal with 1/2 cup Vitamins A&D Fat Free	
	Cereal	Milk
Calories	110	150
Calories from Fat	0	0
	% Daily Value**	
Total Fat 0g*	0%	0%
Saturated Fat 0g	0%	0%
Trans Fat 0g		
Cholesterol 0mg	0%	0%
Sodium 210mg	9%	11%
Potassium 35mg	1%	7%
Total Carbohydrate 25g	8%	10%
Dietary Fiber less than 1g	2%	2%
Sugars 3g		
Other Carbohydrate 21g		
Protein 2g		
Vitamin A	10%	15%
Vitamin C	10%	10%
Calcium	0%	15%
Iron	45%	45%
Vitamin D	10%	25%
Thiamin	35%	40%
Riboflavin	35%	45%
Niacin	35%	35%
Vitamin B ₆	35%	35%
Folic Acid	70%	70%
Vitamin B ₁₂	35%	45%
Zinc	10%	15%

* Amount in cereal. One half cup of fat free milk contributes an additional 40 calories, 65mg sodium, 6g total carbohydrates (6g sugars) and 4g protein.

**Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs

	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Potassium		3,500mg	3,500mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

Calories per gram: Fat 9 • Carbohydrate 4 • Protein 4

Ingredients: Milled corn, rice, brown sugar, salt, malt flavoring, baking soda, ascorbic acid (vitamin C), iron, niacinamide, turmeric color, zinc oxide, pyridoxine hydrochloride (vitamin B₆), riboflavin (vitamin B₂), thiamin hydrochloride (vitamin B₁), vitamin A palmitate, folic acid, vitamin B₁₂ and vitamin D

COMPLETE WHEAT BRAN FLAKES

Nutrition Facts

Serving Size

3/4 Cup (29 g/1 1 oz)

Amount Per Serving	Cereal with 1/2 cup Vitamins A&D Fat Free Milk	
	Cereal	Milk
Calories	90	130
Calories from Fat	5	5
	% Daily Value**	
Total Fat 0.5g*	1%	1%
Saturated Fat 0g	0%	0%
Polyunsaturated Fat 0g		
Monounsaturated Fat 0g		
Trans Fat 0g		
Cholesterol 0mg	0%	0%
Sodium 210mg	9%	11%
Potassium 170mg	5%	11%
Total Carbohydrate 23g	8%	10%
Dietary Fiber 5g	20%	20%
Soluble Fiber 1g		
Insoluble Fiber 4g		
Sugars 5g		
Other Carbohydrate 13g		
Protein 3g		
Vitamin A	15%	20%
Vitamin C	100%	100%
Calcium	0%	15%
Iron	100%	100%
Vitamin D	10%	25%
Vitamin E	100%	100%
Thiamin	100%	100%
Riboflavin	100%	110%
Niacin	100%	100%
Vitamin B ₆	100%	100%
Folic Acid	100%	100%
Vitamin B ₁₂	100%	110%
Phosphorus	15%	25%
Pantothenate	100%	100%
Magnesium	10%	15%
Zinc	100%	100%
Copper	6%	8%

* Amount in cereal. One half cup of fat free milk contributes an additional 40 calories, 65mg sodium, 6g total carbohydrates (6g sugars) and 4g protein.

**Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs

	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Potassium		3,500mg	3,500mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

Calories per gram: Fat 9 • Carbohydrate 4 • Protein 4

Ingredients: Whole wheat, wheat bran, sugar, high fructose corn syrup, salt, malt flavoring.

Vitamins and Minerals: sodium ascorbate and ascorbic acid (vitamin C), alpha tocopherol acetate (vitamin E), niacinamide, zinc oxide, reduced iron, calcium pantothenate, pyridoxine hydrochloride (vitamin B₆), riboflavin (vitamin B₂), thiamin hydrochloride (vitamin B₁), BHT (preservative), vitamin A palmitate, folic acid, vitamin B₁₂ and vitamin D.

CORN FLAKES

Nutrition Facts

Serving Size 1 Cup (28g/1.0oz)

Amount Per Serving	Cereal with 1/2 cup Vitamins A&D Fat Free	
	Cereal	Milk
Calories	100	140
Calories from Fat	0	0
	% Daily Value**	
Total Fat 0g*	0%	0%
Saturated Fat 0g	0%	0%
Trans Fat 0g		
Cholesterol 0mg	0%	0%
Sodium 200mg	8%	11%
Potassium 25mg	1%	7%
Total Carbohydrate 24g	8%	10%
Dietary Fiber 1g	4%	4%
Sugars 2g		
Other Carbohydrate 21g		
Protein 2g		
Vitamin A	10%	15%
Vitamin C	10%	10%
Calcium	0%	15%
Iron	45%	45%
Vitamin D	10%	25%
Thiamin	25%	30%
Riboflavin	25%	35%
Niacin	25%	25%
Vitamin B ₆	25%	25%
Folic Acid	25%	25%
Vitamin B ₁₂	25%	35%

* Amount in cereal. One half cup of fat free milk contributes an additional 40 calories, 65mg sodium, 6g total carbohydrates (6g sugars) and 4g protein.

**Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs

	Calories:	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Potassium		3,500mg	3,500mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

Calories per gram: Fat 9 • Carbohydrate 4 • Protein 4

Ingredients: Milled corn, sugar, malt flavoring, high fructose corn syrup, salt,

Vitamins and Iron: iron, niacinamide, sodium ascorbate and ascorbic acid (vitamin C), pyridoxine hydrochloride (vitamin B₆), riboflavin (vitamin B₂), thiamin hydrochloride (vitamin B₁), vitamin A palmitate, folic acid, vitamin B₁₂ and vitamin D. To maintain quality, BHT has been added to the packaging.

RICE KRISPIES

Nutrition Facts

Serving Size 1 1/4 Cup (33 g/1.2 oz)

Amount Per Serving	Cereal with 1/2 cup Vitamins A&D Fat Free	
	Cereal	Milk
Calories	120	160
Calories from Fat	0	0
	% Daily Value**	
Total Fat 0g*	0%	0%
Saturated Fat 0g	0%	0%
Trans Fat 0g		
Cholesterol 0mg	0%	0%
Sodium 320mg	13%	16%
Potassium 40mg	1%	7%
Total Carbohydrate 29g	10%	11%
Dietary Fiber 0g	0%	0%
Sugars 3g		
Other Carbohydrate 26g		
Protein 2g		
Vitamin A	10%	15%
Vitamin C	10%	10%
Calcium	0%	15%
Iron	50%	50%
Vitamin D	10%	25%
Thiamin	25%	30%
Riboflavin	25%	35%
Niacin	25%	25%
Vitamin B ₆	25%	25%
Folic Acid	25%	25%
Vitamin B ₁₂	25%	35%
Phosphorus	4%	15%

* Amount in cereal. One half cup of fat free milk contributes an additional 40 calories, 65mg sodium, 6g total carbohydrates (6g sugars) and 4g protein.

**Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs

	Calories:	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Potassium		3,500mg	3,500mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

Calories per gram: Fat 9 • Carbohydrate 4 • Protein 4

Ingredients: Rice, sugar, salt, high fructose corn syrup, malt flavoring,

Vitamins and Iron: iron, ascorbic acid (vitamin C), niacinamide, pyridoxine hydrochloride (vitamin B₆), riboflavin (vitamin B₂), thiamin hydrochloride (vitamin B₁), vitamin A palmitate, folic acid, vitamin B₁₂ and vitamin D. To maintain quality, BHT has been added to the packaging.

NOV 06 2006



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November 3, 2006

Patricia N. Daniels
Director, Supplemental Food Programs Division
Food and Nutrition Service, USDA
3101 Park Center Drive, Room 528
Alexandria, Virginia 22302

I-124

Re: Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear Ms. Daniels,

Alaska Pacific Seafoods commends USDA's Food and Nutrition service for the proposed rule to revise regulations governing the WIC food package to align the WIC food packages with the 2005 Dietary Guidelines for Americans and current infant feeding practice guidelines of the American Academy of Pediatrics, better promote and support the establishment of successful long-term breastfeeding, provide WIC participants with a wider variety of food, and several other goals.

Alaska Pacific Seafoods believes that the inclusion and authorization of canned salmon in the proposed WIC food package III and VII for women fully breastfeeding is a very positive enhancement of this food package. The inclusion of salmon is consistent with current recommendations and new scientific evidence that seafood consumption, especially fish that naturally contain more oil (e.g., salmon) that are higher in eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA), is desirable for the health of all population groups and life stages, which includes the unique nutritional needs of the WIC target population.

In addition to including canned salmon in packages III and VII women for who are fully breastfeeding up to 1 year postpartum, Alaska Pacific Seafoods recommends the inclusion and authorization of canned salmon for all target groups under WIC Food Package III and IV (i.e., children 1 through 4 years of age), V (i.e., pregnant and partially breastfeeding women – up to 1 year postpartum), and VI (i.e., women, up to 6 months postpartum) because all of these food packages are intended for population groups that would benefit from increased intake of seafood with higher quantitative amounts of EPA/DHA. The tables with a full description of the proposed rule food packages can be found in Attachment A. Our rationale for this recommendation is described herein.

Alaska Pacific Seafoods
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(907) 486-5164

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(206) 726-0343

Pederson Point
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Naknek, Alaska 99633
(907) 246-4461
(907) 246-6657

Sitka Sound Seafoods
329 Katlian Street
Sitka, Alaska 99835
(907) 747-6662
(907) 747-6268

Togiak Fisheries
P.O. Box 30
Togiak, Alaska 99678
(907) 493-5331
(907) 493-5133

On October, 17, 2006, the Institute of Medicine (IOM) of the National Academies, Washington, D.C., released a report "Seafood Choices: Balancing Benefits and Risks," in which the IOM reviewed the evidence on the benefits and risks associated with seafood consumption to help consumers make informed choices and to make recommendations on ways to guide U.S. consumers in making appropriate selections.

In this report, the IOM identified many benefits related to seafood consumption and EPA and/or DHA intake during developmental stages (i.e., pregnancy and/or lactation, infancy and/or childhood) based on clinical trials and epidemiological studies. Some of the potential benefits included: increased duration of gestation; improved infant and child developmental outcomes; cognitive benefits for the children when they were 4 or 5 years of age; benefits for infant and child neurological development; and increased infant visual acuity.

Additionally, the IOM developed seafood consumption guidance for population groups based upon both the benefits and risks of contaminant exposure (e.g., exposure to methylmercury and other contaminants and pollutants in seafood). This guidance indicates that for females who are or may become pregnant or who are breastfeeding and children up to the age of 12 may benefit from consuming seafood, especially those with relatively higher concentrations of EPA and DHA with some limitations as to quantity consumed (i.e., up to 12 ounces/week and up to 6 ounces albacore tuna/week) and avoid large predatory fish (e.g., shark, swordfish, tilefish, or king mackerel). As compared to a many other varieties of seafood, salmon contains the least amount of methylmercury.

Among fish with high EPA/DHA content, salmon is included with those fish that have the highest concentration per serving. Canned salmon contains 0.718g (718mg) EPA (20:5 n-3) and 0.685g (685mg) DHA (22:6 n-3) per 3 ounce (85g) serving. Also, canned salmon contains a variety of other healthful nutrients, such as high-quality protein, calcium, selenium, niacin, vitamins B-6, B-12, and D. Several of these nutrients have been identified in the proposed rule as inadequate in the pregnant, lactating, and non-breastfeeding postpartum women (i.e., protein, calcium, niacin, and vitamin B-6). Saturated fat has been identified as a nutrient with excessive consumption among both children and women. Salmon contains lower amounts of saturated fat than many foods. Additionally, salmon contains only 118 calories per 3 ounce serving, which makes salmon a nutrient dense food. The nutrient content data referred to herein is based on the nutrition profile in Attachment B adapted from: *U.S. Department of Agriculture, Agricultural Research Service, 2006. USDA Nutrient Database for Standard Reference, Release 19.*

Finally, the addition of canned salmon would enhance the variety of foods offered to the WIC target groups and could positively influence life-long dietary choices for both the women and children in the program. *Alaska Pacific Seafoods* can facilitate consumer consumption of canned salmon by providing to WIC a variety of economical, tasty salmon recipes that are easy to prepare by a culturally diverse population. *Alaska Pacific*

Seafoods also will provide consumer education materials regarding the benefits of salmon and seafood in a healthful diet.

Respectfully,

A handwritten signature in black ink, appearing to read "Matthew Moir". The signature is fluid and cursive, with a large initial "M" and a long, sweeping tail.

Matthew Moir
General Manager

Attachment A

Federal Register/Vol. 71, No. 151, Monday, August 7, 2006/Proposed Rules at 44817 - 44819

TABLE 2.—MAXIMUM MONTHLY ALLOWANCES OF SUPPLEMENTAL FOODS FOR CHILDREN AND WOMEN IN FOOD PACKAGES IV, V, VI AND VII

Foods ¹	Children	Women		
	Food package IV: 1 through 4 years	Food package V: Pregnant and partially breastfeeding (up to 1 year postpartum) ²	Food package VI: Postpartum (up to 6 months postpartum) ³	Food package VII: Fully breastfeeding (enhanced), (up to 1 year postpartum) ^{4,5}
Juice, single strength ⁶	128 fl oz	144 fl oz	96 fl oz	144 fl oz
Milk, fluid	16 qt ^{7,8,9,10}	22 qt ^{7,8,11,12}	16 qt ^{7,8,11,12}	24 qt ^{7,8,11,12}
Breakfast cereal	36 oz	36 oz	36 oz	36 oz.
Cheese	N/A	N/A	N/A	1 lb.
Eggs	1 dozen	1 dozen	1 dozen	2 dozen.
Fruits and vegetables ^{13,14}	\$6.00 in cash value vouchers.	\$8.00 in cash value vouchers.	\$8.00 in cash value vouchers.	\$8.00 in cash value vouchers.
Whole wheat bread or other whole grains ¹⁵ .	2 lb	1 lb	N/A	1 lb.
Fish (canned)	N/A	N/A	N/A	30 oz
Legumes, dry ¹⁵	1 lb	1 lb	1 lb	1 lb.
And/or Peanut butter	Or 18 oz	And 18 oz	Or 18 oz	And 18 oz.

TABLE 3.—MAXIMUM MONTHLY ALLOWANCES OF SUPPLEMENTAL FOODS FOR CHILDREN AND WOMEN IN FOOD PACKAGE III

Foods ¹	Children	Women		
	1 through 4 years	Pregnant and partially breastfeeding (up to 1 year postpartum) ²	Postpartum (up to 6 months postpartum) ³	Fully breastfeeding (enhanced), (up to 1 year postpartum) ^{4,5}
Juice, single strength ⁶	128 fl oz	144 fl. oz	96 fl oz	144 fl oz.
WIC Formula ^{7,8}	455 fl oz. liquid concentrate.	455 fl. oz. liquid concentrate.	455 fl. oz. liquid concentrate.	455 fl. oz. liquid concentrate.
Milk	16 qt ^{9,10,11,12}	22 qt ^{9,10,13,14}	16 qt ^{9,10,13,14}	24 qt. ^{9,10,13,14}
Breakfast cereal ¹⁵	36 oz	36 oz	36 oz	36 oz.
Cheese	N/A	N/A	N/A	1 lb.
Eggs	1 dozen	1 dozen	1 dozen	2 dozen.
Fruits and vegetables ^{16,17}	\$6.00 in cash value vouchers.	\$8.00 in cash value vouchers.	\$6.00 in cash value vouchers.	\$8.00 in cash value vouchers.
Whole wheat bread ¹⁸	2 lb	1 lb	N/A	1 lb.
Fish (canned)	N/A	N/A	N/A	30 oz.
Legumes, dry ¹⁹	1 lb	1 lb	1 lb	1 lb.
And/or Peanut butter	Or 18 oz	And 18 oz	Or 18 oz	And 18 oz.

Attachment: B

Fish, salmon, canned, solids with bone and liquid

Refuse: 0% USDA National Nutrient Database for Standard Reference, Release 19 (2006)

NDB No: 15084 (Nutrient values and weights are for edible portion)

Nutrient	Units	1.00 X 3 oz
		85g
Proximates		
Water	g	58.49
Energy	kcal	118
Energy	kJ	495
Protein	g	16.81
Total lipid (fat)	g	5.14
Ash	g	2.21
Carbohydrate, by difference	g	0.00
Fiber, total dietary	g	0.00
Sugars, total	g	0.00
Minerals		
Calcium, Ca	mg	181
Iron, Fe	mg	0.71
Magnesium, Mg	mg	29
Phosphorus, P	mg	280
Potassium, K	mg	277
Sodium, Na	mg	471
Zinc, Zn	mg	0.78
Copper, Cu	mg	0.087
Manganese, Mn	mg	0.017
Selenium, Se	mcg	28.2
Vitamins		
Vitamin C, total ascorbic acid	mg	0.0
Thiamin	mg	0.020
Riboflavin	mg	0.158
Niacin	mg	5.556
Pantothenic acid	mg	0.468
Vitamin B-6	mg	0.255
Folate, total	mcg	13
Folic acid	mcg	0
Folate, food	mcg	13
Folate, DFE	mcg_DFE	13
Vitamin B-12	mcg	3.74
Vitamin B-12, added	mcg	0.00
Vitamin A, IU	IU	48
Vitamin A, RAE	mcg_RAE	14
Retinol	mcg	14
Vitamin E (alpha-tocopherol)	mg	0.54
Vitamin E, added	mg	0.00
Tocopherol, beta	mg	0.00
Tocopherol, gamma	mg	0.00
Tocopherol, delta	mg	0.00
Vitamin D	IU	530
Vitamin K (phylloquinone)	mcg	0.3



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Apple Processors Association

1100 17th ST., NW • 10th FLOOR • WASHINGTON, DC • 20036 • (202) 785-6715 • FAX (202) 331-4212 • www.agriwashington.org
November 3, 2006

Ms. Patricia Daniels, Director
Supplemental Food Programs Division
FNS, USDA
3101 Park Center Drive, Room 520
Alexandria, Virginia 22302

**Re: COMMENTS ON RIN 0584-AD77:
APPLE PRODUCTS IN REVISIONS
TO WIC FOOD PACKAGES**

Dear Ms. Daniels:

Members of the Apple Processors Association (APA), who process quality apple products from fresh whole apples, support the WIC Program and supply high-quality, affordable, and nutritious 100% fresh-pressed apple juice to WIC Program participants. We agree that the *Proposed Rule for Revisions in the WIC Food Packages* will lead to food packages that can better serve the nutritional needs of the diverse population of women and children who currently participate in the WIC program. We applaud USDA's goals to increase fruit and vegetable intake of children and adults. Specifically, APA fully supports the inclusion of canned, frozen, and dried fruits and vegetables, which may be more economical, more accessible, and more easily stored by WIC participants. APA members oppose significant reduction of juice in any package except Package I.

As USDA prepares for the final rule on the revisions, APA offers comments on infant feeding options (as requested on page 44795 of the Federal Register) and implementation of fresh fruit and vegetable options (as requested on page 44798).

I. Comments on Provision of Infant Food Fruits, Vegetables, and Meats

1. **APA supports the elimination of juice in Food Package I** for infants less than six months of age, consistent with recommendations from the American Academy of Pediatrics (AAP), which emphasizes breastfeeding as the primary source of nutrition for the first 6 months.

2. **APA opposes eliminating juice in Food Package II** for infants six to 12 months of age, and would propose that state WIC Directors have the choice of providing fruit juice or infant fruits in Food Package II. In Exhibit B, *Foods in the Current WIC Food Packages to be Deleted or Reduced in the Proposed Food Packages*, USDA explains the rationale for deleting juice for infants four to 11.9 mo of age by citing the American Academy of Pediatrics recommendation: “allow no more than four to six fl. oz/day for infants above the age of 6 months.” This table also notes “for infants age six to 11.9 mo, fruit juice has no nutritional benefit over whole fruit.” Clearly, the AAP recommendations would allow fruit juice in the amounts currently permitted in Package II. To provide more flexibility, the proposed rule should permit WIC providers in counsel with the WIC participants to decide whether the individual infant aged six to 11.9 months should receive fruit juice or infant fruit.

3. **While APA supports the nutritional goal of introducing complementary foods to infants from six to 11.9 months, we believe that some fruits, not specified for infants, such as applesauce, could be used more economically than applesauce that is specified for infants.** The state and local WIC offices should be encouraged to include the forms of fruits and vegetables that can provide the greatest economical value and that meet WIC participant preferences.

Significant cost savings may be realized by permitting any sugar-free or natural applesauce in four-oz. single-serve packages, in place of specifying applesauce packaged specifically for infant food. According to a report prepared by the Center for Science in the Public Interest,¹ applesauce that is not packaged for infants offers the same nutrition at a much lower cost. Applesauce in any form is well-accepted by infants. A cursory search on an online supplier of groceries found that a brand name infant applesauce sold at \$0.86 per oz.,² whereas regular applesauce available in four-oz. servings sold at \$0.10 per oz.³ While these prices may not be representative of availability across the country, the *price difference* is likely to be stable.

II. Comments on the Provision of Fruits and Vegetables for Packages IV through VII

1. **APA supports the inclusion of fruits and vegetables as eligible purchases with the cash-value food instrument for children and women, and specifically the acceptability of canned, frozen and dried fruits and vegetables.** APA appreciates and fully supports the language, which specifies the inclusion of any variety of canned fruits, including applesauce.⁴

APA concurs with the USDA Proposed Rule that processed fruits and vegetables can be substituted when fresh produce is limited, and when they better accommodate WIC participant preferences.⁵ For many low-income families residing in neighborhoods with few grocery stores, accessing fresh fruits and vegetables is not always convenient or easy. Products such as applesauce and dried apple slices are affordable, convenient sources of vitamin C, potassium, fiber and antioxidants.⁶ APA agrees that WIC recipients benefit from a variety of forms of fruits and vegetables depending on their living situations and that the cash-value instrument should afford maximum flexibility for the participant while minimizing the paperwork for the state WIC agency.

2. **APA strongly encourages fulfilling the recommendation from the IOM Report to provide cash-value food instruments for fruits and vegetables of \$8.00 per month for children in Food Package IV and \$10.00 per month for women in Packages V through VII.** In the Proposed Rule, the figures of \$6.00 per month for children and \$8.00 for women are specified to ensure cost neutrality. It is particularly important to restore the overall value of the Food Package for children aged one to five years, who need to establish good food habits consistent with the recommendations of the *Dietary Guidelines, 2005*⁷ and *MyPyramid*⁸ APA believes that some costs savings might be able to be found to permit the added fruit and vegetables to meet the needs of older children and women.

3. **APA supports the guidelines proposed for juice in Food Packages IV through VII.** Specifically:

- APA concurs with the nutrient specifications for eligibility: 100 percent unsweetened fruit/vegetable juice or blends of these juices, containing a minimum of 30 milligrams

of vitamin C per 100 milliliters of juice, and juices fortified with other nutrients which may be allowed at the State agency's option.⁹ Members of APA, which include manufacturers of apple juice that meet the highest standards for nutrition and safety, strongly believe that WIC participants should benefit from these criteria for healthy choices.

- **APA supports the specifications in the proposal to allow substitution of shelf-stable and frozen concentrated juices for single strength juice, and to allow combinations of single strength and concentrated juices, as noted on page 44802 of the *Federal Register*.** This specification should restate the intent of current specifications and clarify that any form of the juice be made from juice of the whole fruit or from domestic concentrate. This inclusive language provides state agencies with needed flexibility to meet the needs for convenience and ease of access to their participants, while helping contain costs.
- **APA supports the language requiring that juices be pasteurized.** Food safety should remain a high priority for all federal food programs to protect the participants.

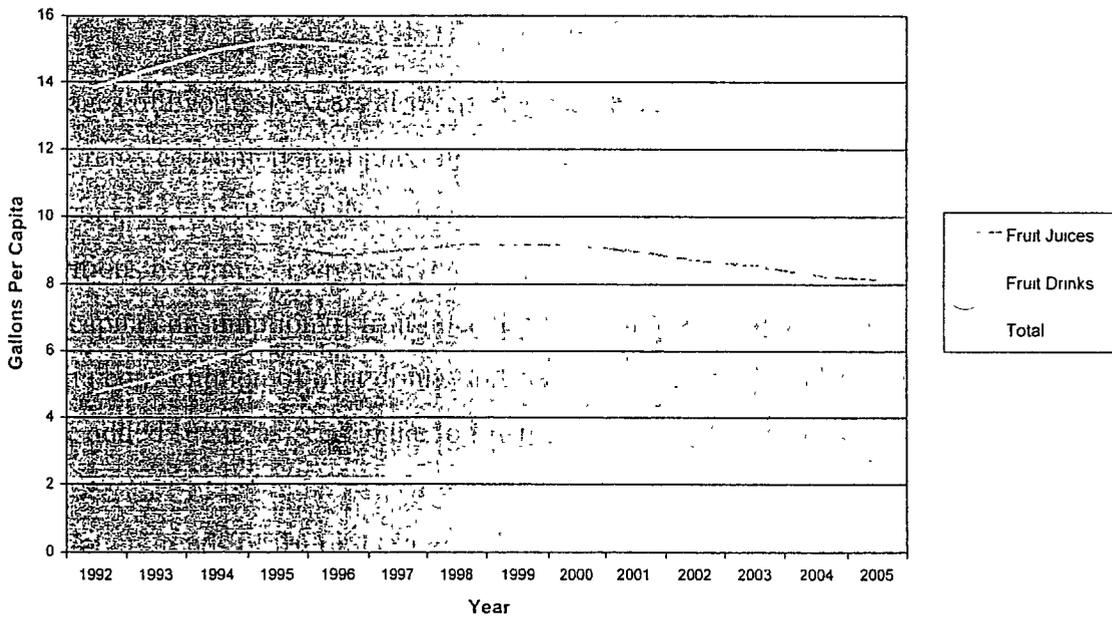
4. **Regarding the amount of fruit and vegetable juice:**

- **APA supports recommendations for the quantity of fruit and vegetable juice in Food Packages IV-VII that are consistent recommendations by the American Academy of Pediatrics,¹⁰** APA agrees that the WIC food packages should strive to balance the amount of juice with the addition of a wider variety of fruits and vegetables for children and adults receiving Food Packages IV through VII. APA wishes to clarify that national food consumption data do not suggest that consumption of fruit juice has contributed to the epidemic of obesity among children or adults. The lack of association between juice consumption and BMI in young children has been confirmed in analysis of the Continuing Survey of Food Intakes by Individuals, which found that children who consumed more than 12 ounces of fruit juice daily were actually taller and had lower BMI than those who consumed less juice.¹¹ Additionally, longitudinal studies of children in the U.S.¹² and Germany¹³ between

the ages of two to six years also reported that there was no association between children's consumption of juice and weight. The U.S. study noted, however, that consumption of 100% juice declined as children got older, while their intake of less nutritious beverages increased. Disappearance data also indicates that the growth in per capita consumption of fruit juice has fallen significantly below the growth in per capita consumption of fruit drinks and ades, which contain relatively little juice and have added sugar, as seen in the following figure.

Consumption trends of fruit juice and fruit drinks/ades by children and adolescents:

**U.S. Fruit Beverage Market Segments Per Capita Consumption
1992-2005**



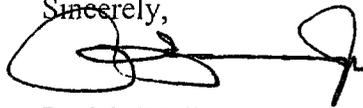
Source: Beverage Marketing Corporation; Florida Department of Citrus

Conclusion

The Apple Processors Association commends the USDA for the inclusion of fruits and vegetables in a variety of forms for children and women in the revised WIC food packages. APA appreciates the requirement for cost neutrality in the revisions, and urges USDA to consider options for providing the maximum amount of cash-value instruments for fruits and vegetables recommended in the IOM Report, especially for children ages one to five years.

PSW/kb

Sincerely,



Paul S. Weller, Jr.
President

¹ Stallone DH, Jacobson M. Cheating babies: nutritional quality and cost of commercial baby food. Executive summary. 1995. Accessed at <http://www.cspinet.org/reports/cheat1.html> on August 22, 2006.

² Accessed on August, 2006 at http://www.walgreens.com/store/product.jsp?id=prod393507&CATID=100367&skuid=sku393508&ec=bz_632389

³ Accessed August, 2006 at http://www.buythecase.net/aisle/100/fruits/?engine=adwords!4455&keyword=*fruit+snacks*&match_type

⁴ *Federal Register* Vol. 71, No. 151, Monday, August 7, 2006, page 44797.

⁵ *Ibid.*, page 44798

⁶ USDA National Nutrient Database for Standard Reference, Release 18. Accessed at <http://www.nal.usda.gov/fnic/foodcomp/search/> August, 2006.

⁷ Health and Human Services and United States Department of Agriculture. Dietary Guidelines for Americans 2005. <http://www.health.gov/dietaryguidelines/dga2005/document/html/executivesummary.htm>. Accessed August 2006.

⁸ USDA CNPP. MyPyramid Food Intake Patterns. Accessed at http://www.mypyramid.gov/downloads/MyPyramid_Food_Intake_Patterns.pdf August, 2006.

⁹ *Federal Register*, op cit. page 44801.

¹⁰ American Academy of Pediatrics, Committee on Nutrition. The use and misuse of fruit juice in pediatrics. *Pediatrics*. 2001;107(5):1210-1213.

¹¹ USDA CNPP. Is fruit juice dangerous for children? Nutrition Insight 1. March, 1997. Accessed at <http://www.cnpp.usda.gov/Publications/NutritionInsights/Insight1.pdf> August, 2006.

¹² Skinner JD and Carruth BR. A Longitudinal study of Children's Juice Intake and Growth: The Juice Controversy Revisited. *J Am Diet Assoc*. 2001; 101: 432-437.

¹³ Alexy U, Sichert Hellert W, Kersting M, et al. Fruit juice consumption and the prevalence of obesity and short stature in German preschool children: results of the DONALD study. *J Pediatr Gastroenterol Nutr* 1999; 29:343-349.