REMARKS OF SENATOR BOB DOLE AMERICAN DIETETIC ASSOCIATION LEGISLATIVE CONFERENCE WASHINGTON, D. C. MONDAY, MARCH 21, 1977

I DEEPLY APPRECIATE THE INVITATION TO SPEAK WITH YOU TODAY, TO INTENSIFY THE COMMUNICATION BETWEEN CONGRESS AND THE RESPONSIBLE FORCES WITHIN THE DIETETICS AND NUTRITION COMMUNITY.

OUR DISCUSSIONS ARE COMING NONE TOO SOON, THEY SHOULD NOT BE MINIMIZED AS PREMATURE OR UNWARRANTED, I CAN TELL YOU THAT CONGRESS, AS WELL AS THE PUBLIC, IS LITERALLY CLAMORING FOR SOUND NUTRITION ADVICE, FOR PRACTICAL ADVICE ON WHAT TO EAT TO STAY HEALTHY.

- HEALTH AND NUTRITION INTERRELATED -

IF I HAD TO CHARACTERIZE THIS NEW INTEREST, THIS NEW NUTRITIONAL CONSCIOUSNESS, I WOULD DO IT THIS WAY: PEOPLE ARE REALIZING THAT WHAT WE EAT AND HOW HEALTHY WE ARE ARE TWO TOTALLY INTERTWINED FACTORS. --7-

THERE IS BEGINNING A SHIFT IN PUBLIC PERCEPTION AND PUBLIC POLICY -- A SHIFT AWAY FROM EVER-SPIRALLING EXPENDITURES FOR CURATIVE HEALTH MEASURES TOWARDS A MORE MODEST BUT IMPORTANT INVESTMENT IN PREVENTION -- WITH SOUND NUTRITIONAL PRACTICES BEING THE CORNERSTONE OF THAT PROGRAM OF PREVENTION.

I BELIEVE PEOPLE WILL INCREASINGLY PRESS DOCTORS AND HEALTH PROFESSIONALS TO TAKE THE TIME TO KNOW MORE AND CARE MORE ABOUT NUTRITION.

- CONSUMER INTEREST BUILDING -

CONSUMER CONCERN IS GROWING OVER WHAT HAS BEEN ADDED TO FOOD -- TO COLOR IT, PRESERVE IT, REFINE IT, AND FLAVOR IT.

THE AMERICAN CONSUMER IS DEMANDING INFORMATION ABOUT THE NUTRITIONAL WORTH OF ALL THE PRODUCTS FOUND IN THE SUPERMARKET: Dollar value at the store is coming to mean nutritional Value. IN SHORT, WHAT I'M SAYING TO YOU, AND WHAT HUNDREDS OF DIETITIANS AND NUTRITIONISTS HAVE SAID TO ME AT HEARINGS, IN CORRESPONDENCE AND IN PRIVATE MEETINGS, IS THAT NUTRITIONAL CONSIDERATION MUST BECOME AN IMPORTANT ASPECT OF HEALTH AND AGRICULTURE POLICY EVALUATIONS.

- CAUSES OF DEATH CONNECTED TO DIET -

STATISTICS PRESENTED DURING THE DIET AND HEALTH HEARINGS REVEAL THE BASIS FOR GROWING PUBLIC INTEREST IN NUTRITION.

Six of the leading causes of death in the U. S. have been connected to the diet: heart disease, stroke and hypertension, cancer, diabetes, arteriosclerosis and cirrhosis of the liver. Bad nutrition contributes to literally hundreds of thousands of unnecessary early deaths each year. ARTERIOSCLEROTIC DISEASE, DIABETES, HYPERTENSION, AND CANCER ACCOUNT FOR ALMOST TWO-THIRDS OF ALL DEATHS IN THE U.S. TODAY, AND HEART DISEASE ALONE KILLED ONE-THIRD OF ALL THOSE WHO DIED IN THE U.S. IN 1973.

I WOULD LIKE TO EMPHASIZE THAT OUR DIET, WHICH AFFLUENT PEOPLE GENERALLY CONSUME, IS EVERYWHERE ASSOCIATED WITH A SIMILAR DISEASE PATTERN -- HIGH RATES OF HEART DISEASE, CERTAIN FORMS OF CANCER, DIABETES, AND OBESITY.

THESE ARE THE MAJOR CAUSES OF DEATH AND DISABILITY IN THE UNITED STATES. THESE SO-CALLED DEGENERATIVE DISEASES OBVIOUSLY BECOME MORE IMPORTANT NOW THAT INFECTIOUS DISEASES ARE, RELATIVELY SPEAKING, UNDER GOOD CONTROL. - DIET A MAJOR CONTRIBUTING FACTOR -

These diseases undoubtedly have complex origins. I know it isn't correct, strictly speaking, to say that they are caused by malnutrition. But we can say that an inappropriate diet is a contributing cause. Our genetic make-up also contributes -- not all people are equally susceptible.

Yet those who are genetically susceptible, most of us, are those who would profit most from an appropriate diet. And diet is one of the things that we can change if we want to.

- DIET TOO RICH -

SUBSTANTIAL AMOUNTS OF TESTIMONY RECEIVED BY THE NUTRITION COMMITTEE INDICATE THE DIET OF AMERICANS HAS BECOME TOO RICH --RICH IN SOURCES OF SATURATED FAT AND CHOLESTEROL, AND RAW SUGAR. Some who hold differing views will be testifying before our Committee later this week. Their testimony is welcome, and I AM CONFIDENT WILL ADD TO OUR UNDERSTANDING OF THIS COMPLEX ISSUE. - FAT AND CHOLESTEROL CONSUMPTION UP -

BUT REGARDLESS OF THE CONCLUSIONS THAT ARE DRAWN BY VARIOUS WITNESSES, THE FACT REMAINS THAT TOTAL SUGAR USE HAS REMAINED RELATIVELY CONSTANT FOR A NUMBER OF YEARS. HOWEVER, IT SHOULD BE EMPHASIZED THAT OUR TOTAL FOOD CONSUMPTION HAS FALLEN EVEN THOUGH WE STILL EAT TOO MUCH RELATIVE TO OUR NEEDS. THUS, THE PROPORTION OF THE TOTAL DIET CONTRIBUTED BY FATTY AND CHOLESTEROL-RICH FOODS AND BY REFINED FOODS HAS RISEN. WE MIGHT BE BETTER ABLE TO TOLERATE THIS DIET IF WE WERE MUCH MORE ACTIVE PHYSICALLY, BUT WE ARE A SEDENTARY PEOPLE. WE SIT TOO MUCH, EXERCISE TOO LITTLE.

THERE ARE PEOPLE WHO WILL SAY WE HAVE NOT PROVEN OUR POINT; WE HAVE NOT DEMONSTRATED THAT DIETARY MODIFICATIONS WILL YIELD THE HEALTH DIVIDENDS EXPECTED. - 7 -

I would point out to those people that the diet we eat today was not planned or developed for any particular purpose. It is a happenstance related to our affluence, the productivity of our farmers and the activities of our food industry. The current situation is no one's fault. No one planned it. Yet, the risks associated with eating this diet are demonstrably large.

- No RISKS ASSOCIATED WITH IMPROVING DIET -

I THINK THE QUESTION TO BE ASKED, THEREFORE, IS NOT WHY SHOULD WE CHANGE OUR DIET, BUT WHY NOT? WHAT ARE THE RISKS ASSOCIATED WITH EATING LESS FAT, LESS SATURATED FAT, LESS CHOLESTEROL, LESS SUGAR, LESS SALT, AND MORE FRUITS, VEGETABLES, UNSATURATED FAT AND CEREAL PRODUCTS -- ESPECIALLY WHOLE GRAIN CEREALS. THERE ARE NONE THAT CAN BE IDENTIFIED, AND IMPORTANT BENEFITS CAN BE EXPECTED.

HEART DISEASE, CANCER, DIABETES AND HYPERTENSION ARE THE DISEASES THAT KILL US. THEY ARE EPIDEMIC IN OUR POPULATION. WE CANNOT AFFORD TO TEMPORIZE. - DIET CHANGES REDUCE HEALTH CARE COSTS -

WE ARE AT THE POINT WHERE REASONABLE PEOPLE CAN, AND SHOULD, MAKE THE PUBLIC POLICY DECISIONS THAT ARE SUGGESTED BY THE EVIDENCE OUTLINED. WE MUST ACT SOON, IF FOR NO OTHER REASON, THAN WE CANNOT CONTINUE TO POUR GREATER AND GREATER PROPORTIONS OF THE GROSS NATIONAL PRODUCT INTO HEALTH CARE.

Over the last decade total health care spending has increased at an average annual rate of almost 12 percent, rising from \$42.1 billion in Fiscal Year 1966 to \$118.5 billion in Fiscal Year 1975.

HEW IN ITS "FORWARD PLAN" ESTIMATES THAT HEALTH CARE SPENDING WILL APPROXIMATE \$230 BILLION BY 1980. THIS ASTOUNDING FIGURE EXCEEDS THE ENTIRE GROSS NATIONAL PRODUCT OF CANADA. IN 1966, PER CAPITA SPENDING FOR HEALTH CARE WAS \$200 PER PERSON. BY 1975, IT REACHED \$550; AND IT COULD EXCEED \$1,000 BY 1980. HEALTH COSTS INCREASE ONE BILLION DOLLARS PER MONTH. By 1980, no one will be able to afford illness. Almost no one can afford it now. And even if we could pay this medical bill, experts tell us there are only marginal improvements projected in the nation's health if we continue the present emphasis on crisis-oriented, curative health systems.

ON THE OTHER HAND, AT PRESENT WE ARE SPENDING ONLY 5 TO 10 PERCENT OF THE HEALTH CARE DOLLAR ON PREVENTIVE HEALTH CARE PROGRAMS.

WHY NOT MAKE AT LEAST A MODEST INVESTMENT NOW IN THE RELATIVELY UNDERDEVELOPED FIELD OF PREVENTIVE HEALTH CARE, BEFORE WE ARE OVERTAKEN BY THIS APPARENTLY OPEN-ENDED EXPENDITURE RESULTING FROM THE EMPHASIS ON CURATIVE HEALTH CARE MEASURES? - ACTION NEEDED -

AND WHY, AT THE FEDERAL, STATE, AND LOCAL LEVEL, SHOULDN'T WE MAINTAIN THE FOCUS ON NUTRITIONAL NEEDS, TO ENCOURAGE ACCESS TO HEALTHY FOODS, AND DIRECT PEOPLE AWAY FROM SWEET SOFT DRINKS, HIGH SUGAR CEREALS, CANDIES, CAKES, AND HIGH CHOLESTEROL FOODS?

Let me tell you what I think the Federal Government can and should begin to do to return America to a more prudent and therefore, healthier, diet:

- HEALTH CONSIDERATIONS IMPORTANT TO PRODUCERS -

First of all, we can stop talking about producers and consumers as if their interests are always antithetical. Farmers are consumers too. Growing consumer interest in nutrition will encourage food producers and processors to put health considerations into growing, pricing, and marketing policies. Our food producers and processors have proven to be extremely resourceful. As American eating patterns change, food production and processing will also change. Our task, therefore, is to give the consumer all the information he needs to make a wise dieting decision. The industry will follow the consumer. The education process has begun. But much more needs to be done.

- EXPANDED FUNDING FOR NUTRITION EDUCATION -

AT THE FEDERAL LEVEL, FOR RELATIVELY MINOR AMOUNTS OF MONEY, WE CAN PRESS FOR LEGISLATION TO TEACH NUTRITION EDUCATION TO SCHOOLCHILDREN, TO EXPAND NUTRITIONAL TRAINING IN MEDICAL SCHOOLS SO THAT DOCTORS BECOME LESS RELIANT ON DRUGS AND MORE RELIANT ON FOOD, WE CAN UPDATE AND EXPAND OUR SURVEILLANCE AND MONITORING SYSTEM SO THAT WE HAVE A MORE ACCURATE AND TIMELY IDEA OF WHAT OUR HOUSEHOLDS ARE CONSUMING, AND WHAT IT'S DOING TO PEOPLE'S HEALTH. - DIETARY COUNCELLING COVERED BY NATIONAL HEALTH INSURANCE -

We can act to appropriately include dietary counselling as part of our health insurance programs. I know you have supported and fought for this legislation in recent years, and I think it makes sense. If we can pay for every kind of curative crisis care, we surely should pay for some preventive resources, like counselling. Once hypertension, diabetes and heart disease -- all diet-related -- are manifest, there is very little that medical service can do to return a person to normalcy. We've got to recognize that fact in our federal policies, and pay people like yourselves to educate and counsel others before disaster starts.

- INTER-AGENCY TASK FORCE -

LASTLY, I'D LIKE TO PLAY-OFF YOU AN IDEA THAT IS CURRENTLY BEING SERIOUSLY CONSIDERED BY THE STAFF OF THE NUTRITION COMMITTEE, AT THE REQUEST OF SOME OF ITS MEMBERS. That is, the establishment of an inter-agency task force designed, at the federal level, to open a dialogue between agriculture and health experts and officials, so that dietary information can be available and utilized in overall federal policy formulation. Through education, health considerations can become a part of our production and marketing structure, as well as improve our current food programs, but we must first sit down and educate each other. These dietary goals will be meaningless unless we put them into practice. Of course, it is my hope that such a task force would regularly draw on advice from the American Dietetic Association.

- No SIMPLE ANSWERS -

BUT I ABSOLUTELY DO NOT WANT TO LEAVE YOU WITH THE IMPRESSION THAT IMPORTANT CHANGES IN NATIONAL DIETARY PATTERNS COULD OR SHOULD BE DICTATED ONLY AT THE FEDERAL LEVEL. THE OLD ADAGE THAT YOU CAN LEAD A HORSE TO WATER, BUT YOU CAN'T MAKE HIM DRINK, TEACHES US THAT NUTRITION GOALS CANNOT BE DICTATED. A RECENT REPORT OF THE SCHOOL LUNCH PROGRAM REVEALED THAT MILLIONS OF DOLLARS OF NUTRITIOUS FOOD ARE BEING WASTED ANNUALLY, LARGELY BECAUSE IT IS NOT BEING PREPARED PROPERLY OR BECAUSE IT ISN'T AS TASTY AS THE LESS NUTRITIOUS ITEMS. IN A FREE SOCIETY WE CANNOT DICTATE WHAT THE PUBLIC EATS, BUT WE MUST CREATE AN AWARENESS SO THEY CAN AND WILL BECOME NUTRITION CONSCIOUS ON THEIR OWN. You are equally uniquely well-positioned to press for nutrition education programs, based primarily on health considerations for your children. States are already doing more than the Federal Government in this area, anyway. You've just got to make sure that schools understand their obligation to use the federal dollar to teach good food habits, Not just place supposedly nutritious meals in front of students and walk away,

THE POPULARITY OF NUTRITIONAL HEALTH ISSUES, WHILE PROVIDING US WITH AN OPPORTUNITY TO INFLUENCE HEALTH HABITS IN A WAY WE NEVER HAVE BEFORE, ALSO OPENS THE DOOR TO OTHERS.

- CATALYSTS -

DIETITIANS AND NUTRITIONISTS HAVE TO BECOME CATALYSTS FOR CHANGE, IF YOU DON'T DO IT, SOMEONE ELSE WILL -- SOMEONE LESS WELL-INFORMED -- THE FOOD FADDISTS, THE MIRACLE CURE WORKERS, THE FAST-BUCK ARTISTS, ARE ALL READY TO FILL THE VACUUM CREATED BY NUTRITIONAL IGNORANCE IN THIS COUNTRY.

I THINK YOU HAVE TO COME TO GRIPS WITH THE POPULARITY OF NUTRITION ISSUES WITHIN OUR COUNTRY, AND FACE UP TO YOUR RESPONSIBILITY. SPEAK OUT, MAKE YOURSELVES AVAILABLE TO SCHOOL BOARDS, CITY COUNCILS, AND STATE LEGISLATURES, MAKE YOURSELVES AVAILABLE TO US IN THE AGRICULTURE COMMITTEE.

The challenge is for all of us to constructively harness the energy and interest in the country for nutritional information and direction. I consider this morning to be a very positive step in the right direction. We're getting to know each other, and I hope now you have a sense of my concerns, and some of the things I'd like to see done. I BELIEVE THESE ARE EXTRAORDINARY TIMES IN THE SENSE THAT MANY OF THE RESOURCES WE HAVE TAKEN FOR GRANTED, LIKE FOOD, NOW MUST BE MANAGED WITH MORE CONCERN. WE CAN NO LONGER AFFORD PATCHWORK FOOD POLICIES, UNINFORMED BY FORETHOUGHT AND AN APPRECIATION FOR THEIR CONSEQUENCES TO NUTRITIONAL HEALTH.

Our food policy has been confused and unpredictable BECAUSE WE HAVE FAILED TO ESTABLISH A PRINCIPLE, A COHERENCE, BY WHICH OUR ACTIVITIES IN FOOD AND NUTRITION SHOULD BE GOVERNED.

I BELIEVE WE KNOW NOW WHAT THAT GUIDING PRINCIPLE SHOULD BE: FOOD POLICIES AND PROGRAMS MUST BE MEASURED FIRST BY THE DEGREE TO WHICH THEY CONTRIBUTE TO THE NATION'S NUTRITIONAL HEALTH,

WITH YOUR HELP AND SUPPORT, I BELIEVE WE CAN HELP CREATE FOR ALL AMERICANS AN APPROPRIATE NUTRITIONAL ATMOSPHERE --ONE CONDUCIVE TO IMPROVEMENT IN THE HEALTH AND QUALITY OF LIFE OF ALL OF OUR PEOPLE.