



GLOBAL ORGANIZATION FOR EPA AND DHA OMEGA-3S

October 23, 2019

Kristin Koegel  
USDA Food and Nutrition Service  
Center for Nutrition Policy and Promotion  
3101 Park Center Drive, Room 1034  
Alexandria, VA 22302

Submitted electronically via [www.regulations.gov](http://www.regulations.gov)

RE: Docket No. FNS-2019-0001: Dietary Guidelines Advisory Committee

Dear Dietary Guidelines Advisory Committee:

GOED, the Global Organization for EPA and DHA Omega-3s, is a trade association representing 170+ companies worldwide that are active in the EPA and DHA omega-3 industry. GOED's membership includes all segments of the omega-3 supply chain from fishing and seafood companies to refiners, supplement manufacturers, food and beverage marketers and pharmaceutical companies. GOED's members agree to adhere to product quality and ethical standards that represent the benchmark for quality in the omega-3 market. GOED's mission is to increase global consumption of EPA and DHA and ensure that our members produce quality products that consumers can trust.

GOED thanks the Dietary Guidelines Advisory Committee (DGAC) for the opportunity to provide written comments, which are specific to the systematic review protocol to be used by the Pregnancy and Lactation Subcommittee to answer the following question: *What is the relationship between omega-3 fatty acids from supplementation and/or fortified foods consumed before and during pregnancy and lactation and specific health outcomes?*

As mentioned previously in our 24 July 2019 comments, GOED encourages the inclusion of preterm and early preterm birth as outcomes, which are clearly in scope, because this Subcommittee is addressing another question (i.e. *What is the relationship between dietary patterns consumed during pregnancy and gestational age at birth?*) which includes gestational age at birth. Last November, an updated Cochrane Review<sup>1</sup> of 70 randomized controlled trials (RCTs), involving almost 20,000 women, reported that O-3 LCPUFA interventions (supplementation or food additions) during pregnancy reduce the risk of preterm- and early preterm birth by 11% and 42%, respectively. Such risk reductions are of public health relevance, particularly given that the documented benefit of DHA for reducing early preterm birth could save the U.S. healthcare system up to USD 6 billion.<sup>2</sup>

---

<sup>1</sup> Middleton P, Gomersall JC, Gould JF, Shepherd E, Olsen SF, Makrides M. Omega-3 fatty acid addition during pregnancy. *Cochrane Database Syst Rev.* 2018; 15;11:CD003402. <https://www.ncbi.nlm.nih.gov/pubmed/30480773>

<sup>2</sup> Shireman TI, Kerling EH, Gajewski BJ, Colombo J, Carlson SE. Docosahexaenoic acid supplementation (DHA) and the return on investment for pregnancy outcomes. *Prostaglandins Leukot Essent Fatty Acids.* 2016;111:8-10.



GLOBAL ORGANIZATION FOR EPA AND DHA OMEGA-3S

For all of the health outcomes, the intervention/exposure and comparator of omega-3 fatty acids should be further clarified as ALA, EPA and DHA so that studies looking at ALA are not lumped together with studies looking at EPA and DHA.

Once again, GOED thanks you for the opportunity to provide comments. We look forward to watching the DGAC's progress on this important work.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Harry B. Rice', is written over a faint, light blue circular watermark or seal.

Harry B. Rice, Ph.D.  
Vice-President, Regulatory & Scientific Affairs