An In-Depth Look at the 2025-2030 Dietary Guidelines for Americans

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WEST VIRGINIA AND ANNUAL MEETING

APRIL 4, 2025

Disclosures

- Sponsored by The Beef Checkoff
- Ambassador, National Dairy Council
- Advisory Board Member, Dannone's Essential Dairy and Plant-Based Board
- Nutrition partner, Tru Niagen
- Nutrition partner, Jarrow Formulas
- Nutrition partner, Grain Foods Foundation

Learning Objectives

Upon successful completion of this course, the participant should be able to:

1) Describe the evidence-based process used to create and update the Dietary Guidelines for Americans (DGAs).
2) Identify and summarize the updates published in the 2020-2025 DGAs and the proposed changes in the 2025-2030 DGAC report.
3) Create and share actionable healthful eating messages with clients based on the DGAs.

Part 1:

GOALS OF THE DIETARY GUIDELINES

The Reality

- **6 in 10 Americans** live with at least one chronic disease (i.e. heart disease/stroke, cancer, diabetes).
- **4 in 10 Americans** have 2+ chronic conditions.
- **>70% of Americans** are overweight or obese
- The increasing prevalence of overweight and obesity at young ages is of concern
  - Effects the current health of children
  - Risk of persistent overweight or obesity into adulthood

The Reality

- Food insecurity and lack of access to affordable healthy food is a persistent problem:
  - In 2018, **>37 million people, including 6 million children** were uncertain of having or unable to acquire enough food to meet their needs.
  - Certain populations are disproportionately affected:
    - Low-income
    - Black, non-Hispanic and Hispanic households
    - Households with young children
    - Households headed by a single woman or man

The Purpose of the DGAs

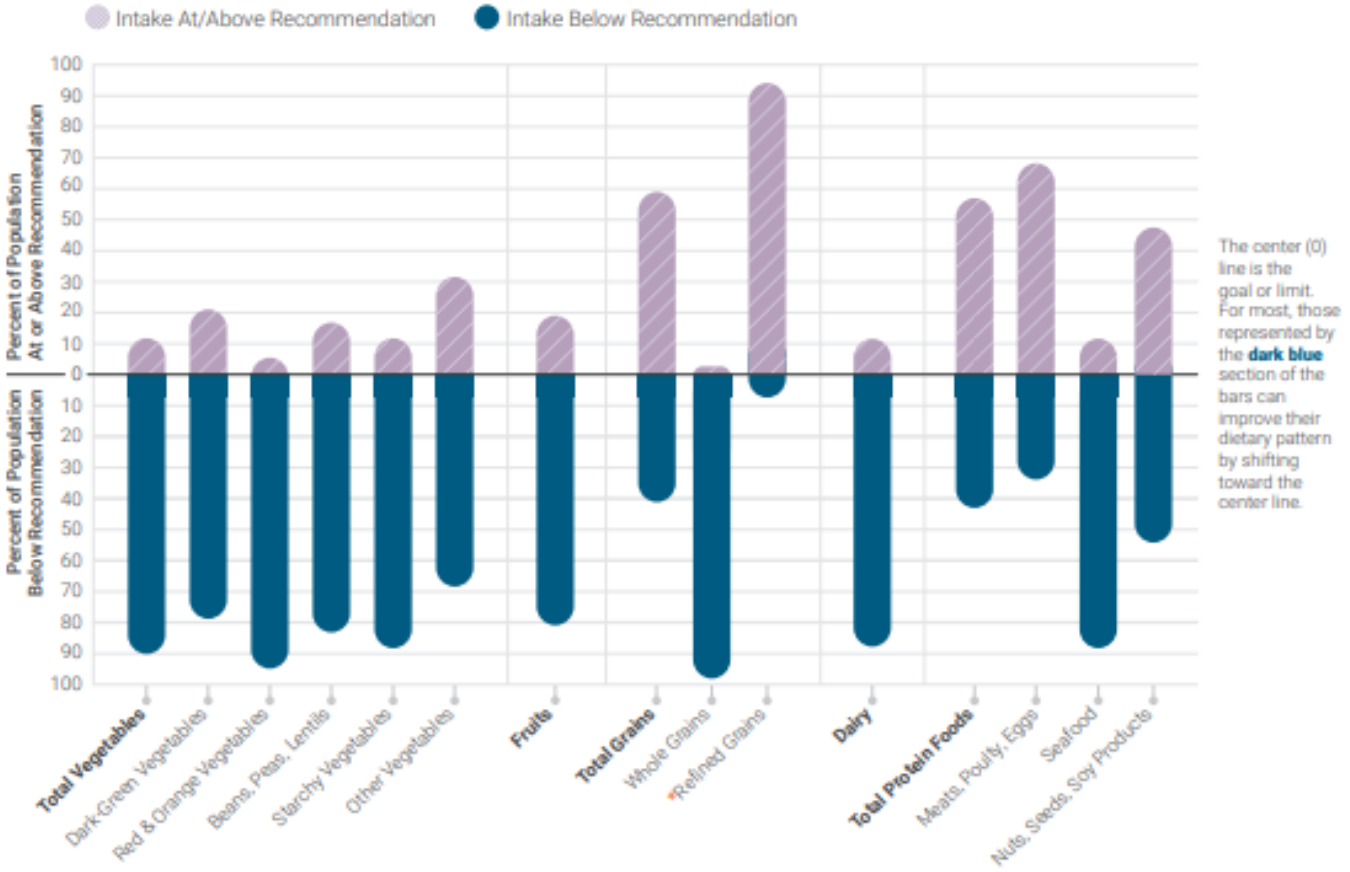
- Since 1980, the DGAs have provided science-based advice on what to eat and drink in order to:
  - Promote health
  - Reduce risk of chronic disease
  - Meet nutrient needs

- The DGAs are representative of the U.S. population that is:
  - Healthy
  - At risk for chronic conditions (i.e., CVD, T2D, obesity)
  - Living with one or more of these diet-related, chronic illnesses

- The DGAs build upon previous editions and evolve as scientific knowledge grows

Figure 1-6

Dietary Intakes Compared to Recommendations: Percent of the U.S. Population Ages 1 and Older Who Are Below and At or Above Each Dietary Goal



***NOTE:** Recommended daily intake of whole grains is to be at least half of total grain consumption, and the limit for refined grains is to be no more than half of total grain consumption.

Data Source: Analysis of What We Eat in America, NHANES 2013-2016, ages 1 and older, 2 days dietary intake data, weighted. *Recommended Intake Ranges:* Healthy U.S.-Style Dietary Patterns (see ***Appendix 3***).

Addressing Misinformation in the Dietary Guidelines: 7 misconceptions

1) The DGA ignores science and is not based on a rigorous review of the evidence.
2) Nutrition Evidence Systematic Review (NESR) methodology utilized by the DGAC to conduct its systematic reviews does not consistently meet current systematic review standards.
3) The process to develop the DGA is not transparent.

Addressing misinformation about the Dietary Guidelines for Americans

Janet M de Jesus [1], Eve E Stoody [2], Dana M DeSilva [1], Julia B Quam [2], Julie E Obbagy [2], Dennis Anderson-Villaluz [1], Elizabeth B Rahavi [2], Meghan E Adler [2], Tessa A Lasswell [2], Kara A Beckman [1]

Addressing Misinformation in the Dietary Guidelines: 7 misconceptions

4. The DGAC's work is controlled by HHS and USDA. The Departments drive all scientific decisions and conduct work without DGAC oversight.

5. The DGAC members have conflicts of interest that influence their work.

6. The DGA is only for healthy people and isn't relevant to the majority of the United States population who are at risk of or who have chronic diseases.

7. The DGA is not inclusive of diverse cultural foods.

The Purpose of the DGAs

Birth Through 23 Months
- Lower risk of overweight and obesity
- Lower risk of type 1 diabetes
- Adequate iron status and lower risk of iron deficiency
- Lower risk of peanut allergy
- Lower risk of asthma

Children and Adolescents
- Lower adiposity
- Lower total and low-density lipoprotein (LDL) cholesterol

Women Who Are Pregnant or Lactating
- Favorable cognitive development in the child
- Favorable folate status in women during pregnancy and lactation

Adults, Including Older Adults
- Lower risk of all-cause mortality
- Lower risk of cardiovascular disease
- Lower risk of cardiovascular disease mortality
- Lower total and LDL cholesterol
- Lower blood pressure
- Lower risk of obesity
- Lower body mass index, waist circumference, and body fat
- Lower risk of type 2 diabetes
- Lower risk of cancers of the breast, colon, and rectum
- Favorable bone health, including lower risk of hip fracture

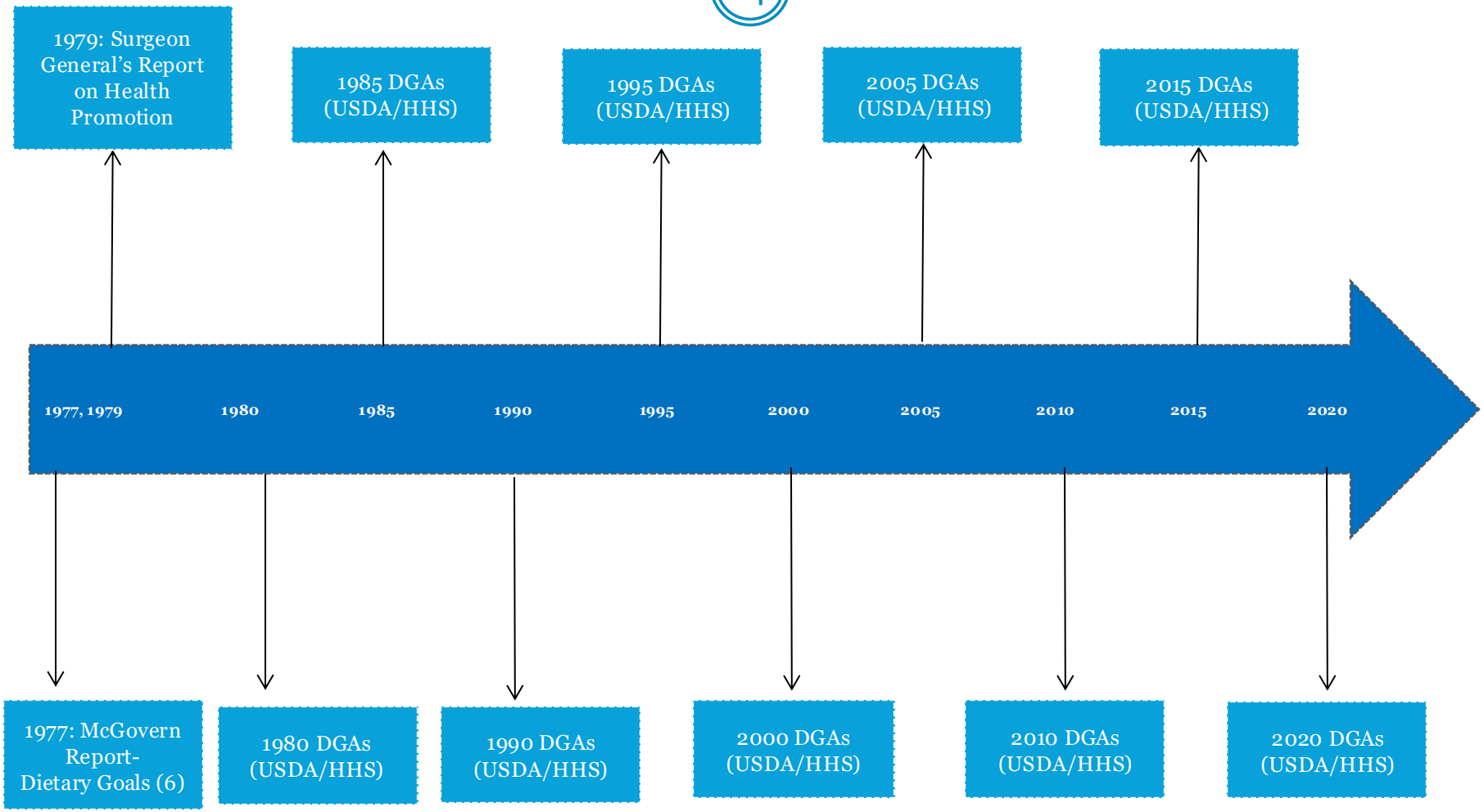
Why Are the DGAs Important?

- They are the foundation to federal food, nutrition, and health policies and programs
- All federal dietary guidance for the public is required to be consistent with the DGs
  - National School Lunch Program
  - Older American Acts Nutrition Program
  - SNAP
  - WIC
  - Healthy People objectives based on DGAs
- Provides critical structure for State and local public health promotion and disease prevention initiatives
- Influence the dietary guidelines other countries will have

Part 2:

THE PROCESS TO DEVELOP THE DIETARY GUIDELINES FOR AMERICANS

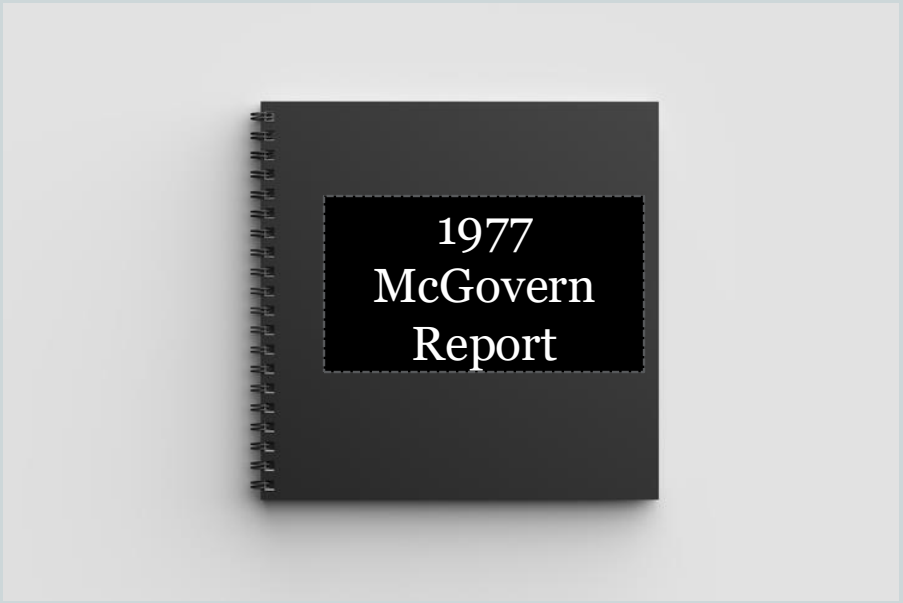
Dietary Guideline Milestones



History of the Dietary Messages

Goals:

- Energy balance to avoid overweight
- Increase consumption of complex CHO and "naturally-occurring sugars"
- Reduce consumption of refined and processed sugars, total fat, saturated fat, cholesterol, and sodium
- Increase consumption of fruits, vegetables, and whole grains
- Decrease consumption of:
  - Refined and processed sugars
  - Foods high in total fat and animal fat
  - Eggs, butterfat and high-cholesterol foods
  - Salt and foods high in salt
  - Choose low-fat and non-fat dairy



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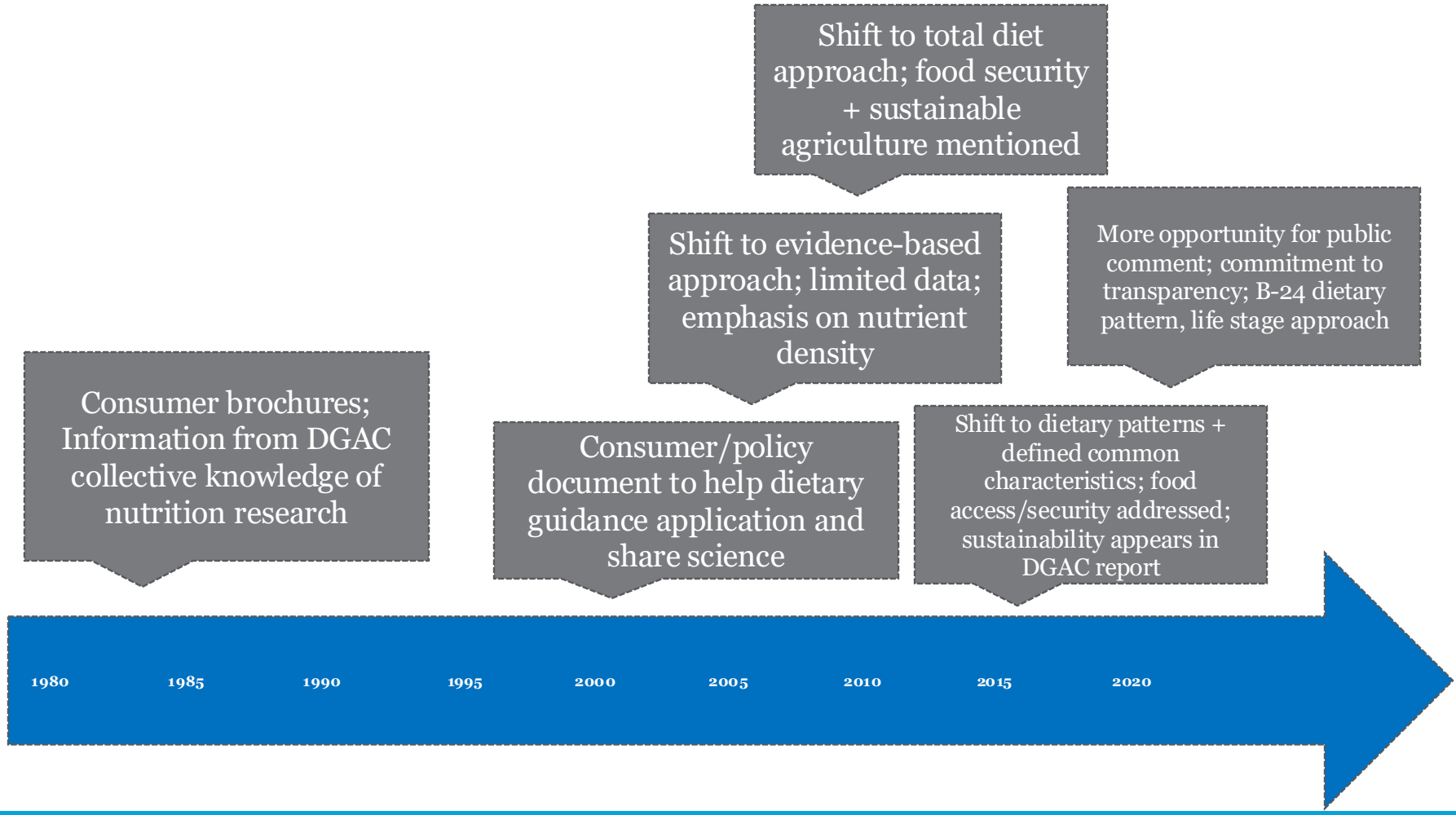
What Changed Over Time?



Shifts in the DGAs

Fat Free → Healthy Fats

Nutrients → actual foods

Cholesterol guidelines → Saturated fats

Foods → Dietary patterns

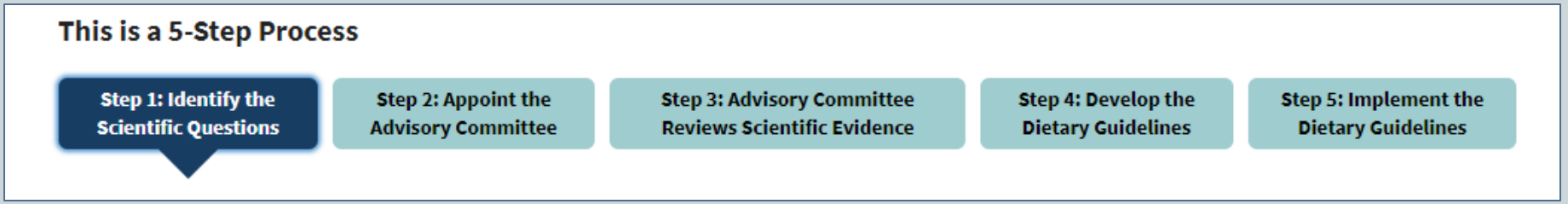
Eat vegetables → Eat vegetables of every color

?? → ??

The 2025-2030 DGAs Development Process

- It's a scientifically rigorous, multi-year process

- The U.S. Departments of Health and Human Services (HHS) and Agriculture (USDA) are committed to providing clear information to the public and providing opportunities for public participation during the process



Step 1: Identify the Scientific Questions

The proposed scientific questions were informed by the following:

- **Scientific Report of the 2020 Dietary Guidelines Advisory Committee:** Questions addressed by the 2020 Committee, particularly those that informed the development of the current Dietary Guidelines, and future directions documented in the *Scientific Report of the 2020 Dietary Guidelines Advisory Committee.*

- **Topics of Public Health Interest:** Consideration of current nutrition science and potential new topics of public health interest.

- **Federal Review:** Input from Federal nutrition scientists and program experts from across the Federal government.

- **Federal Resources:** Consideration of existing Federal resources to avoid duplication of Federal efforts.

**Alcohol and sustainability addressed in separate Federal processes.

Step 1: Identify the Scientific Questions

The criteria HHS and USDA used to prioritize the proposed scientific questions included the following:

- **Relevance:** Question is within the scope of the *Dietary Guidelines* and its focus on food-based recommendations, not clinical guidelines for medical treatment.
- **Importance:** Question addresses an area of substantial public health concern, uncertainty, and/or knowledge gap.
- **Potential Impact to Federal Programs:** There is a high probability that the question will provide the scientific foundation for guidance that would inform Federal food and nutrition policies and programs.
- **Avoiding Duplication:** The question is not addressed through existing or planned evidence-based Federal guidance (other than the *Dietary Guidelines*).
- **Research availability** was evaluated for the proposed questions to determine whether sufficient evidence exists to conduct a new review or update an existing systematic review. If adequate research is not available, the question will be identified as an area needing more research.

**The public is then allowed to weigh in

Sample Questions

Systematic Reviews

The proposed systematic review questions are organized into the following topics:

Dietary Patterns Across Life Stages

- What is the relationship between dietary patterns consumed and:
  - growth, size, body composition, risk of overweight and obesity, and weight loss and maintenance?
  - risk of cardiovascular disease?
  - risk of type 2 diabetes?
  - risk of certain types of cancer (breast, colorectal, lung, prostate)?
  - risk of cognitive decline, mild cognitive impairment, dementia, and Alzheimer's disease?
  - risk of sarcopenia?
  - bone health?
  - all-cause mortality?

- What is the relationship between consumption of dietary patterns with varying amounts of ultra-processed foods and growth, size, body composition, risk of overweight and obesity, and weight loss and maintenance?

- What is the relationship between dietary patterns consumed before and during pregnancy and:
  - risk of gestational diabetes?
  - risk of hypertensive disorders of pregnancy?
  - gestational age at birth?
  - birth weight standardized for gestational age and sex?

- What is the relationship between dietary patterns consumed before and during pregnancy and lactation and developmental milestones, including neurocognitive development, in the child?

Step 2: Appoint the Advisory Committee

Establishing the Committee

- The 2025 Dietary Guidelines Advisory Committee is formed under and governed by the **Federal Advisory Committee Act (FACA)**, which provides legal requirements for forming and using Federal advisory committees
- A **charter** is filed with Congress before the Federal advisory committee can meet or take any action
- The Committee is charged with reviewing the evidence on nutrition and health across the lifespan
- It will provide independent, science-based advice and recommendations to be considered by HHS and USDA

Step 2: Appoint the Advisory Committee

- HHS and USDA requested nominations to the 2025 Dietary Guidelines Advisory Committee and selected the Committee.

- The call for nominations was held from June 15 – July 15, 2022.

Step 2: Committee Selection

HHS and USDA used the following evaluation criteria in the review of nominations:

- **Professional Experience:** At least ten years of experience as an academic, researcher, practitioner, or other health professional in a field related to one or more of the scientific topic areas to be examined; consideration of leadership experience and participation on previous expert committees or panels.

- **Educational Background:** Advanced degree in nutrition or health-related field, including registered dietitians, nutrition scientists, physicians, and those with public health degrees.

- **Demonstrated Scientific Expertise:** Expertise related to one or more of the scientific topic areas to be examined by the Committee as demonstrated by the number and quality of peer-reviewed publications and presentations. Expertise related to health equity and the scientific approaches used to review the evidence (systematic reviews with or without meta-analysis, food pattern modeling, and data analysis) is also desired.

- **Balanced and Diverse Membership:** A Committee that is reasonably balanced in terms of points of view and expertise, experience, education, and institutional affiliation, with a goal of establishing a diverse membership that is reflective of the racial, ethnic, gender, and geographic diversity within the United States.

Step 2: Appoint the Advisory Committee

Additional Review, Including Conflicts of Interest

- The vetting process for potential members included a **background check** by HHS to determine if any candidates have **a financial, ethical, legal, and/or criminal conflict of interest** that would prohibit them from serving on the Committee.

HHS and USDA Secretary Review and Appointment

- **The Secretaries of HHS and USDA** reviewed formal nomination recommendations from the departments on the proposed Committee members and jointly appointed individuals to serve on the Committee.
- Committee members are appointed as Special Government Employees (SGEs) and are subject to applicable **Federal ethics rules**.
- Each Committee member receives **ethics training** upon appointment and annually throughout their service on the Committee.
- Committee members are **not paid for their service**, although travel expenses are reimbursed.
- Following appointment, the Committee begins its work to review the scientific evidence on nutrition and health across the lifespan.

Step 3: Advisory Committee Reviews Scientific Evidence

The Role of the Committee

- DGAC members collaborate to develop evidence review protocols, review and synthesize evidence, present scientific findings, and consider public comments.
- The DGAC's work culminates in a comprehensive scientific report on the current state of nutrition science and provides independent recommendations to HHS and USDA.
- Evidence reviewed from early 2023 until late 2024.
- Meets ~6x and all DGAC meetings will be open to the public virtually.
  - Meeting 6: September 25-26, 2024
  - Met 7 times
- The activities of the DGAC will conclude upon delivery of its scientific report or when its 2-year charter expires, whichever comes first.

Step 3: Advisory Committee Reviews Scientific Evidence: Scientific Approaches

1) **Data analysis:** A collection of analyses that uses national data sets to describe the current health and dietary intakes of Americans.
   - Help make the *Dietary Guidelines* practical, relevant, and achievable.

2) **Food pattern modeling:** A methodology used to illustrate how changes to the amounts or types of foods and beverages in a dietary pattern might affect meeting nutrient needs and to develop quantitative dietary patterns that reflect health-promoting patterns identified in systematic reviews and meet energy and nutrient needs.

3) **Systematic reviews:** ***Gold-standard*** evidence synthesis projects that answer nutrition questions of public health importance using systematic, transparent, rigorous, and protocol-driven methods to search for, evaluate, synthesize, and grade the strength of the eligible body of evidence.

Step 3: Advisory Committee Reviews Scientific Evidence

Scientific Report

- The DGAC developed a scientific report released Dec 2024 that was submitted to HHS and USDA.
- HHS and USDA plan to release the *Dietary Guidelines* by the end of 2025.

Get Involved

- Provide public comments
- Sign up to receive email updates on the DG
- www.dietaryguidelines.gov/get-involved

Step 4: Develop the Dietary Guidelines

- During this step, HHS and USDA work together to develop the *Dietary Guidelines*.
- Each edition of the *Dietary Guidelines* builds upon the preceding edition, with the scientific justification for revisions informed by 2025 DGAC scientific report.
- The scientific report is a resource that helps to inform HHS and USDA's development of the *Dietary Guidelines* – **it is not a draft of the *Dietary Guidelines*.**

Step 5: Implement the Dietary Guidelines

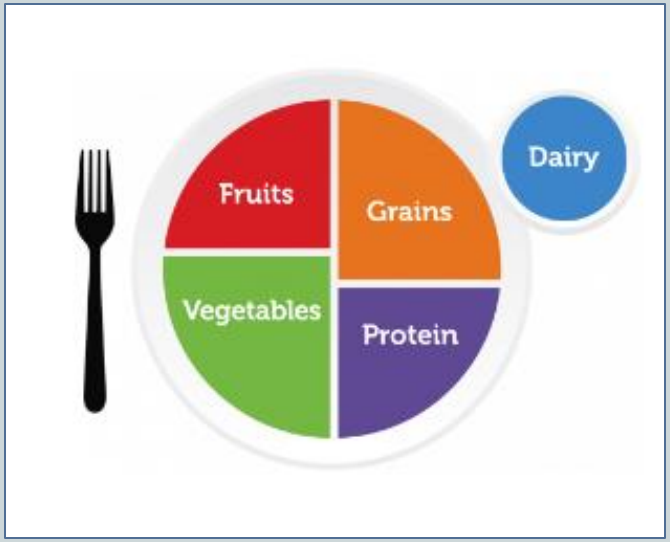
- During this step, HHS and USDA release the updated *Dietary Guidelines* and work with Federal, state, and local partners to implement the new edition.

- It provides a customizable framework for healthy eating that can be tailored and adapted to meet **personal preferences, cultural traditions,** and **budgetary considerations**

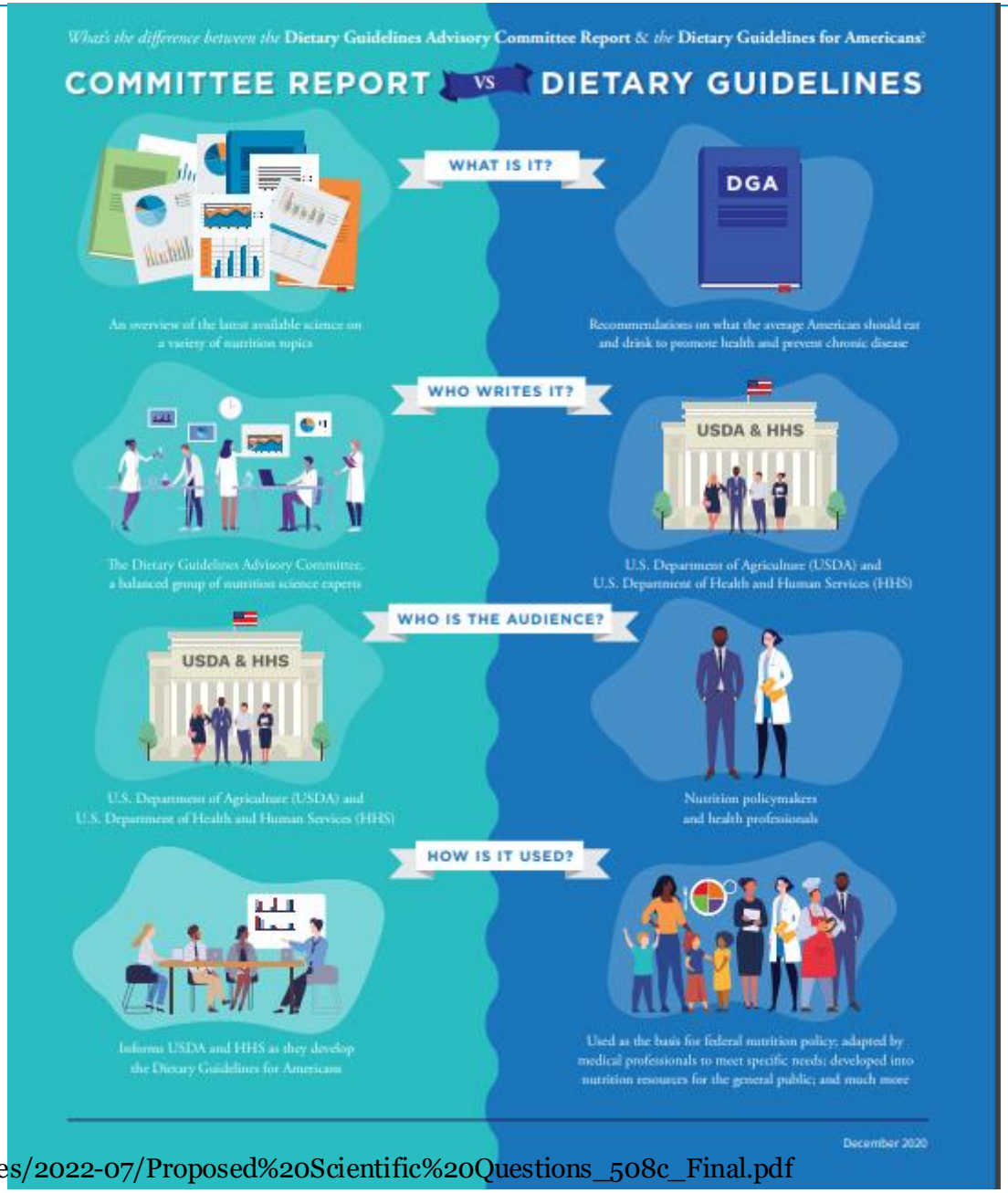
- It is developed and written for a **professional audience**, including policymakers, healthcare providers, nutrition educators, and Federal nutrition program operators.

Step 5: Implement the Dietary Guidelines

- Another way to implement the *Dietary Guidelines* is through MyPlate, which serves as a reminder to build healthy eating patterns by making healthy choices across the food groups.



Differences between the Committee Report and the Dietary Guidelines



https://www.dietaryguidelines.gov/sites/default/files/2022-07/Proposed%20Scientific%20Questions_508c_Final.pdf

Part 3

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A LOOK BACK AT THE 2020-2025 DIETARY GUIDELINES FOR AMERICANS

Notable Changes in the 2020-2025 DGAs

- Organized by life stage
  - 0-24 months, pregnant, and lactating women included

- Customize and enjoy nutrient-dense food and beverage choices to reflect **personal preferences, cultural traditions, and budgetary considerations**

Highlights in 2020-2025 DGAs

- **"Beans, peas, and lentils"** is the new name for the vegetable subgroup formally called "legumes (beans and peas)."
  - Including beans, peas, and lentils, which are also known as "pulses," including the dried edible seeds of legumes.
  - This subgroup can be counted as either a vegetable or protein – not both!

- Oils are part of a healthy dietary pattern because they provide essential fatty acids.
  - The fat in tropical plants, coconut oil, palm oil, and palm kernel oil, **are not included** in the oil category.

Dairy Recommendations

- 3 servings per day for 9 years and older
- Milk and dairy foods are important sources of:
  - Calcium
  - Vitamin D
  -

- Other than soy, plant-based beverages not recommended.

"For individuals who choose dairy alternatives, fortified soy beverage (commonly known as "soy milk") and soy yogurt – which are fortified with Ca+, vit A, and vit D – are included as part of the dairy group because they are similar to milk and yogurt based on nutrient composition and in their use in meals."

Highlights in 2020-2025 DGAs

Beverages

- Calorie-free beverages are the best choice = water
  - Beverages that contribute beneficial nutrients (i.e. fat-free or low-fat milk) are best
  - Coffee, tea, flavored waters should contain little, if any, sweeteners or cream

Same in 2025 DGAC Report!

Added Sugars

- Added sugar contributes positive attributes in small amounts.
- **DGAC recommended** lowering added sugars to <6% total calories.
- Current recommendation continues to be a maximum of 10% of total calories.

Highlights in 2020-2025 DGAs

Limited Nutrient	Recommendations
Added sugars	• ≥2 years: <10% Kcal/day • <2 years: Avoid food and beverages with added sugars
Saturated fat	• ≥2 years: <10% Kcal/day
Sodium	• ≥14 years: 2,300 mg/day • <14 years: Even less
Alcoholic Beverages	• If you choose to drink, limit intake to 2 drinks/day or less for men and 1 drink/day or less for women • Drinking less is better for health than drinking more • Women who are pregnant should not drink alcohol

Percentage of Calories: Nutrient-Dense Choices vs Other Uses

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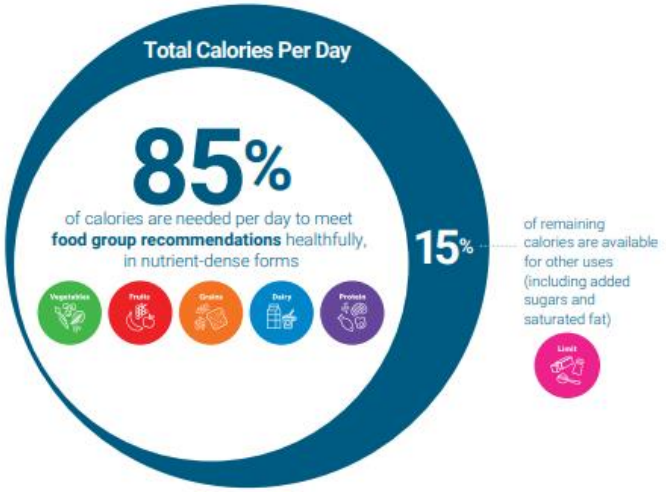
- ~85% Kcals/day needed to meet food group recommendations healthfully.
- ~15% Kcals/day are calories available for other uses.
- For most Americans, this ~250-350 kcals/day.

Figure 1-7

The 85-15 Guide: Percentage of Calories Needed To Meet Food Group Needs With Nutrient-Dense Choices and Percentage Left for Other Uses



Part 4:

SCIENTIFIC REPORT OF THE 2025 DIETARY GUIDELINES ADVISORY COMMITTEE

Health Equity: A Guiding Principle

- Committee worked to ensure that factors such as socioeconomic position, race, ethnicity, and culture were considered to the greatest extent possible based on the available evidence.

- **Example:** Evidence scan conducted on culturally tailored dietary interventions to describe the available evidence and make recommendations regarding future systematic review efforts to continue work on this important topic.

- **Example:** The first Committee to use diet simulations (systems science approach) to evaluate proposed dietary patterns, considering variability in the selection and consumption of foods and beverages representing differing preferences, cultures, and traditions.
  - American Indian and Alaska Native populations

New Topics Addressed

- Continued lifespan approach

- Food sources of saturated fat consumed and risk of CVD
- Dietary patterns with varying amounts of ultra-proceeded foods
- Strategies for improving diet quality and weight management, which involved new reviews on portion size and frequency of meals and/or snacking
- Practical guidance about how to feed younger children in terms of caregiver feeding styles and practices that support children's consumption of healthy foods

U.S. Dietary Intakes Across Lifespan

Generally Lower Than Current Recommendations	Generally At Or Above Current Recommendations
• Vegetables • Fruits • Dairy and Fortified Soy Alternatives • Seafood • Nuts, Seeds, and Soy Products • Whole Grains	• Total Grains (including Refined Grains) • Total Protein Foods • Meat, Poultry, and Eggs

Saturated Fat

- The 2020-2025 DGAs recommends to limit total saturated fat intake to <10% of calories/day starting at age 2 by replacing it with unsaturated fat, particularly polyunsaturated fats.

- The DGAC findings support recommendations to **replace saturated fat-containing foods** with **plant sources rich in MUFA, PUFA, and fiber**, rather than other animal sources of saturated fat, for reduction in CVD risk.

- The DGACs findings support replacement of plant sources higher in saturated fat, such as coconut oil, cocoa butter, and palm oil, with vegetable oils higher in unsaturated fats.

Food Group and Subgroup Analysis

- DGAC explored how shifts in quantities of food groups and subgroups, mostly tested within the 2020 Healthy U.S.-Style Dietary Pattern (HUSS), could have implications for nutrient adequacy.

Total Protein Foods

- Reduce Total Protein Foods by reducing Meat, Poultry and Eggs at every calorie level, beginning at 2200, regardless of age-sex group or life stage

"Limits on Calories for Other Uses"

- Remove the line -- misleading

Protein Foods Group

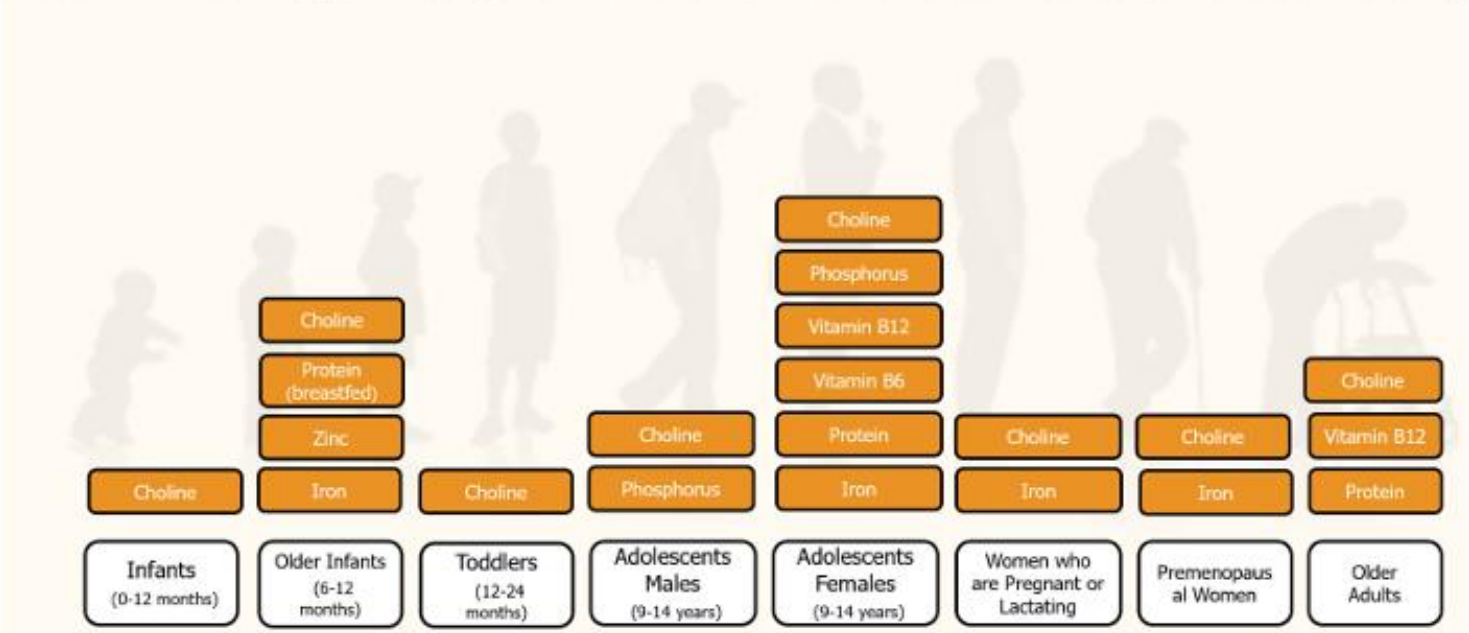
- Recommends moving Beans, Peas, and Lentils as a subgroup of the Vegetables Food Group to a subgroup of the Protein Foods Group.

Data of Red Meat Consumption

- Over the past 20 years, people haven't increased the % of calories from protein
- 52% of Americans are at/below recommendations for Meat, Poultry, and Eggs
- Americans are eating 1.5 oz of total beef each day, on average
  - 1.2 oz is fresh, lean beef – within the DGA recommendations

Beef Helps Nourish At Every Life Stage

FIGURE 2. Beef Helps Fill Gaps for Nutrients of Public Health Relevance Across Life Stages



Data from Scientific Report of the 2020 Dietary Guidelines Advisory Committee (https://www.dietaryguidelines.gov/2020-advisory-committee-report) and FoodData Central, 2019. Available at https://fdc.nal.usda.gov/ (Beef composite, cooked - NDB Number: 13364).

What About Added Sugar Targets?

- Based on nationally representative data, nearly 30% of saturated fat in the diets of adult females comes from foods rich in refined grains (Sweets and snacks + grains), while 14% comes from protein foods (excludes dairy)

- 24% of saturated fat in the diet of adult males comes from sweets, snacks + grains, while 16% comes from protein food

Conclusion

- This is the first time the USDA and HHS have been very clear about how the DGAs are created (including the DGAC and report)
- DGAC report made several key recommendations building upon the 2020-2025 DGAs. The 2025-2030 DGAs will be released before end of 2025.
- The DGAs are developed and written for a professional audience.
- Its translation into actionable consumer messages and resources is crucial to help individuals, families, and communities to achieve healthy dietary patterns.
- Action is needed on many fronts to ensure that the healthy dietary choices available at home, school, work, and play are affordable and accessible to all.
- Everyone has a role to play in helping all Americans shift to a healthy dietary pattern and achieve better health!

"Eat Healthy Your Way"

2020-2025 DGAs, page 130.

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Questions?