



## Dietary Guidelines for Americans, 2010 Foods and Food Components to Reduce

Americans of all ages consume certain foods and food components in excessive amounts which may increase the risk of certain chronic diseases. The 2010 Dietary Guidelines recommend reducing consumption of sodium, solid fats (major sources of saturated and trans fats), added sugars and refined grains.

- **Reduce daily sodium intake** to less than 2,300 milligrams (mg). Persons who are 51 and older and those of any age who are African-American or have hypertension, diabetes or chronic kidney disease should further reduce intake to 1,500 mg. The 1,500 mg recommendation applies to about half of the U.S. population, including children, and the majority of adults. A strong body of evidence in adults shows that as people decrease their sodium intake, their blood pressure decreases, too. Moderate evidence in children has also shown that as sodium intake decreases, so does blood pressure. Keeping blood pressure in the normal range reduces an individual's risk of cardiovascular disease, congestive heart failure and kidney disease.

How can you reduce your sodium intake?

- Read the Nutrition Facts label for information on the sodium content of foods and choose foods that are low in sodium.
  - Consume more fresh foods and fewer processed foods that are high in sodium.
  - Eat more home-prepared foods, where you have more control over sodium, and use little or no salt or salt-containing seasonings when cooking or eating foods.
  - When eating at restaurants, ask that salt not be added to your food or order lower sodium options, if available.
- **Consume less than 10 percent of calories from saturated fat** by replacing it with monounsaturated and polyunsaturated fat. A strong body of evidence indicates that higher intake of most dietary saturated fat is associated with higher levels of blood total cholesterol and low-density lipoprotein (LDL) cholesterol. Higher total and LDL cholesterol levels are risk factors for cardiovascular disease. For most women, saturated fat intake should be around 20 grams or less per day. Men should strive for around 28 grams or less per day.

To reduce the intake of saturated fat, limit the consumption of fat that is solid at room temperature such as regular (full-fat) cheese; pizza; grain-based desserts; dairy-based desserts; fatty cuts of red meat; chicken and chicken mixed dishes; and sausage, franks, bacon and ribs. Use vegetable oils instead of solid fat.

- **Keep trans fat consumption as low as possible** by limiting foods that contain synthetic sources of trans fats, such as partially hydrogenated oils, and by limiting other solid fats. A number of studies have observed an association between increased trans fat intake and increased risk of cardiovascular disease.

- **Consume less than 300mg per day of dietary cholesterol.** Dietary cholesterol has been shown to raise blood LDL cholesterol levels in some individuals. However, the effect is lower when saturated fatty acid intake is low. The potential negative effects of dietary cholesterol are relatively small compared to those of saturated and trans fat. Moderate evidence shows a relationship between higher intake of cholesterol and higher risk of cardiovascular disease. Evidence suggests that one egg per day does not increase blood cholesterol levels, or the risk of cardiovascular disease in healthy people.
- **Reduce the intake of calories from solid fats and added sugars.** Together, solid fats and added sugars contribute a large portion of the calories consumed by Americans—35 percent on average, or nearly 800 calories per day. Most fats with a high percentage of saturated and/or trans fats are solid at room temperature and are referred to as “solid fats”. In addition to the effects that saturated and trans fats have on cardiovascular disease risk, solid fats contribute to excess calorie intake.

**Solid fats** contribute an average of 19 percent of the total calories in American diets, but few essential nutrients and no dietary fiber. Common solid fats include butter, beef fat (tallow, suet), chicken fat, pork fat (lard), stick margarine and shortening.

The majority of sugars in typical American diets are **sugars added to foods** during processing, preparation or at the table. Many foods that contain added sugars often supply calories, but few or no essential nutrients and no dietary fiber. Added sugars contribute an average of 16 percent of the total calories in American diets. Major sources of added sugars in the diets of Americans are soda, energy drinks and sports drinks, grain-based desserts, sugar-sweetened fruit drinks, dairy-based desserts and candy.

Tips for reducing solid fats and added sugars:

- Limit the amount of solid fats and added sugars when cooking or eating (e.g., trimming fat from meat, using less butter and stick margarine, and using less table sugar).
  - Consume fewer and smaller portions of foods and beverages that contain solid fats and/or added sugars, such as grain-based desserts, sodas and other sugar-sweetened beverages and foods.
- **Limit the consumption of foods that contain refined grains**, especially those that contain solid fats, added sugars and sodium. The refining of whole grains removes vitamins, minerals and dietary fiber. Iron, thiamin, riboflavin, niacin and folic acid are often added back, but dietary fiber and some vitamins and minerals that are present in whole grains are not routinely added back to refined grains. The Dietary Guidelines recommend consuming no more than 3 ounce-equivalents of refined grains per day. Refined grains should be replaced with whole grains, such that at least half of all grains eaten are whole grains.
  - **If alcohol is consumed, it should be consumed in moderation**—up to one drink per day for women and two drinks per day for men—and only by adults of legal drinking age. Alcohol consumption may have beneficial effects when consumed in moderation. However, it is not recommended that anyone begin drinking alcohol or drink more frequently on the basis of potential health benefits. Strong evidence from observational studies has shown that moderate alcohol consumption is associated with a lower risk of cardiovascular disease. Moderate alcohol consumption also is associated with reduced

risk of death from all causes among middle-aged and older adults and may help to keep cognitive function intact with age.

Excessive drinking increases the risk of cirrhosis of the liver, hypertension, stroke, type 2 diabetes, cancer of the upper gastrointestinal tract and colon, injury and violence. Excessive drinking over time is associated with increased body weight and can impair short-and long-term cognitive function.

**Reference:** Dietary Guidelines for Americans, 2010. <http://www.cnpp.usda.gov/DGAs2010-PolicyDocument.htm>, accessed May 9, 2011.

Prepared by Rosemary Rodibaugh, Ph.D., professor – nutrition, University of Arkansas System Division of Agriculture

The Arkansas Cooperative Extension Service offers its programs to all eligible persons regardless of race, color, national origin, religion, gender, age, disability, marital or veteran status, or any other legally protected status, and is an Affirmative Action/Equal Opportunity Employer.