



# Nutrition for Family Living

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## December, 2004 Topics

Federal Trade Commission Cracking Down on Bogus Weight-loss Claims

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Two New Qualified Health Claims from FDA

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## Federal Trade Commission Cracking Down on Bogus Weight-loss Claims

On November 9, 2004, the Federal Trade Commission (FTC) launched "Operation Big Fat Lie," a nation-wide law enforcement sweep against six companies making false weight-loss claims in national advertisements. These actions are part of the FTC's educational campaign, "Red Flag," announced in December 2003 that encourages media outlets to reject false ads, provides guidance to media outlets to help them identify false ads, and helps consumers make informed choices. The FTC hopes that these efforts will contribute to keeping the national obesity epidemic from getting worse.

The six complaints announced on November 9 allege that defendants used at least one of the seven bogus weight-loss claims outlined in Red Flag:

1. Causes weight loss of two pounds or more a week for a month, or more without dieting or exercise.
2. Causes substantial weight loss, no matter what or how much the consumer eats.
3. Causes permanent weight loss (even when the consumer stops using the product.)
4. Blocks the absorption of fat or calories to enable consumers to lose substantial weight.
5. Safely enables consumers to lose more than three pounds per week for more than four weeks.
6. Causes substantial weight loss for all users.
7. Causes substantial weight loss by wearing it on the body or rubbing it into the skin.

The challenged ads ran in nationally-known publications including: *Cosmopolitan*; *Woman's Own*; *Complete Woman*; *USA Weekend*; the Spanish-language publication *TeleRista Magazine*; and several prominent newspapers outside of Wisconsin such as the *San Francisco Chronicle*. The products being advertised included topical gels that cause weight loss or eliminate inches of fat or cellulite, a diet patch, and pills, powders and teas described as "fat blockers" or that claim to control metabolism. The FTC alleges that in each case weight-loss claims are false and that the defendants did not have adequate substantiation for the claims they made.

Preliminary results of the "Red Flag" campaign appear positive. "Through our monitoring, we have seen a decrease in the frequency of false weight loss claims in the media," said FTC Chairman Deborah Platt Majoras. "This tells us that many in the publishing and broadcasting industries are doing the right thing and stepping up their efforts to reject ads like the ones we targeted today."

The complete FTC media release, including the companies implicated, can be found at <http://www.ftc.gov/opa/2004/11/bigfatliesweep.htm>. For more information about the "Red Flag" campaign, including examples of the most common false claims, see <http://www.ftc.gov/bcp/online/edcams/redflag/index.html>.



## **Nutrition Knowledge, Dietary Practices, and Food Shopping Impact the Quality of Food Stamp Participants' Diets**

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A study in the British Journal of Nutrition confirms an earlier finding that dollar-stretching shopping skills (like taking advantage of savings offered at grocery stores, searching for bargains, and using shopping lists) are associated with U.S. Food Stamp households having more nutritious diets.

In the journal article by Alok Bhargava ("Socio-economic and behavioural factors are predictors of food use in the National Food Stamp Program Survey," *Br J Nutr* 92 (3)S 2004: 497-506), the researcher describes his analysis of data from the 1996 U.S. National Food Stamp Program Survey. In that survey, U.S. households were interviewed about what they ate and completed a 7-day food record. They were also asked questions about their nutrition knowledge and practices. He looked at 919 Food Stamp households' calorie and nutrient intake in light of five areas of nutrition knowledge and practice:

- Knowledge of the U.S. Food Guide Pyramid - respondents were asked if they were familiar with the pyramid and, if so, to name each group.
- Use of food labels – respondents were asked about the importance of product safety, nutrition, and shelf-life to them; they were also asked if they had changed their mind about purchasing a food because of information on the label.
- Low-fat practices – respondents were asked if their diet was low in fat and cholesterol and if they had changed, or thought about changing, their eating habits to reduce fat
- Fruits and vegetables – respondents were asked if they ate fruits and vegetables regularly, if they had changed their eating habits to increase fruits and vegetables, and if they ate 5 or more servings a day.
- Resource Management – respondents were asked how often they looked in newspapers for grocery specials, used coupons, stocked up on items in the face of a bargain, compared prices at different stores, and used shopping lists.

Bhargava found that households that reported taking advantage of savings offered by grocery stores, searching for bargains, and using shopping lists had more calories available to them. In addition, the more shopping trips a household made in a month, the greater the calcium, fiber, and beta-carotene densities – and the lower the unsaturated fat density - in the household diet. The households in this study shopped an average of 2.4 times per month (range: 1.4 – 3.4). This finding is similar to the finding by Hersey et al when they analyzed the same data ("Food shopping practices are associated with dietary quality in low-income households," *JNE* 33:S16-S26, 2001.)

Bhargava also found that nutrition knowledge and practices were associated with household dietary quality. Households that scored higher on the Food Guide Pyramid questions also had greater calcium and beta-carotene densities in the household diet. Households that scored higher on the food label questions had greater fiber, carbohydrate, and beta-carotene densities – and lower monounsaturated fat density – in the household diet. Lastly, higher scores on the fruits and vegetables questions were associated with higher beta-carotene densities.

Over half (52%) of the respondents scored '0' on the Food Guide Pyramid questions – meaning they answered 'no' when asked if they were familiar with the Food Guide Pyramid. This survey was conducted in 1996, four years after the Pyramid was introduced.

*Implications for Extension educators* – Education that helps low-income individuals and families stretch their food dollar at the grocery store and choose nutritious foods from the Food Guide Pyramid helps them eat a more nutritious diet than they might otherwise.



## Two New Qualified Health Claims from FDA

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In 2003, FDA created something called a “qualified health claim” that may be used when there is some evidence of a relationship between a food, food component, or dietary supplement, and a reduced risk of a disease or health condition. *A qualified health claim would be used when there is not enough evidence for FDA to allow a full health claim. Manufacturers must state that the evidence for the claim is limited.* Both foods and dietary supplements can use qualified health claims.

FDA has approved two new qualified health claims. They are:

**Monounsaturated fat from olive oil and reduced risk of coronary heart disease.** The North American Olive Oil Association requested (petitioned) this qualified health claim. FDA reviewed the scientific evidence and approved the following claim for olive oil labels and labels of certain foods that contain olive oil:

“Limited and not conclusive scientific evidence suggests that eating about 2 tablespoons (23 grams) of olive oil daily may reduce the risk of coronary heart disease due to the monounsaturated fat in olive oil. To achieve this possible benefit, olive oil is to replace a similar amount of saturated fat and not increase the total number of calories you eat in a day. One serving of this product [Name of food] contains [x] grams of olive oil.”

To see the full press release, which includes links to the letters sent to the petitioners describing the rules surrounding the qualified health claim, see

<http://www.fda.gov/bbs/topics/news/2004/NEW01129.html>

**Foods with EPA and DHA omega-3 fatty acids and reduced risk of coronary heart disease.** Wellness Lifestyles, Inc., Life Extension Foundation Buyers Club, and Martek Biosciences Corporation requested (petitioned) this qualified health claim. FDA reviewed the scientific evidence and approved the following claim for labels of certain foods containing EPA and DHA:

“Supportive but not conclusive research shows that consumption of EPA and DHA omega-3 fatty acids may reduce the risk of coronary heart disease. One serving of [name of food] provides [x] grams of EPA and DHA omega-3 fatty acids. [See nutrition information for total fat, saturated fat and cholesterol content].”

To see the full press release, which includes links to the letters sent to the petitioners describing the rules surrounding the qualified healthy claim, see

<http://www.fda.gov/bbs/topics/news/2004/NEW01115.html>

To read more about omega-3 fatty acids and monounsaturated fatty acids, consult your 2002 edition of the ADA’s Complete Food and Nutrition Guide, Chapter 3 “Fat Facts.”