

USDA-HHS Oral Comment Meeting Scientific Report of the 2020 Dietary Guidelines Advisory Committee August 11, 2020

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I am presenting today serious concerns about the DGAC's proposal to change the decades-old, evidence-based definition of moderate drinking. These concerns are founded on my more than 40 years of expertise, including as head of the NIAAA's research portfolio on moderate drinking which I founded and advanced beginning nearly three decades ago.

I bring this expertise and scientific knowledge to my current role as science advisor to the Distilled Spirits Council of the United States. My opinions remain, as always, founded on the deepest commitment to scientific rigor and ethics.

As the Committee's systematic review reaffirms, the preponderance of evidence shows that light to moderate alcohol consumption, as defined in the 2015 DGA and in the absence of binge drinking, presents little health risk for most adults and is, in fact, associated with reduced all-cause mortality.

To quote the scientific report: "[a]pproximately half of the studies reported significant findings that low average alcohol consumption ... was associated with reduced risk of all-cause mortality compared with never drinking alcohol" and "only 2 studies reported that low alcohol consumption was significantly associated with greater all-cause mortality compared to never drinking alcohol."

The Committee's systematic review included just one study that examined differences amongst men consuming one versus two drinks per day. The Committee's reliance on a single study within its review to justify halving the daily guideline for men and contradicting the true preponderance of scientific evidence defies logic.

The Committee's conclusions on alcohol consumption and all-cause mortality reflect significant procedural and analytical errors. The Committee repeatedly violated its systematic review protocol establishing parameters for inclusion and exclusion of evidence. Part D, Chapter 11 relies heavily on evidence excluded from or not addressed in the systematic review, lacks proper and convincing citations, and comments on matters exceeding the purview of dietary guidance.

As a result, the Committee's proposal to change the definition of moderate drinking is seriously flawed and is not supported by a preponderance of evidence. One study cannot change the preponderance of scientific evidence accumulated over more than forty years and reaffirmed by previous DGACs. The 2020 DGAC's proposal therefore, should not be included in the 2020 DGA, which should instead retain the definition of moderate drinking contained in the 2015 DGA.