



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
Michelle Morse, MD, MPH
Acting Health Commissioner

April 30, 2025

Michelle Morse, MD, MPH
Acting Health Commissioner

Gotham Center
42-09 28th St.
Long Island City, NY 11101

via electronic submission: [\[https://www.regulations.gov\]](https://www.regulations.gov)

**Re: Food Labeling: Front-of-Package Nutrition Information
[\[FDA-2024-N-2910-0001\]](#)**

████████████████████
Office of Nutrition and Food Labeling

████████████████████
Office of Policy, Regulations, and Information
Human Foods Program
Food and Drug Administration
5001 Campus Dr.
College Park, MD 20740

The New York City (NYC) Health Department is pleased to submit a comment to the Food and Drug Administration (FDA) on the proposed front-of-package (FOP) nutrition label. The NYC Health Department applauds FDA for taking on this crucial issue.

Diet-related diseases, including cardiovascular disease and diabetes, continue to be leading causes of illness and premature death. Added sugars, sodium and saturated fat are nutrients of concern that Americans consume at rates far above the recommended levels.¹ Overconsumption of these nutrients is associated with increased risk of diet-related diseases. Specifically, high consumption of saturated fat is associated with an increased risk of coronary heart disease,^{2,3} high consumption of sodium is associated with increased risk for hypertension, which can lead to cardiovascular disease and stroke,⁴ and high consumption of added sugars is associated with increased risk for type 2 diabetes,^{5,6,7,8} weight gain^{9,10}, and dental caries.^{11,12,13}

Despite these health concerns, ultra-processed foods, which often have high amounts of three nutrients of concern: sodium, added sugars, and saturated fat, are heavily consumed in the United States. On average, ultra-processed foods comprise over 57% of energy intake and almost 90% of energy intake from added sugars.¹⁴ Given this landscape, FDA has taken an important opportunity to utilize transparent, interpretive nutrition labeling that enables consumers to make informed purchasing choices for themselves and their families. When FDA's proposed nutrition information (NI) box is implemented, the United States will join other countries who have successfully implemented mandatory FOP nutrition labels. Evidence from these countries, specifically Chile whose FOP warning label has been around the longest, shows that FOP labels can prompt



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
Michelle Morse, MD, MPH
Acting Health Commissioner

product reformulation¹⁵ and decrease consumer purchasing of products carrying the warning label.^{16,17} An evidence-based, interpretive FOP label is an effective and impactful tool.

The NYC Health Department offers responses below to FDA's requests for comment.

1. FDA: we are not currently proposing to require FOP nutrition labeling on foods marketed for infants and children ages 1 to 3 years. We invite comment, including data and other information, related to: (1) the nutritional needs of these subpopulations; and (2) the need for or value of interpretive nutrition information that can help consumers quickly and easily identify how foods can be part of a healthy diet for these subpopulations. (Page 44)
 - a. NYC Health Department: we recommend FDA require the NI box be included on foods marketed towards children ages 1 to 3 years of age. Added sugars are not recommended for infants and children under age 2, yet many baby and toddler foods contain high levels of added sugars.^{18,19,20} Further, products, such as toddler milks, may be marketed to caregivers as healthy options for their children.^{21,22} The majority of toddlers are consuming added sugars and other nutrients of concern at rates higher than recommended: the 2025 Dietary Guidelines Advisory Committee's Scientific Report found that 66% of males ages 2 to 4 and 62% of females ages 2 to 4 exceed the daily limits for added sugars, 87% of both males and females ages 1 to 3 exceed the daily limit for saturated fat, and 92% of females ages 1 to 3 exceed the daily limit for sodium (data for males unavailable).²³ Therefore, the inclusion of a NI box on products marketed towards these age groups provides helpful information for parents and caregivers to more easily make decisions aligned with the recommendations in the Dietary Guidelines for Americans.
2. FDA: we request data and other information on any alternative criteria for the proposed interpretive "Low," "Med," and "High" descriptions that could support our goals of providing consumers with interpretive information for the levels of the three nutrients to limit in the Nutrition Info box that can help them quickly and easily identify how foods can be part of a healthy diet. We also invite comment on use of the "Low" categorization for products that declare 0% DV for any of these three nutrients, rather than a fourth categorization, such as "Zero" or "Free," to indicate that the product is not simply "Low" for that nutrient but contributes zero percent to the DV. (Page 59)
 - a. NYC Health Department: we recommend adding a fourth "zero" or "none" category for products that contribute 0% of the nutrients of concern to the percent daily value (%DV) and subsequently updating the "low" category to be >0-≤5%. This category would allow consumers to quickly identify items without one or more of the nutrients of concern without having to refer to the %DV information.
 - b. We also encourage FDA to monitor use of low- and no-calorie sweeteners (LNCS) as an increase in LNCS use in the food supply may be an unintended consequence of this policy. In Chile, while there was a decrease in purchasing of products carrying a high-in warning, there was also an increase in purchasing of products with LNCS.^{24,25,26} LNCS may be associated with negative health outcomes including cardiometabolic risk^{27,28,29} and are not recommended for children as the health impacts are not well studied among that age group.³⁰ Therefore, we encourage FDA to track LNCS use following implementation of the NI box and consider action on this issue if LNCS use increases.



**NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE**
Michelle Morse, MD, MPH
Acting Health Commissioner

3. FDA: Proposed § 101.6(c)(2) would exempt foods in small packages that have a total surface area available to bear labeling of less than 12 square inches from the requirement to display the Nutrition Info box. We invite comment, and particularly data and other information, on this approach. (Page 84)
 - a. NYC Health Department: we encourage FDA apply the same exemption permission for small packages that is currently used for nutrition information on small packages, which exempts packages from printing nutrition information only if there are no nutrient content claims or other nutrition information on the product label or in labeling advertising. In the same way, if foods in small packages carry any nutrition claim on the label, the NI box would be required as well.

We thank FDA for taking on this important issue and joining other countries who have established mandatory FOP labels. We look forward to the publication of the final rule and urge FDA to expeditiously implement the final NI box rule following consideration of public comments.

Sincerely,



Michelle Morse, MD, MPH
Acting Health Commissioner
New York City Department of
Health and Mental Hygiene

¹ 2025 Dietary Guidelines Advisory Committee. 2024. Scientific Report of the 2025 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Health and Human Services and Secretary of Agriculture. U.S. Department of Health and Human Services. <https://doi.org/10.52570/DGAC2025>

² Dietary Guidelines Advisory Committee. 2020. *Scientific Report of the 2020 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Agriculture and the Secretary of Health and Human Services*. U.S. Department of Agriculture, Agricultural Research Service, Washington, DC. Available at: <https://doi.org/10.52570/DGAC2020>

³ Li Y, Hruby A, Bernstein AM, Ley SH, Wang DD, Chiuve SE, Sampson L, Rexrode KM, Rimm EB, Willett WC, Hu FB. Saturated Fats Compared With Unsaturated Fats and Sources of Carbohydrates in Relation to Risk of Coronary Heart Disease: A Prospective Cohort Study. *J Am Coll Cardiol*. 2015 Oct 6;66(14):1538-1548. doi: 10.1016/j.jacc.2015.07.055. PMID: 26429077; PMCID: PMC4593072.

⁴ 2025 Dietary Guidelines Advisory Committee. 2024. Scientific Report of the 2025 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Health and Human Services and Secretary of Agriculture. U.S. Department of Health and Human Services. <https://doi.org/10.52570/DGAC2025>

⁵ Drouin-Chartier JP, Zheng Y, Li Y, Malik V, Pan A, Bhupathiraju SN, Tobias DK, Manson JE, Willett WC, Hu FB. Changes in Consumption of Sugary Beverages and Artificially Sweetened Beverages and Subsequent Risk of Type 2 Diabetes: Results From Three Large Prospective U.S. Cohorts of Women and Men. *Diabetes Care*. 2019 Dec;42(12):2181-2189. doi: 10.2337/dc19-0734. Epub 2019 Oct 3. PMID: 31582428; PMCID: PMC6868459.

⁶ Malik VS, Hu FB. Sugar-Sweetened Beverages and Cardiometabolic Health: An Update of the Evidence. *Nutrients*. 2019 Aug 8;11(8):1840. doi: 10.3390/nu11081840. PMID: 31398911; PMCID: PMC6723421

⁷ Neuenschwander M, Ballon A, Weber KS, Norat T, Aune D, Schwingshackl L, Schlesinger S. Role of diet in type 2 diabetes incidence: umbrella review of meta-analyses of prospective observational studies. *BMJ*. 2019 Jul 3;366:l2368. doi: 10.1136/bmj.l2368. PMID: 31270064; PMCID: PMC6607211.

- ⁸ 2025 Dietary Guidelines Advisory Committee. 2024. Scientific Report of the 2025 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Health and Human Services and Secretary of Agriculture. U.S. Department of Health and Human Services. <https://doi.org/10.52570/DGAC2025>
- ⁹ Nguyen M, Jarvis SE, Tinajero MG, Yu J, Chiavaroli L, Mejia SB, Khan TA, Tobias DK, Willett WC, Hu FB, Hanley AJ, Birken CS, Sievenpiper JL, Malik VS. Sugar-sweetened beverage consumption and weight gain in children and adults: a systematic review and meta-analysis of prospective cohort studies and randomized controlled trials. *Am J Clin Nutr*. 2023 Jan;117(1):160-174. doi: 10.1016/j.ajcnut.2022.11.008. Epub 2022 Dec 20. PMID: 36789935.
- ¹⁰ 2025 Dietary Guidelines Advisory Committee. 2024. Scientific Report of the 2025 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Health and Human Services and Secretary of Agriculture. U.S. Department of Health and Human Services. <https://doi.org/10.52570/DGAC2025>
- ¹¹ Dietary Guidelines Advisory Committee. 2015. Scientific Report of the 2015 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Health and Human Services and the Secretary of Agriculture. U.S. Department of Agriculture, Agricultural Research Service, Washington, DC
- ¹² Moynihan PJ, Kelly SAM. Effect on Caries of Restricting Sugars Intake: Systematic Review to Inform WHO Guidelines. *Journal of Dental Research*. 2014;93(1):8-18. doi:[10.1177/0022034513508954](https://doi.org/10.1177/0022034513508954)
- ¹³ Valenzuela MJ, Waterhouse B, Aggarwal VR, Bloor K, Doran T. Effect of sugar-sweetened beverages on oral health: a systematic review and meta-analysis. *Eur J Public Health*. 2021 Feb 1;31(1):122-129. doi: 10.1093/eurpub/ckaa147. PMID: 32830237.
- ¹⁴ Martínez Steele E, Baraldi LG, Louzada ML, Moubarac JC, Mozaffarian D, Monteiro CA. Ultra-processed foods and added sugars in the US diet: evidence from a nationally representative cross-sectional study. *BMJ Open*. 2016 Mar 9;6(3):e009892. doi: 10.1136/bmjopen-2015-009892. PMID: 26962035; PMCID: PMC4785287.
- ¹⁵ Reyes M, Smith Taillie L, Popkin B, Kanter R, Vandevijvere S, Corvalán C. Changes in the amount of nutrient of packaged foods and beverages after the initial implementation of the Chilean Law of Food Labelling and Advertising: A nonexperimental prospective study. *PLoS Med*. 2020 Jul 28;17(7):e1003220. doi: 10.1371/journal.pmed.1003220. PMID: 32722710; PMCID: PMC7386631.
- ¹⁶ Taillie LS, Bercholz M, Popkin B, Rebolledo N, Reyes M, Corvalán C. Decreases in purchases of energy, sodium, sugar, and saturated fat 3 years after implementation of the Chilean food labeling and marketing law: An interrupted time series analysis. *PLoS Med*. 2024 Sep 27;21(9):e1004463. doi: 10.1371/journal.pmed.1004463. PMID: 39331649; PMCID: PMC11432892.
- ¹⁷ Taillie LS, Bercholz M, Popkin B, Reyes M, Colchero MA, Corvalán C. Changes in food purchases after the Chilean policies on food labelling, marketing, and sales in schools: a before and after study. *Lancet Planet Health*. 2021 Aug;5(8):e526-e533. doi: 10.1016/S2542-5196(21)00172-8. PMID: 34390670; PMCID: PMC8364623.
- ¹⁸ Coyle DH, Shahid M, Parkins K, Hu M, Padovan M, Dunford EK. An Evaluation of the Nutritional and Promotional Profile of Commercial Foods for Infants and Toddlers in the United States. *Nutrients*. 2024; 16(16):2782. <https://doi.org/10.3390/nu16162782>
- ¹⁹ Maalouf J, Cogswell ME, Bates M, Yuan K, Scanlon KS, Pehrsson P, Gunn JP, Merritt RK. Sodium, sugar, and fat content of complementary infant and toddler foods sold in the United States, 2015. *Am J Clin Nutr*. 2017 Jun;105(6):1443-1452. doi: 10.3945/ajcn.116.142653. Epub 2017 Apr 19. PMID: 28424192.
- ²⁰ Cogswell ME, Gunn JP, Yuan K, Park S, Merritt R. Sodium and sugar in complementary infant and toddler foods sold in the United States. *Pediatrics*. 2015 Mar;135(3):416-23. doi: 10.1542/peds.2014-3251. Epub 2015 Feb 2. PMID: 25647681.
- ²¹ Fleming-Milici F, Phaneuf L, Harris JL. Marketing of sugar-sweetened children's drinks and parents' misperceptions about benefits for young children. *Matern Child Nutr*. 2022 Jul;18(3):e13338. doi: 10.1111/mcn.13338. Epub 2022 Feb 24. PMID: 35199914; PMCID: PMC9218304.
- ²² Choi YY, Ludwig A, Harris JL. US toddler milk sales and associations with marketing practices. *Public Health Nutr*. 2020 Apr;23(6):1127-1135. doi: 10.1017/S1368980019003756. Epub 2020 Feb 4. PMID: 32014070; PMCID: PMC10200562.
- ²³ 2025 Dietary Guidelines Advisory Committee. 2024. Scientific Report of the 2025 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Health and Human Services and Secretary of Agriculture. U.S. Department of Health and Human Services. <https://doi.org/10.52570/DGAC2025>
- ²⁴ Rebolledo N, Bercholz M, Adair L, Corvalán C, Ng SW, Taillie LS. Sweetener Purchases in Chile before and after Implementing a Policy for Food Labeling, Marketing, and Sales in Schools. *Curr Dev Nutr*. 2022 Dec 23;7(2):100016. doi: 10.1016/j.cdnut.2022.100016. PMID: 37180088; PMCID: PMC10111599.
- ²⁵ Rebolledo N, Reyes M, Popkin BM, Adair L, Avery CL, Corvalán C, Ng SW, Taillie LS. Changes in nonnutritive sweetener intake in a cohort of preschoolers after the implementation of Chile's Law of Food Labelling and Advertising. *Pediatr Obes*. 2022 Jul;17(7):e12895. doi: 10.1111/ijpo.12895. Epub 2022 Jan 27. PMID: 35088571.
- ²⁶ Rebolledo N, Bercholz M, Corvalán C, Ng SW, Taillie LS. Did the sweetness of beverages change with the Chilean Food Labeling and Marketing Law? A before and after study. *Front Nutr*. 2022 Oct 28;9:1043665. doi: 10.3389/fnut.2022.1043665. PMID: 36386952; PMCID: PMC9650246.
- ²⁷ Witkowski M, Nemet, I., Alamri, H. et al. The artificial sweetener erythritol and cardiovascular event risk. *Nat Med* 29, 710–718 (2023). <https://doi.org/10.1038/s41591-023-02223-9>
- ²⁸ Azad MB, Abou-Setta AM, Chauhan BF, Rabbani R, Lys J, Copstein L, Mann A, Jeyaraman MM, Reid AE, Fiander M, MacKay DS, McGavock J, Wicklow B, Zarychanski R. Nonnutritive sweeteners and cardiometabolic health: a systematic review and meta-analysis of randomized controlled trials and prospective cohort studies. *CMAJ*. 2017 Jul 17;189(28):E929-E939. doi: 10.1503/cmaj.161390. PMID: 28716847; PMCID: PMC5515645.
- ²⁹ Rios-Leyvraz M, Montez J. Health effects of the use of non-sugar sweeteners: a systematic review and meta-analysis. Geneva: World Health Organization; 2022. Licence: CC BY-NC-SA 3.0 IGO.
- ³⁰ Baker-Smith CM, de Ferranti SD, Cochran WJ; COMMITTEE ON NUTRITION, SECTION ON GASTROENTEROLOGY, HEPATOLOGY, AND NUTRITION. The Use of Nonnutritive Sweeteners in Children. *Pediatrics*. 2019 Nov;144(5):e20192765. doi: 10.1542/peds.2019-2765. PMID: 31659005.