American Dietetic Association's Response to FDA Questions on Methyl Mercury in Fish

November 8, 2000

1. *FDA: Given the NAS report and the emissions standards set by the Environmental Protection Agency (EPA), should FDA revise its advisory to consumers (and in particular to vulnerable populations such as pregnant women and women who may become pregnant)? If so, what should the new advisory say?*

   ADA: There is no reason to consider immediate changes to FDA's current consumer advisory on the topic of seafood and mercury. The American Dietetic Association does not see any need for FDA to take action to revise the consumer advisory without considering the data from the Seychelles Island Study. This study represents the second part of an important longitudinal study will provide the most comprehensive and relevant information to date on the issue of seafood and mercury.

   Given that fish consumption plays an important role in a healthful diet, the American Dietetic Association is concerned that expansion of the current advisory for pregnant women and women of childbearing age to limit consumption of shark and swordfish to no more than once a month to one that would recommend a greater restriction of fish consumption would be premature.

2. *FDA: Given the potential nutritional contribution of fish and seafood to a healthful diet, should a consumer advisory be crafted so that it conveys the benefit/risk balance of methyl mercury-containing fish? If so, what should be the content of such a message?*

   ADA: If the remaining study results from the Seychelles Study indicate a need for a revised consumer advisory, then ADA recommends that FDA inform consumers how to minimize their exposure to methyl mercury. Basically, consumers would be advised to eat a small amount of a variety of fish and seafood rather than large amounts of one species that may be high in methyl mercury. In addition, consumers should limit their total fish intake to the FDA-recommended 2.2 pounds per week.

3. *FDA: With additional Seychelles study data expected to be released next spring, what impact, if any, should such new data have on the timing and content of any FDA advisory?*

   ADA: We believe that FDA should wait and consider the new data to determine whether this information should influence a decision to revise the consumer advisory. According to the Environmental Protection Agency the typical American consumer ingests less than a third of an ounce of fish per day.

Therefore, the amount consumers are exposed to is considerably less than the current guideline of 0.1 micrograms of methyl mercury per kilogram of body weight.

4. *FDA: What other factors, if any, should impact a decision on whether and how to revise the current consumer guidance?*

ADA: It is important to consider the nutritional ramifications of restricting or eliminating fish from the diet because of a potential environmental contaminant. Elimination of an entire type of food or food group from the diet is generally unwise from a nutritional standpoint. Fish is an excellent source of lean protein, vitamins and minerals. In addition, research has shown that omega-3 fatty acids found in certain species of fish help lower the risk of heart disease and other health conditions. Eating a variety of types of fish does not put anyone in danger of methyl mercury toxicity.

The American Dietetic Association recommends eating 2-3 fish meals per week, and points to fish as a low-fat source of protein that may help lower cholesterol. In addition, research shows a number of benefits from consuming omega-3 fatty acids, found mainly in fatty, cold water fish such as tuna, salmon, sardines, mackerel and lake trout. The ADA position paper on Women's Health and Nutrition (1999) also recommends consuming fish 2 to 3 times per week.

5. *FDA: What methods of communication should FDA use to best convey such a consumer advisory?*

ADA: We are in favor of analyses and risk assessments to determine areas where there is industrial mercury pollution and the levels of mercury in fish may be high. If it is found that some species have reached the FDA limit for human consumption of 1 ppm, then we support appropriate FDA action. In particular, it is our preference that FDA encourage state and local governments to alert their communities with advisories about which waters to fish and what species are safe for consumption.

6. *FDA: How could FDA measure its success in reaching the consumer audience, including vulnerable populations?*

ADA: FDA could measure its success in reaching consumer audiences by working with (and funding) state departments of health. They are the logical organizations to contact their vulnerable populations and inquire about their consumption patterns of fish and seafood.