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THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

23 Jan 98

**MEMORANDUM FOR:** SURGEON GENERAL OF THE ARMY  
SURGEON GENERAL OF THE NAVY  
SURGEON GENERAL OF THE AIR FORCE

**SUBJECT:** Policy for Promoting the Routine Use of a Folic Acid (Vitamin) Supplement as Part of the Military Health Systems (MHS) Prevention Program

Neural tube defects (NTDs) such as spina bifida and anencephaly are among the most common and serious birth defects affecting approximately 2,500 newborns each year. NTDs are also a factor in many additional miscarriages and stillbirths. Scientific evidence indicates that the incidence of neural tube defects can be significantly reduced through the daily ingestion of 0.4mg of folic acid before conception and during early pregnancy. Studies have shown that most women do not consume a diet adequate in folate and that half of pregnancies in the U.S. are unplanned. Since NTDs occur early in the pregnancy, often before a woman realizes she is pregnant, the U.S. Public Health Service recommendation is that all women consume 0.4mg of folic acid each day. The U.S. Preventive Services Task Force supports this recommendation.

There is also a growing body of evidence indicating that folic acid consumption (0.4mg/day) may decrease the risk of occlusive cardiovascular disease by lowering plasma homocysteine levels. The MHS has an opportunity to make a positive impact upon the prevention of NTDs and other illnesses by promoting diets rich in folates and by promoting and consumption of folic acid-containing supplements. Fruits and vegetables are rich in folate, and most breakfast cereals have at least 100 micrograms of folic acid per serving,--some of them have 400 micrograms per serving. Promoting increased consumption of enriched cereal grains will also increase folic acid consumption as they will be fortified with about 40 micrograms per serving by January 1, 1998.

A folic acid-containing supplement should be offered/dispensed to all active-duty recruits, both male and female, during basic training. A daily supplement should continue to be strongly encouraged as well as a diet rich in folates and folic acid.

Primary care managers (PCMs), women's health care providers, and health promotion educators should advise all adult MHS beneficiaries of the protective benefits of folic acid. We should encourage diets rich in fruits, vegetables and grains, and the regular consumption of a folic acid-containing supplement.

Women who have had an NTD pregnancy should be informed when planning a pregnancy that they

should see a health care provider because current recommendations for this population differ from the general guidelines for all women.

I ask that each of the Services develop a plan to promote improved folate/folic acid intake by MHS beneficiaries. Plans should complement the efforts of the Put Prevention Into Practice Program (PIIP) and should employ public health nutrition campaigns, such as "5 a Day," or other behavior modification techniques as needed.

Please provide me with a copy of your plan to implement this undertaking by March 31, 1998. My point of contact for this initiative is COL Bill Strampel at (703) 695-6800 or email at wstrampel@ha.osd.mil.



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Acting Assistant Secretary of Defense

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